2024 news: HIV treatment, prevention and complications...



6th UK Conference of people living with HIV, 1 June 2024

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Looking forward...

- Injectable ART: personal experience.
- PrEP exciting changes.
- Statins wider use recommended.
- ART and weight changes GLP-1 drugs.
- Complications: hypertension and bone health.
- Breast/chest feeding guidelines.
- Transgender healthcare and rights



& your questions...

We have plenty of time for discussions and will try to cover any other questions you have too.

- . ?
- . ?
- ?



We are around all day for 1-2-1 talks. i-Base email: questions@i-base.org.uk

Injectable ART

- Long-acting cabotegravir (CAB-LA)
 and rilpivirine (RPV-LA) injections
 (into bottom muscle) every 2 months.
- Needs adherence to 6 visits a year.
- Pipeline: lenacapavir (6 months, sub-cut)
- Immune-based treatments bNAbs might allow breaks from ART. (infusions every 2-6 months).



Personal experience

- Long-acting cabotegravir (CAB-LA) and rilpivirine (RPV-LA)
- Reasons for starting LAIs
- Criteria
- Practicalities
- My experience so far...



Access and cautions

- CAB-LA and RPV-LA switch option.
- Very effective but a low risk of viral rebound with perfect adherence: dualclass resistance and high VL (U=U).
- BHIVA: 1 in 60 risk at two yrs.
- Available across the UK but still limited access.

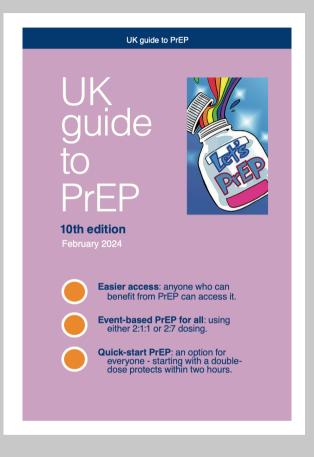
More info: BHIVA guidance: https://www.bhiva.org/ (2022)



PrEP update

i-base.info/guides/prep

- PrEP: highly effective but different dosing and adherence for receptive anal vs vaginal/neovaginal sex.
- Cis women need higher adherence and longer time before protection.
- On demand 2:1:1 only for insertive sex and receptive anal sex.
- UK guidelines 2018 update soon?



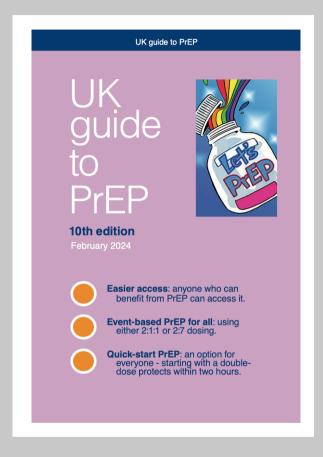
PrEP update

i-base.info/guides/prep

Recent research shows that protection in womens studies was not predicted by drug levels in vaginal tissue.

Also that drug levels from a double dose provides faster and longer protection for everyone.

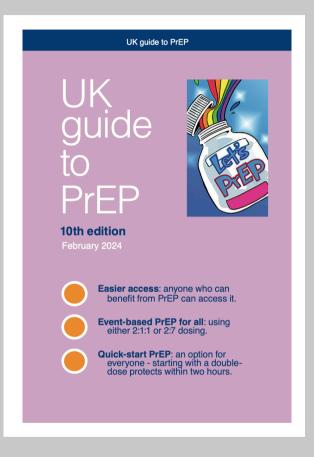
>4 daily doses each week is ok too.



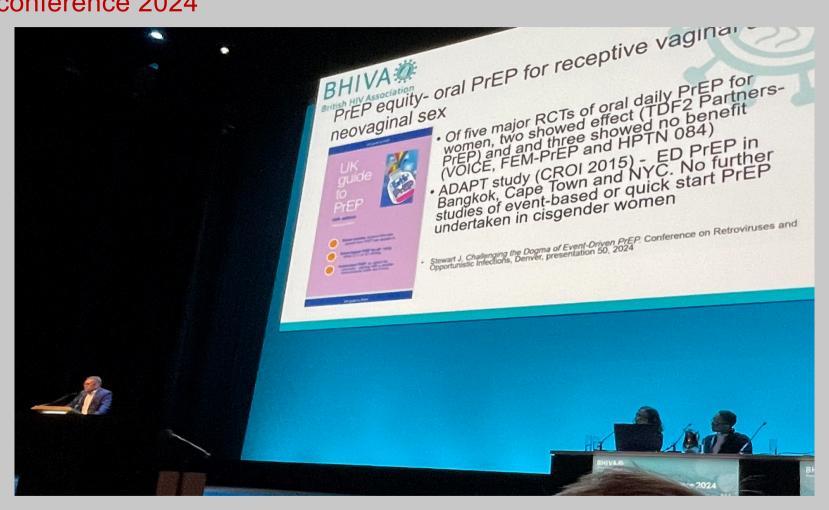
New PrEP options

i-base.info/guides/prep

- Everyone can start with a double dose (2 pills).
- This gives protection after two hours.
- Event-based dosing for women using 2:7 dosing (7 daily doses after)
- Daily PrEP still active with 4 or more doses a week.
- Guidelines still in production...



BHIVA conference 2024



Benefits from statins: >40 years old

- Pitavastatin to reduce risk of heart problems: new UK and US guidelines.
- REPRIEVE study CROI 2023 and 2024.
- Large, randomised, international placebocontrolled in 7769 people with HIV at low 10-year risk (<5%) - but HIV increases risk.
- Stopped early after 5 yrs.

REPRIEVE: Randomised trial to prevent vascular events in HIV.



REPRIEVE results

Statins reduced risk of a major heart event by 35%.

No significant safety differences - monitor for diabetes.

10-year risk	NNT
>10%	35
5-10%	53
2.5%-5%	149
<2.5%	199



NNT = number needed to treat to prevent one major heart-related event.

Statins if older than 40

- Holistic approach (smoking, diet, exercise) to 10-year vs lifetime risk.
- Irrespective or risk or lipid levels but estimating risk might still be important.
- Pitavastatin 4 mg or atorvastatin 20 mg (check interactions.
- Not during pregnancy or breast/chestfeeding.
- Prescription charges via GP.

ART and weight changes...

Unexpected weight changes

over 192 weeks ~ 4 years:

+9 kg in dolutegravir + TAF/FTC.

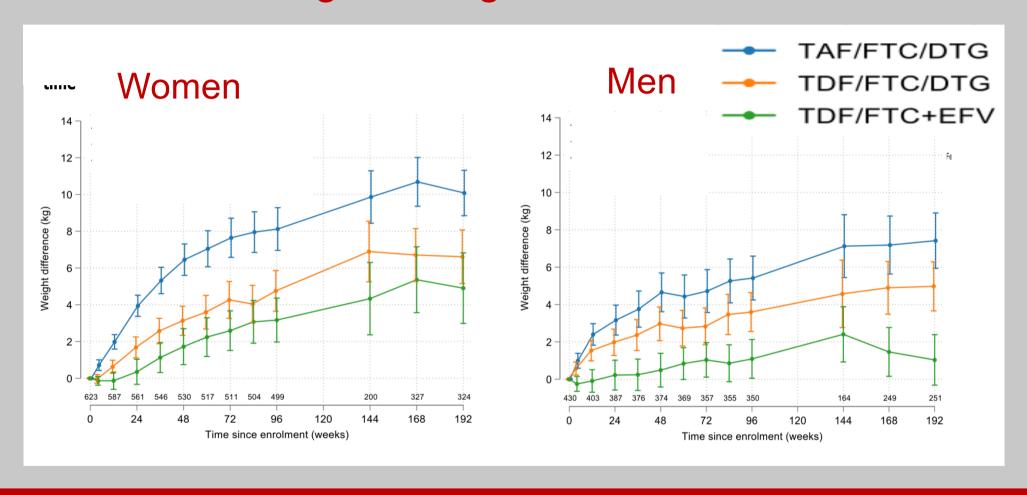
+3 kg efavirenz/TDF/FTC (Atripla).

Greater in African women vs men.

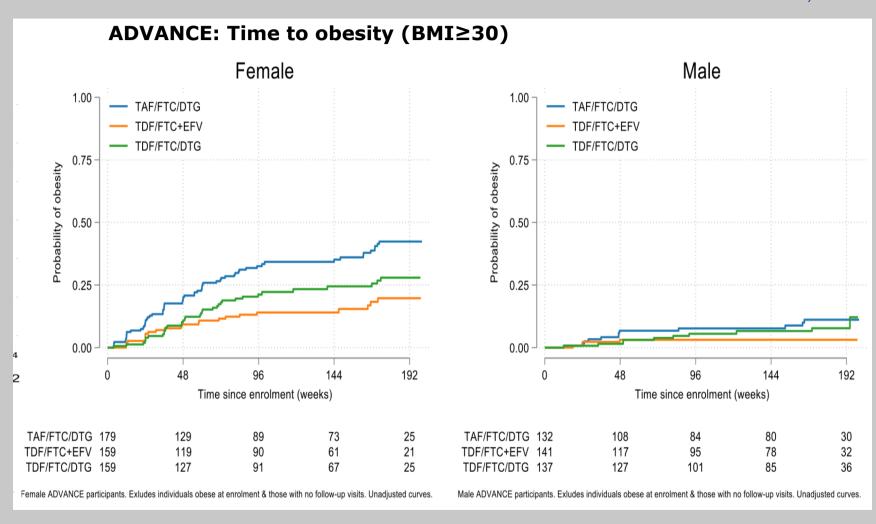
Significantly more women became clinically overweight compared to men (35% vs 12 % at 2 yrs).



ADVANCE: weight changes over time



Venter F et al, AIDS 2022.



ART and weight differences...

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ART and weight differences...

Unexpected weight differences with dolutegravir and TAF explained by:

- Returning to normal weights compared to the general population in SA.
- 2. Both efavirenz and TDF limit weight gain.

But weight gain will impact on quality of life and long-term health. Switching studies showed little benefit, diet and exercise work but difficult to sustain.

Maybe need all together?

GLP-1 drugs... more to come

Semaglutide (Ozempic, Wescovy)

FDA approved: 2017 (diabetes), 2021 (weight loss)

Effective - reduce weight by 15-20%.

Expensive (difficult to access, high demand, reverses effect if stopped, side effects (10% discontinue), some non responders.

Reduces fat from all sites (including face), some lean muscle loss. Blocks reward/addictive behaviour.

Complications and inflammation

- Immune activation is linked to many possible complications. Especially before starting ART.
- Greatly reduced on ART but still residual inflammation that increases our risks a little.
- Heathy lifestyle: stay active, eat well etc.

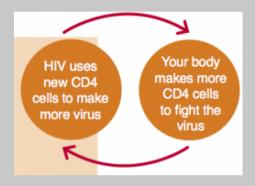
Hypertension

- Definition
- Link to HIV drugs?
- Does it affect people living with HIV differently? Eg, age, gender, ethnicity...
- Risks if left untreated
- How to treat,,,

Bone health

- Low bone mineral density is monitored using FRAX
 every 3 years: 10 yr risk.
 - https://www.bhiva.org/ClinicalCalculators
- Post-menopause, older than 50, other people at high-risk.
- DEXA Osteopenia -1.0 to -2.5
 Osteoporosis less than -2.5
- Calcium, vitamin D, bisphosphonates

The immune system in overdrive



High viral load when not on ART HIV steadily wears down our immune system.

This activations increases risk of heart attacks, cancers and other serious problems.



Complications and inflammation

- Immune inflammation/activation can increase the risk of heart/liver/kidney problems, some cancers.
- Also perhaps neurological and other serious problems.

This is another reason why staying on continuous ART with undetectable viral load is so important.

Breast/chestfeeding guidelines

- When are the latest guidelines due?
- Any updates/ potential changes
- How can people living with HIV get involved?
- Consultation before publication?

Transgender rights

- Medicalised: doctors gatekeep access to gender affirming hormones.
- Long waiting times for all services: years for appointments and then more years for surgery. Puberty blockers now illegal.
- Adult gender clinics face a review which could further restrict trans healthcare.
- We need to support/advocate for trans rights. For equity, to end discrimination.
 Learn more, connect & support.



Learn more, connect & support

TransActual @TransActualCIC

https://x.com/transactualcic

Trans Safety Network @trans_safety

https://x.com/trans_safety

What The Trans @WhatTheTrans

https://x.com/whatthetrans



Questions?



