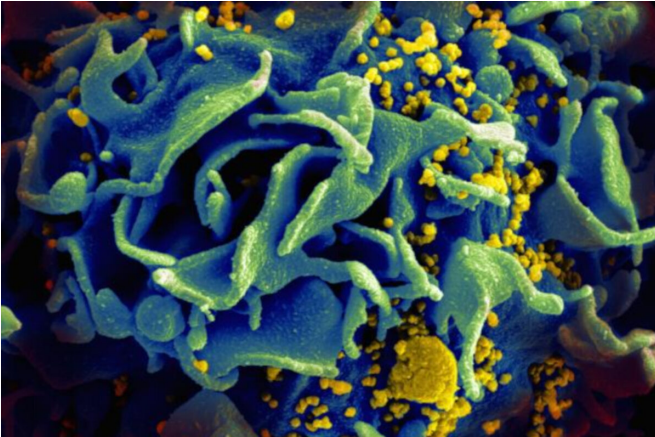


# Study examines attitudes toward long-acting injectable HIV therapy among women

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Microscopic image of an HIV-infected T cell. Credit: NIAID

A study led by Columbia University Mailman School of Public Health researchers examines attitudes toward long-acting injectable (LAI) HIV therapies, among women with a history of injection—including medical purposes and substance use. The findings appear in the journal *AIDS Patient Care and STDs*.

Currently, most HIV therapies for treatment and prevention (pre-exposure prophylaxis, PrEP) necessitate daily pills, which pose barriers to adherence. Recently, however, LAI for HIV has emerged as an alternative with the potential to boost adherence, although little research has been done on how people with a history of injection feel about these new forms of injectable HIV therapy. There 258,000 [women](#) in the United States living with HIV.

The study involved interviews with 89 women across six different sites in the United States. Overall, participants highlighted how LAIs may improve adherence by freeing women of treatment fatigue and reminders associated with daily pill-

taking, thus eliminating potential stigma, and facilitating confidentiality. Most women with a history of periodic injectable medication (such as birth control) would prefer LAI, but those with other frequent injections (such as for diabetes) who expressed a desire to limit the number and frequency of injections and clinic visits might not. Women with a history of injection drug use expressed mixed sentiments: some feared LAI might trigger a recurrence while others felt that familiarity with needles would predispose people who use injection drugs towards LAI.

The authors write that LAI HIV therapies would ideally coincide with existing LAI treatments (e.g., [birth control](#)) to minimize inconvenience and the need for multiple clinic visits, an approach currently used in some clinics that co-locate care for HIV and [substance use](#).

"Future research needs to address injection-related concerns, and develop patient-centered approaches to help providers work with their patients to best identify which women could most benefit from LAI use," says first author Morgan Philbin, Ph.D., assistant professor of sociomedical sciences at Columbia Mailman School. "As LAI ART for HIV treatment and prevention is scaled-up, systems must be created for women and providers to collaborate in order to best identify which women might need additional support for LAI use and which might be better candidates for daily pills."

The researchers conducted in-depth interviews at six sites (New York, NY; Chicago, IL; San Francisco, CA; Atlanta, GA; Chapel Hill, NC; Washington, D.C.) as part of the Women's Interagency HIV Study, including women living with HIV and women at risk for HIV.

**More information:** Morgan M. Philbin et al, A Qualitative Exploration of Women's Interest in Long-Acting Injectable Antiretroviral Therapy Across Six Cities in the Women's Interagency HIV Study:

Intersections with Current and Past Injectable  
Medication and Substance Use, *AIDS Patient Care  
and STDs* (2021). [DOI: 10.1089/apc.2020.0164](https://doi.org/10.1089/apc.2020.0164)

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