

# **One-Year Implementation Outcomes of Cabotegravir Long-Acting Injectable PrEP in Men Who Have Sex With Men (MSM) & Transgender Men (TGM): Findings From the PILLAR Study**

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## **Background**

In the United States, men who have sex with men and transgender men are key groups affected by HIV, making up 67% and less than 1% of new cases, respectively. Cabotegravir long-acting (CAB LA) is a long-acting, pre-exposure prophylaxis (PrEP) injectable approved to help prevent HIV. It is given every 2 months. The PILLAR study is looking at how well CAB LA works for men who have sex with men and transgender men in real-world settings, especially because transgender men are often left out of research.

## **What medicine was studied here?**

This study focuses on CAB LA, which is given as an injection every 2 months. It is designed to prevent HIV by maintaining effective drug levels in the body, so people don't have to take a pill every day.

## **What was the purpose of this study?**

The study aims to see how CAB LA can be delivered to men who have sex with men and transgender men in clinics across the United States. It looks at how practical and acceptable CAB LA is in everyday life, focusing on the experiences of these groups over a year.

### **Who took part in the study and how was the medicine studied?**

Overall, 201 people took part in the study, mostly men who have sex with men (94%) and some transgender men (6%), from May 2022 to August 2023. Participants varied in age, race, and ethnicity, with 23% identifying as Black and 39% as Hispanic. The study was conducted at 17 different sites, including non-profits, universities, health centers, and private clinics. Information was gathered through surveys and interviews over a year.

### **What are the research findings?**

Participants found CAB LA to be acceptable and practical, with high scores for both at the end of the study. Overall, 98% of interviewed participants felt that CAB LA fit well into their daily lives. Concerns about stigma with PrEP decreased after participants switched from daily oral pills to CAB LA. Additionally, concerns with forgetting to take their medication reduced with CAB LA use. Pain from injections decreased over time, with most participants experiencing little to no pain after a year of taking CAB LA. Most participants found it easy to schedule appointments and get to the clinic to receive CAB LA. Frequent clinic visits were appreciated for the extra interaction with healthcare providers and more opportunities for sexually transmitted infection (STI) testing. Educational materials and flexible scheduling were helpful for most participants. Overall, 95% of participants were happy they switched from oral pills to CAB LA, and 98% would recommend CAB LA to other people who could benefit from it.

### **What does this mean for people who may need HIV prevention?**

CAB LA offers a promising option for preventing HIV, with less stigma and anxiety compared with oral PrEP. Regular clinic visits provide extra health benefits, like frequent STI testing and more time with healthcare providers.

### **Conclusions**

The PILLAR study shows that CAB LA is a practical and acceptable option for preventing HIV among men who have sex with men and transgender men, with low concerns about stigma and anxiety. It highlights the benefits of regular clinic visits and effective strategies like flexible scheduling and educational materials to improve PrEP use.

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