The Big Picture: The current and evolving HIV prevention landscape

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The HIV landscape globally and in SSA

- 38.4 million people living with HIV in 2022
- 36.7 million are 15 years +
- 54% of these are women and girls
- Every week, around 4900 young women aged 15–24 years are infected with HIV

In sub-Saharan Africa

- 6 in 7 new HIV infections among adolescents aged 15–19 years are among girls.
- Young women and girls aged 15–24 years are twice as likely to be living with HIV than young men.
- Women and girls accounted for 63% of all new HIV infections in 2021



What biomedical tools do we have?









Global Oral PrEP Landscape – 11 years in

100,000+
50,000-100,000
25,000-50,000
10,000-25,000
5,000-10,000
1,000-5,000
500-1,000
<500
PrEP Available, No Data
No Data

Source: AVAC Global PrEP Tracker, Q2 2022, https://www.prepwatch.org/country-updates/ PrEP continuation rates decline significantly after 3 months of use – across all populations. Daily pill taking isn't for everyone.

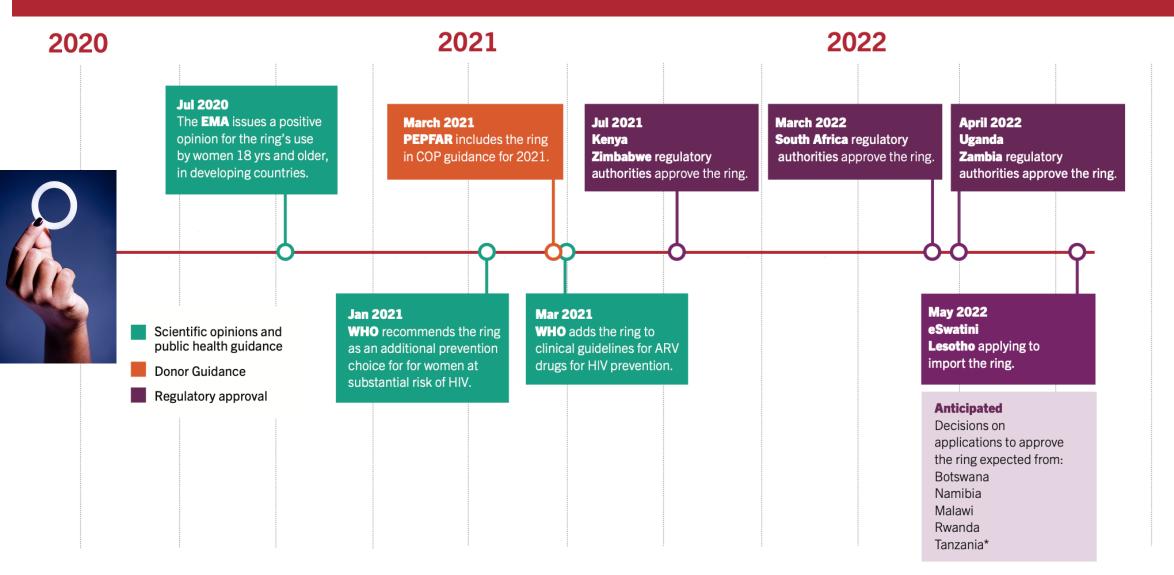


3 million people with access to PrEP

Actual total initiations thru Q2 2022 (approx.): 2.8 million



Access to the Dapivirine Vaginal Ring: A timeline on progress



*Preliminary rejection April 2022; IPM appeal in progress



For more information go to <u>PrEPWatch.org</u>

Cabotegravir long-acting injectable





The CATALYST Study Catalyzing access to new prevention products to stop HIV

- Will involve implementation of an enhanced service delivery package that supports choice among PrEP products that have regulatory approval in each country, such as oral PrEP, PrEP ring and injectable cabotegravir for PrEP
- Will enroll women* at PEPFAR/USAID delivery sites in Kenya, Lesotho, South Africa, Uganda, and Zimbabwe
- To be conducted in two stages with currently approved oral PrEP and PrEP ring offered in Stage I, and the addition of injectable CAB PrEP in Stage II after approval by the regulatory authority in each country

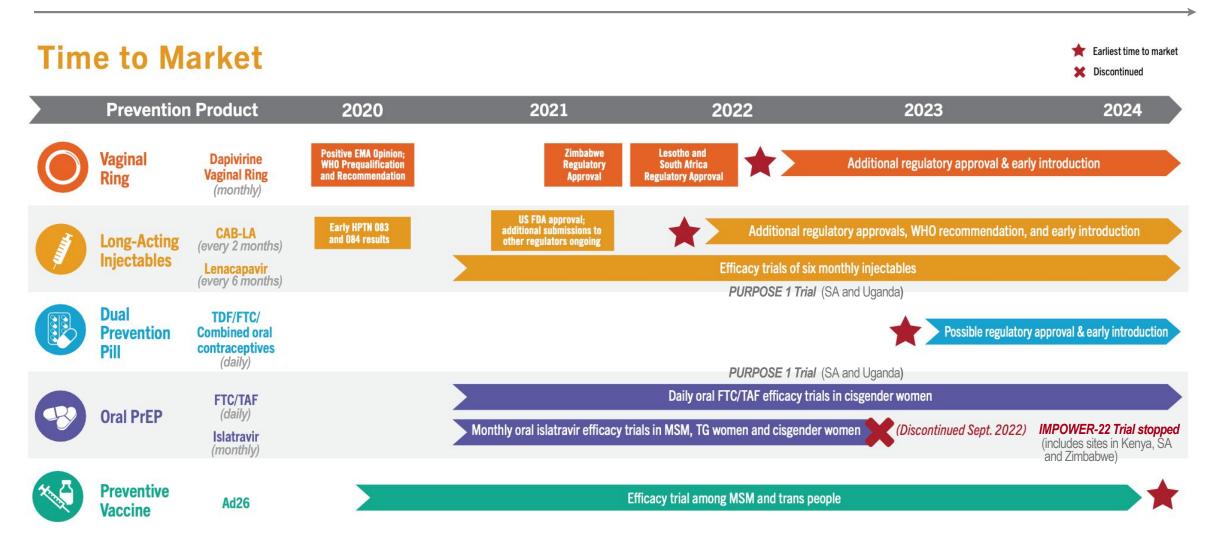
*Inclusive of individuals assigned female at birth of any gender identity or individuals assigned male at birth who identify as women







Years Ahead in HIV Prevention Research





What's most important? It may depend on who you are

Clinical Considerations

- Biologic efficacy
- Dosing/duration
- Reversibility
- Side effect profile
- Systemic/Topical

Policy & Program Considerations

- Delivery channel(s)
- Health system burden
- Product cost
- Program cost
- Provider training
- Demand creation

Personal/End-user Considerations

- Ease of use
- User preference
- User burden
- Discretion of use
- Contribution to stigma



The bottom line

- No one product will work for all people
- Preferences and needs change depending personal circumstances
- While some methods may be more effective than others, no method can be effective if it's not used
- Having choice is important because the more options that are available the more likely one will be used



Acknowledgements



This program was made possible by the generous support of the American people through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and the U.S. Agency for International Development (USAID).

The contents in this presentation are those of the presenter and do not necessarily reflect the view of the U.S. President's Emergency Plan for AIDS Relief, the U.S. Agency for International Development or the U.S. Government.



Thank you