

Long acting injectable antiretrovirals – multidisciplinary team outcomes from a large London HIV service

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BACKGROUND

- With long acting injectable antiretrovirals (LA-ART) commissioned for use in 2022, the new era of injectable therapy has revolutionised HIV treatment.
- Switching patients to LA-ART requires multidisciplinary team discussions (MDT) to ensure appropriate use and service planning.
- We investigated why MDT approval is not granted and why approved patients chose not to start LA-ART.

METHOD

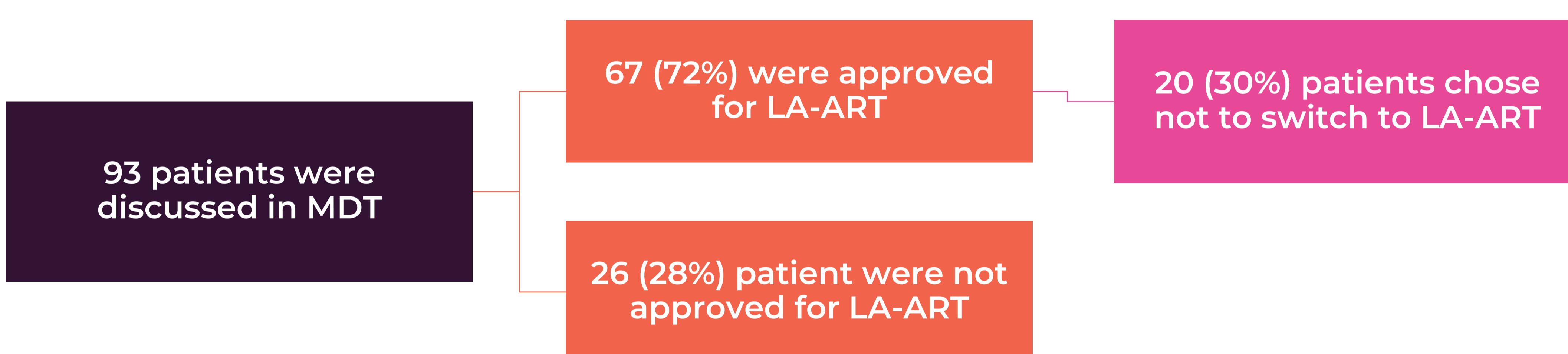
- Between June and December 2022, a database of patients referred for MDT discussion was created and updated using in-house referral forms, including LA-ART criteria (table 1).
- Patient notes were used to determine if MDT approval for LA-ART switch was granted.
- For those that were approved, notes were checked to determine if patients chose to switch following MDT approval.

Table 1: LA-ART criteria for MDT approval*

HIV-1
Viral load undetectable for 6 months
On stable antiretroviral therapy (ART)
No evidence or suspected non-nucleoside reverse transcriptase inhibitor (NNRTI) resistance
No evidence or suspected integrase inhibitor (INSTI) resistance
Has a BMI <30 kg/m ² AND non-A1/6 subtype if baseline resistance unavailable
Does not need TDF/TAF for the treatment or prevention of hepatitis B

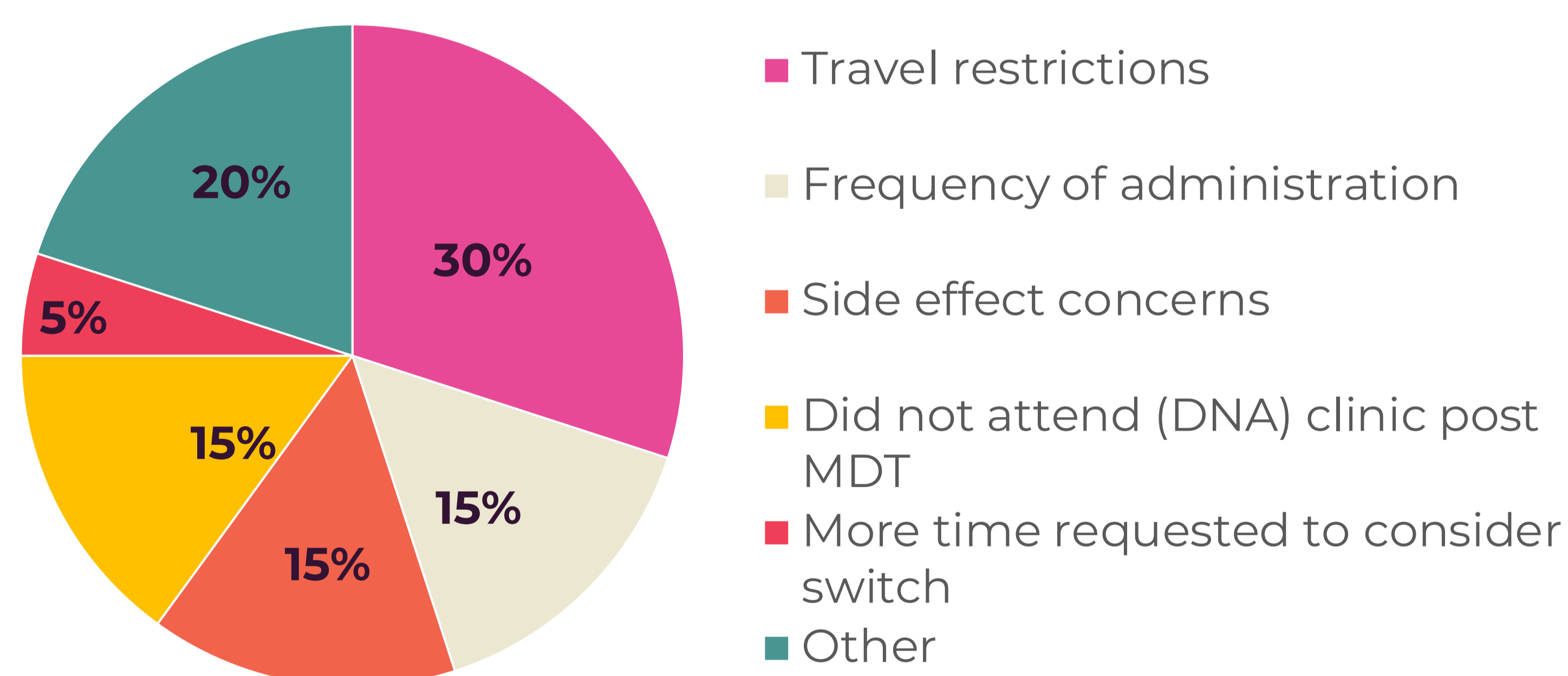
*adapted from NHS/NICE commissioning criteria and BHIVA guidance

RESULTS

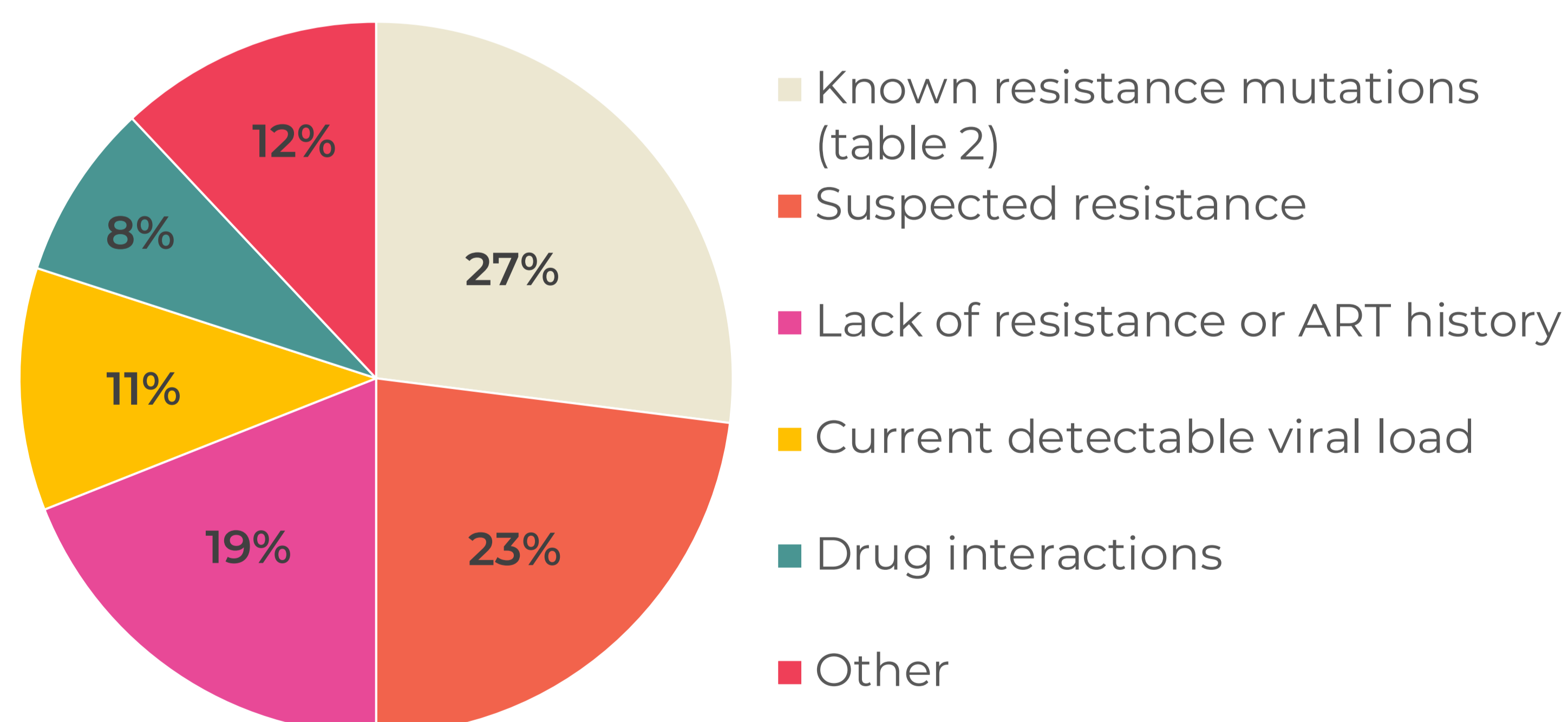


Reported resistance	
Patients not approved for LA-ART due to resistance either had one or multiple of the following (table 2):	
K103N	Y181C
G190A	V09I
M184V	E44D
V106A	V108I

Reasons patients did not switch to LA-ART post ARV MDT approval



Reasons for LA-ART use not approved



CONCLUSION

- The most common reason for not approving LA-ART switches were associated with known or suspected resistance.
- This data calls for clinicians to understand the importance of obtaining thorough ART and resistance information prior to referral.
- The most common reason deterring patients to switch is increase in number of clinic visits given the frequency of injections.
- This data spotlights the need for more thorough conversations about the impact of LA-ART on quality of life, side effects and risk of failure if patient's DNA.
- With an increase in LA-ART demand, services must plan resource wisely to allow for MDT and clinic time to accommodate patients interested in and embarking upon LA-ART.