

Black Women's Experiences on Long-Acting Cabotegravir for PrEP: Interim Patient Findings From the EBONI Study

Katherine L. Nelson,¹ Zandraetta Tims-Cook,² Helena Kwakwa,³ Megan Dieterich,⁴ Tammeka Evans,¹ Alftan Dyson,¹ Neetu Badhoniya,⁵ Heidi Swygard,¹ Michael Aboud,¹ Kenneth Sutton,¹ Denise Sutherland-Phillips,¹ Dhuly Chowdhury,⁶ Nicole Mack,⁷ Piotr Budnik,⁸ Kimberley Brown,¹ Maggie Czarnogorski,¹ Nanlesta Pilgrim¹

¹ViiV Healthcare, Durham, NC, United States; ²Faebris Medical & Community Education, Atlanta, GA, United States; ³Newlands Health, Philadelphia, PA, United States; ⁴Whitman-Walker Institute, Washington, DC, United States; ⁵GSK, London, United Kingdom; ⁶RTI International, Rockville, MD, United States; ⁷RTI International, Durham, NC, United States; ⁸ViiV Healthcare, London, United Kingdom

Background

In the U.S., Black cisgender and transgender women face a higher risk of HIV, making up about half of new cases among women. Despite this, few use PrEP, a preventive treatment for HIV. Long-acting cabotegravir (CAB LA) is an injectable medication for PrEP offering a convenient alternative to daily pills like tenofovir disoproxil fumarate/emtricitabine (TDF/FTC). This study looks at how CAB LA might support PrEP use among Black women.

What treatment was studied here?

The study focused on CAB LA, a preventive HIV treatment given every 2 months. It's the first long-acting option approved for PrEP in adults and teens, showing better results than daily oral treatments like TDF/FTC.

What was the purpose of this study?

This study aimed to see how CAB LA could be delivered to Black cisgender and transgender women in the U.S., focusing on access, satisfaction, and PrEP use in areas targeted by the Ending the HIV Epidemic initiative.

Who took part in the study and how was the treatment studied?

130 Black cisgender and transgender women from 19 U.S. clinics completed Month 4 surveys from April 2023 to February 2025. Their median age was 37, and all identified as Black or African American. Key goals were to measure PrEP use and access, with additional focus on satisfaction and PrEP decision-making.

What are the research findings?

CAB LA increased PrEP use among Black women, with 46% of participants new to PrEP. It was easily accessible, with 85% reporting no issues attending bi-monthly clinic visits. Satisfaction was high, with 96% expressing positive views and 97% willing to recommend it. Shared decision-making and supportive tools were helpful throughout the first 4 months of their CAB LA experience.

What does this mean for people affected by HIV?

For Black women, facing a higher risk of HIV, CAB LA offers a promising PrEP option due to its accessibility and high satisfaction. The study underscores the value of shared decision-making and supportive tools, which could lead to better adherence and outcomes.

Conclusions

CAB LA was well-received and accessible among Black women, with positive experiences and high satisfaction. Collaborative discussions with healthcare providers were beneficial, confirming the acceptability, feasibility, and appropriateness of CAB LA.

Disclaimer

This content was acquired following an unsolicited medical information enquiry by a healthcare professional. Always consult the product information for your country, before prescribing a ViiV medicine. ViiV does not recommend the use of our medicines outside the terms of their license. In some cases, the scientific Information requested and downloaded may relate to the use of our medicine(s) outside of their license.