



Connecticut Department of Public Health

Testimony Presented Before the Public Health Committee

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**Commissioner Raul Pino, M.D., M.P.H.
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House Bill #6540 - An Act Concerning the Prevention of HIV

The Department of Public Health (DPH) supports and provides the following information in regards to House Bill #6540, which would increase access to preventative and prophylactic interventions for minors who are at risk of exposure to Human Immunodeficiency Virus (HIV). Thank you for the opportunity to testify on this important issue.

The proposed bill would amend the general statutes to permit a minor to access HIV prophylaxis in healthcare settings. The ability of minors to seek confidential examinations for HIV and to consent to necessary treatment is vital to the health of adolescents in Connecticut. Additionally, the proposed bill is intended to promote increased access to preventative care for HIV by minors. The Department is in favor of this concept.

Young people face a disproportionate burden of sexually transmitted diseases (STDs), both nationally and in Connecticut. This population is also at highest risk for HIV infection – a relatively new development. While newly diagnosed HIV infections have declined over the last decade for individuals 30 and over, young people are now the group most impacted by HIV. From 2013 to 2017, 266 youth (aged 13-24 years) were newly diagnosed with HIV in Connecticut, which averages 53 per year.

Fear of judgement or reprimand regarding their sexual activity is an important concern for young people and can lead to avoidance of early and appropriate screening and treatment for STDs, including HIV. The risk of youth avoiding necessary care due to fear of consequences is even greater for sexual minority youth - those who have same-sex sexual partners or identify as gay, lesbian, bisexual, transgender or gender non-conforming. In seeking parental consent for sexual health care, these young people face the additional burden of potentially disclosing their sexual orientation or gender identity. Untreated STDs can result in serious and permanent harm to individuals and threaten the public's health by exposing future sexual partners to infection. HIV infection remains incurable, despite significant advances in treatment. Prevention of STDs, and particularly HIV, is the best approach for individual and population health and is generally cost-effective or cost-saving, reducing expenditures on treatment and other downstream costs.

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The proposed bill would increase access for minors to preventative care. Of note, this care could include the appropriate provision of pre-exposure prophylaxis (PrEP), a prescription medication and accompanying treatment plan that is a unique and highly effective HIV-prevention method. Truvada®, the medication used for PrEP, was approved by the Food and Drug Administration (FDA) for use as a prophylactic treatment in 2012 for HIV-negative adults at high-risk of HIV infection. It has been a safe and effective component of HIV-treatment regimens for individuals, including adolescents and children, living with HIV since 2004. PrEP holds significant promise as a carefully considered choice for HIV prevention in a population that needs more preventative options. In fact, in May of 2016, the FDA approved the use of Truvada® for PrEP for adolescents. Studies have shown the useful effects of PrEP when used by adolescents without evidence of any harmful effects.

DPH supports allowing young people and their physicians the full complement of available methods to prevent the acquisition of and treatment of HIV. This statutory change is an important step in making PrEP and other state of the art prevention methods available to those at highest risk of infection.

Thank you for your consideration of this information.