



November 3, 2023

Submitted via www.regulations.gov¹

ATTN: CDC-2023-0080
Centers for Disease Control and Prevention (CDC)
CC: Dept. of Health and Human Services (HHS)
1600 Clifton Road NE
Mailstop U12-3
Atlanta, GA 30329

Re: DOCKET ID CDC-2023-0080, Guidelines for the Use of Doxycycline Post-Exposure Prophylaxis for Bacterial Sexually Transmitted Infection (STI) Prevention; Request for Comment and Informational Presentation

I am writing on behalf of Equitas Health, which is headquartered in Columbus, Ohio, to express comments on the rule proposed by the Centers for Disease Control and Prevention (CDC) in regard to the use of doxycycline post-exposure prophylaxis (DoxyPEP). Equitas Health is pleased to submit these comments in response to the Centers for Disease Control and Prevention's (CDC's or Agency's) Draft Guidelines for the Use of Doxycycline Post-Exposure Prophylaxis for Bacterial Sexually Transmitted Infection (STI) Prevention; Request for Comment and Informational Presentation.

Equitas Health is a non-profit community health center and one of the largest LGBTQ+ and HIV/AIDS serving healthcare organizations in the country. Each year, we serve tens of thousands of patients in Ohio, Texas, Kentucky, and West Virginia, and since 1984, we have been working to advance "care for all." Our mission is to be the gateway to good health for those at risk of or affected by HIV; for the lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ+) community; and for those seeking a welcoming healthcare home. In doing so, we offer primary and specialized medical care, pharmacy services, dentistry, mental health and recovery services, HIV/STI prevention and treatment services, Ryan White HIV case management, overall care navigation, and a number of community health initiatives.² Regarding this public comment, the evidence-based implementation of a STI prevention rule via DoxyPEP is deeply important to our agency, our patients, and our broader community.

Recommendation 1: We strongly encourage the CDC to issue a non-discriminatory and evidence-based Final Guidance in relation to the use of DoxyPEP.

¹ Document prepared by Rhea Debussy, Ph.D. (she/her), Director of External Affairs. Document reviewed by Sam Brinker (he/him), General Counsel; Adrianna Udinwe (she/her), Associate General Counsel; and Sarah Green (they/she), Administrative Assistant – Advancement.

² <https://equitashealth.com/about-us/>

We applaud this recently proposed, evidence-based guidance related to DoxyPEP, and this proposed guidance is especially important to the broader LGBTQ+ community, given the community's long history of activism related to sexual health and well-being.³ We also appreciate that this proposed guidance has been crafted in a non-discriminatory manner, which will help to prevent further stigma from being imposed upon members of the LGBTQ+ community.

As you are aware, this guidance is especially important in the fight against rising STIs across the country, and it is encouraging that the CDC has issued an evidence-based guidance similar to the existing guidance for HIV prevention tools (i.e. pre-exposure prophylaxis or PrEP,⁴ post-exposure prophylaxis or PEP,⁵ and more⁶) and treatment (anti-retroviral therapy or ART⁷) efforts. If implemented, this guidance would certainly provide additional tools to help in the fight against STIs, and for this reason, we strongly support the implementation of a final guidance that remains both non-discriminatory and evidence-based in nature.

Recommendation 2: We strongly encourage the CDC to actively promote the use of DoxyPEP for the prevention of bacterial sexually transmitted infections (STIs), such as chlamydia, gonorrhea, and syphilis.

As noted by the CDC, recent data shows that the new STIs are being diagnosed at alarming rates, and from 2020-2021, chlamydia, gonorrhea, and syphilis all increased to more than 2.5 million reported cases. A 2023 report from the CDC also notes the following: 1) gonorrhea rates have increased by more than 4% nationally, 2) chlamydia rates increased by nearly 4%, and 3) syphilis rates increased by over 30%.⁸ However, this proposed rule can help to reduce these rates nationally, which is especially important to communities facing existing health disparities related to sexual health and well-being.

As noted in the CDC's 2021 data, new STIs disproportionately impacted gay, bisexual, and queer men; younger people; members of the Black community; and Indigenous populations.⁹ Recent studies – such as those from the *American Journal of Public Health* – have continued to note that sexual health disparities remain especially prevalent for gay, bisexual, and queer men; transgender women; non-binary people; and other subpopulations of the broader LGBTQ+ community.¹⁰

As noted by the CDC's own supplemental publication¹¹ to the *Journal of Public Health Management and Practice's* health equity issue¹² from 2016, the road to health equity requires both successful

³ Gould, Deborah. 2009. *Moving Politics: Emotion and ACT UP's Fight Against AIDS*. Chicago: University of Chicago Press. See also Shilts, Randy. 1987. *And The Band Played On: Politics, People, and the AIDS Epidemic*. New York: ST. Martin's Press. & France, David. 2016. *How to Survive a Plague: The Story of How Activists and Scientists Tamed AIDS*. New York: Vintage Books.

⁴ <https://www.cdc.gov/hiv/basics/prep.html>

⁵ <https://www.cdc.gov/hiv/risk/pep/index.html>

⁶ <https://www.sfaf.org/resource-library/u-equals-u/>

⁷ <https://www.cdc.gov/hiv/risk/art/index.html>

⁸ <https://www.cdc.gov/media/releases/2023/s0411-sti.html>

⁹ *Ibid.*

¹⁰ <https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2018.304751>

¹¹ https://www.cdc.gov/minorityhealth/publications/health_equity/index.html

¹² https://journals.lww.com/jphmp/citation/2016/01001/strengthening_the_science_and_practice_of_health.1.aspx

health equity programs and regulations/rules that improve population health. And of course, the data demonstrates that the proposed rule for DoxyPEP can help to reduce the aforementioned disparities. Regarding the efficacy of DoxyPEP, studies have found that DoxyPEP, when taken as prescribed, can reduce the risk of acquiring a bacterial STI by up to 70%.¹³ Given these findings, we strongly encourage the CDC to actively promote the use of DoxyPEP for the prevention of bacterial STIs, such as chlamydia, gonorrhea, and syphilis.

Recommendation 3: We strongly recommend the CDC to consult with LGBTQ+ and HIV/AIDS focused community health centers and advocacy organizations when releasing future adjustments to this proposed rule, which will help to ensure that proposed revisions to the agency’s rules are crafted with culturally humility and community input.

The recommendations above – including our final recommendation of consulting with LGBTQ+ and HIV/AIDS focused community health centers and advocacy organizations – are vital to the successful creation and implementation of a non-discriminatory and evidence-based policy on STI prevention with DoxyPEP. As noted above, the CDC should actively consult such organizations to ensure that these rules and related policies are informed by science not stigma. Such a goal requires the active assistance of LGBTQ+ and HIV/AIDS focused community health centers and advocacy organizations, given the decades-long discrimination that the broader LGBTQ+ community has faced from governmental healthcare agencies like the CDC, FDA, and HHS.¹⁴

And to be clear, the CDC should be a leader – not a follower – in the international community, in regard to the use of DoxyPEP for STI prevention and related policies. However, it should be noted that such leadership requires a culturally humble, consistent, proactive, and community-invested review of agency recommendations for STI prevention rules and related policies, which should continue to be informed by LGBTQ+ and HIV/AIDS focused community health centers and advocacy organizations.

Concluding Remarks: To conclude, we strongly recommend that the CDC do the following:

- 1) To issue a non-discriminatory and evidence-based Final Guidance in relation to the use of DoxyPEP;
- 2) To actively promote the use of DoxyPEP for the prevention of bacterial sexually transmitted infections (STIs), such as chlamydia, gonorrhea, and syphilis; and
- 3) To consult with LGBTQ+ and HIV/AIDS focused community health centers and advocacy organizations when releasing future adjustments to this proposed rule, which will help to ensure that proposed revisions to the agency’s rules are crafted with culturally humility and community input.

¹³ <https://www.cdc.gov/std/treatment/doxycycline-as-pep-toe.htm>

¹⁴ *Supra* note 3.

Equitas Health thanks you for this opportunity to present comments on the proposed rule. And again, we are encouraged and strongly supportive of these important updates to the CDC recommendations, and we are confident that these changes will help to prevent bacterial sexually transmitted infections (STIs), while also decreasing stigma around conversations about sexual health and well-being. Should you have any questions about our comments, please feel free to contact Dr. Rhea Debussy (she/her), Director of External Affairs at Equitas Health.