Therapy satisfaction and preference for injectable long-term options of Portuguese HIV patients – a multicentric case-study

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Background

Recent innovations in the field of antiretroviral therapy (ART) have positively impacted the health outcomes and quality of life (QoL) of people living with HIV (PLHIV), but the latter is not yet equivalent to that of the normal population. Cabotegravir-Rilpivirine (CAB/RPV) became the first approved long-acting injectable ART in 2021. This innovation could improve the experience of PLHIV through greater convenience, privacy, and medication management. Our interventional multicentric study aimed to generate national evidence on the level of satisfaction of Portuguese PLHIV with their current ART regimens, and explore their demographics, psychosocial challenges, and preference for changing to injectable long-term ART.

Satisfaction, challenges and preferences in the treatment of HIV-1 under ART

- Consultation of clinical files
- Self-completion questionnaires

8 centers

- Age
- Time under ART

Challenges of:
- Tx uncomfortable memory of HIV
- Forgetfullness during Tx

Satisfaction with Tx

Preference for change

ART, Antiretroviral therapy. Tx, Current treatment. HIV, Human immunodeficiency virus.

Methods

PLHIV from 8 Portuguese centers were enrolled in this study. Data collection was performed through consultation of clinical files and a self-completion questionnaire (both on paper or digital format). The questionnaire was created specifically for this study and contemplated demographic and HIV infection characterization components as well as a section ascertaining the participants satisfaction, challenges, and preferences regarding ART. Informed consent was obtained.

442 participants

- ≈ 48 years | average age
- 75% ≤ 5 years of ART
- ≈ 74% PT nationality
- ≈ 82% via sexual transmission
- 94% ≥ 1 challenge with ART

ART, Antiretroviral therapy. PT, Portuguese.

High satisfaction with daily oral therapy

Average Tx satisfaction

1-3	73%	4-5	55%

59% Preference for switching to long-acting injectable treatment

Cited Psychosocial Challenges associated with Daily Oral ART

	Concern that someone might discover the infection due to treatment	Concern about possible forgetfulness in taking treatment	Treatment as an uncomfortable reminder of the infection
Always	26%	31%	20%

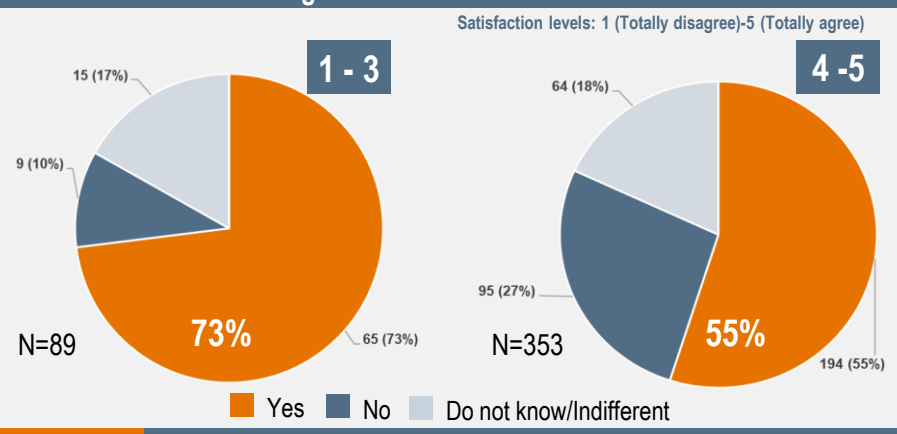
Satisfaction levels: 1 (Totally disagree)-5 (Totally agree)

Results

A total of 442 PLHIV participated in this study. The average age was 48.1 years and 75% of participants had been receiving ART for less than or exactly 5 years. Most individuals were Portuguese (74%) and 82% were infected through sexual transmission. A high level of satisfaction (4.4/5) with daily oral therapy was found, but 94% of participants stated to face at least one challenge. Older age and longer time on ART associated with higher satisfaction and less reporting of challenges (i.e., ART being an uncomfortable reminder of their HIV infection, and concerns about forgetting the medication). Overall, 59% of the enrolled PLHIV expressed a preference for changing to the injectable long-acting regimen. This percentage was 73% for those with lower average satisfaction score (1-3/5). The preference for changing was associated with younger age and less time on ART, as well as with lower levels of satisfaction.

Average level of satisfaction with Tx

Satisfaction levels: 1 (Totally disagree)-5 (Totally agree)



>50% Of the participants with high satisfaction prefer switching to long-acting injectable treatment

Conclusions

PLHIV from Portugal have a high degree of satisfaction with their daily oral therapy but still face some challenges, with a majority expressing a preference for changing to an injectable long-acting ART regimen.