

Telemedicine & DoxyPEP for Smarter, Sexier Health

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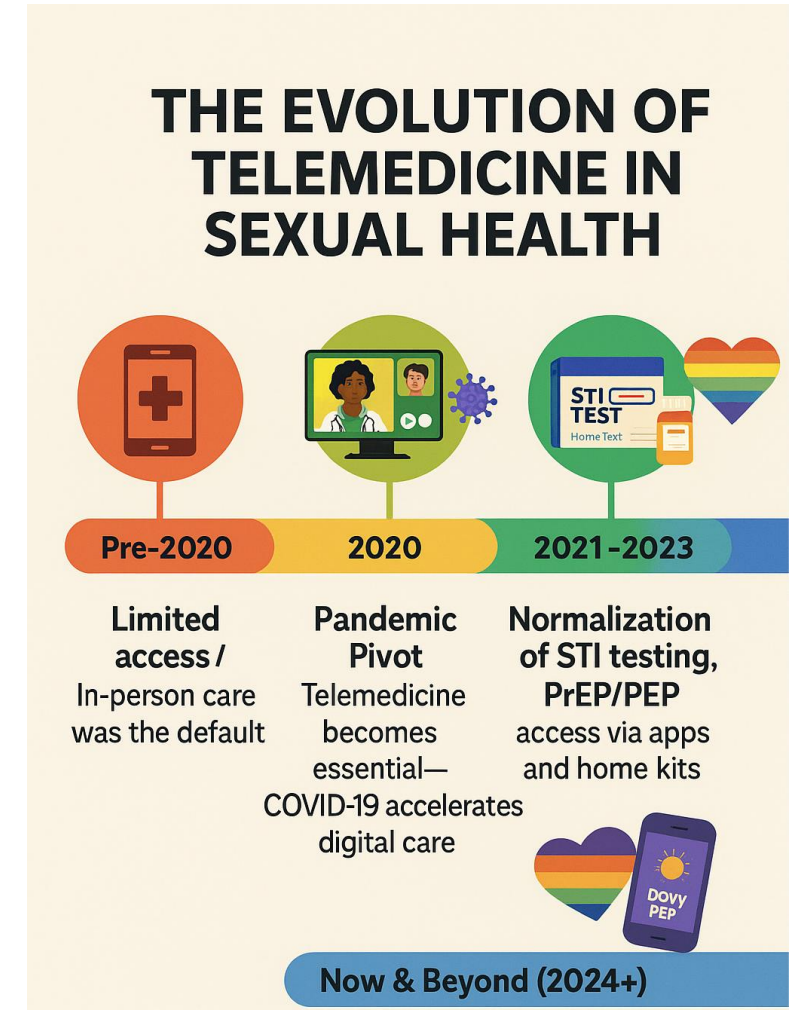
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From Niche to Necessary: The Rise of Telemedicine in Sexual Health

How we got here – a quick look at the journey:

- **Before 2020:** telehealth was a nice-to-have, mostly for rural areas or specialty care. STI services? Rarely part of the conversation.
- **COVID Era:** the pandemic broke barriers—suddenly, virtual became vital. STI testing, PrEP, and PEP moved online. Demand skyrocketed.
- **2021–2023:** the digital shift stuck. At-home test kits, app-based refills, and remote consultations became the new normal for many—especially certain groups seeking care.
- **Today and Beyond:** telemedicine is a **cornerstone of STI prevention**, breaking down hurdles and enabling tools like **DoxyPEP** to reach the people who need them most.



What's Turning People On to Prevention? Telehealth That Works

The digital tools that are changing the game:

- **Home Testing, On Your Terms:**
Discreet, reliable STI and HIV test kits shipped to your door—no judgment, no waiting room. Follow-up happens via telehealth, often within 24–48 hours.
- **App-Based and SMS Support:**
Refills? Appointments? No problem. Automated reminders via text or app keep folks on track—whether it's DoxyPEP, PrEP, or treatment.
- **Risk Assessments Made Easy:**
Online questionnaires tailor recommendations for PrEP, PEP, or STI testing—making digital intake smarter and faster.
- **Built-In Privacy and Comfort:**
Users can access services from anywhere—on their couch, in their car, or even at work. Privacy and flexibility = higher engagement, especially for certain communities.

DoxyPEP

A Promising Prevention Tool

- Doxycycline as post-exposure prophylaxis (PEP) for bacterial STIs (gonorrhea, chlamydia, syphilis).
- Shown to reduce incidence when taken within 72 hours of sex.
- Works well when paired with telehealth counseling and follow-up.
- Pilot programs expanding in urban centers.

DoxyPEP: Take. Time. Protect.



Within
72 Hours



Helps prevent
gonorrhea,
chlamydia &
syphilis

Simple. Smart. STI Prevention.

Centering Access: What Makes Digital Prevention Actually Work

The real-world lessons we can't ignore:

- **Tech Without Access Is Just a Trend:** many folks still lack stable internet or private space. That's why **mobile-first** design and SMS-based tools are critical to reaching the people who need it most.
- **Trust Comes First:** partnerships with **community-based orgs**, sex-positive educators, and peer networks build credibility and connection—especially for those with past negative experiences in healthcare.
- **Language Matters:** tailoring messages by **language, tone, and values** isn't optional—it's essential. Spanish, Creole, Portuguese, and more should be built into every rollout from day one.
- **Judgment-Free Zones:** telehealth creates space for users to talk openly—without judgment, body shaming, or assumptions. This alone increases engagement, especially for certain communities.

Where Do We Go From Here? Let's Talk About It

- If access isn't the issue... is it trust, relevance, or respect?
- DoxyPEP: is it the future of sexual freedom, or just another tool for the few?
- How do we make sure digital tools don't erase the sexual and lived realities of our communities?
- What would STI prevention look like if we designed it for joy—not just risk?

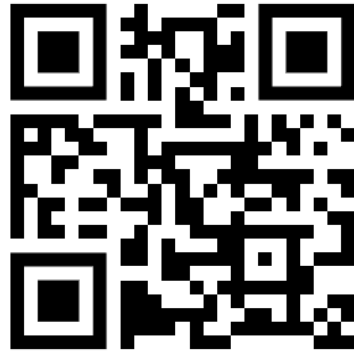


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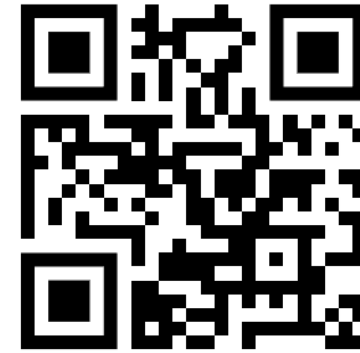
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Any questions?

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