

IM Cabotegravir versus TDF-FTC for HIV PrEP for MSM and TGW HPTN 083



- Background: Phase 2b/3, double-blind, randomized, multinational trial to assess efficacy of long-acting IM cabotegravir (CAB) compared to daily oral tenofovir DF-emtricitabine (TDF-FTC) for HIV PrEP for men who have sex with men (MSM) and transgender women
- Setting
 - 43 global sites

Inclusion Criteria

- Adult (≥18 years) cisgender MSM and transgender women who have sex with men
- Substantial HIV risk*
- Negative HIV serologic test at enrollment and negative HIV RNA ≤14 days before trial entry
- Generally good health and CrCl 60 mL/min
- HBsAg negative and HCV antibody negative
- No contraindications to gluteal injections
- No injection drug use within 90 days of trial entry

*Condomless receptive anal intercourse; >5 sex partners, stimulant use, rectal/urethral STI or syphilis ≤6 months; SexPro Score <16 (U.S. only)







IM Cabotegravir versus TDF-FTC for HIV PrEP for MSM and TGW HPTN 083: Study Population

HPTN 083: Selected Baseline Demographics

Characteristic	Total (n = 4,566)	Cabotegravir (n = 2,282)	TDF-FTC (n = 2,284)
Cisgender MSM, n (%)	3,992 (87.4)	2,013 (88.2)	1,979 (86.6)
Transgender women, n (%)	570 (12.5)	266 (11.7)	304 (13.3)
Median age (IQR), years, n (%)	26 (22-32)	26 (22-32)	26 (22-32)
Black race, United States, n (%)	845 (49.8)	411 (48.4)	434 (51.1)
Geographic region, n (%)			
United States, n (%)	1,698 (37.2)	849 (37.2)	849 (37.2)
Latin America, n (%)	1,964 (43.0)	980 (42.9)	984 (43.2)
Asia, n (%)	752 (16.5)	375 (16.5)	377 (16.5)
Africa, n (%)	152 (3.3)	78 (3.4)	74 (3.2)

*Abbreviations: MSM = men who have sex with men; IQR = interquartile range



Number of HIV Infections (After Enrollment)





Risk Reduction in HIV Infections (After Enrollment)





Cumulative HIV Incidence (After Enrollment)





• When did incident HIV infections occur in CAB arm?

- 3 during oral lead-in
- 5 after "prolonged hiatus" from IM CAB
- 5 during continuous CAB administration

Were drug levels adequate in TDF-FTC arm?

- Random sample of 372 participants:
 - 87% detectable plasma tenofovir level
 - •75% levels correlated with high-level protection
 - ≈70% levels suggestive of >4 doses/week (by dried blood spot)



IM Cabotegravir versus TDF-FTC for HIV PrEP for MSM and TGW HPTN 083: Cabotegravir Injection Site Reactions

Type and Severity of Injection-Site Reactions

- -Most common: pain and tenderness
- -2.4% chose to discontinue study due to injection reaction

Onset

-Reactions typically began 1 day after injection

Duration

-Reactions typically lasted 3-4 days after injection





IM Cabotegravir versus TDF-FTC for HIV PrEP for MSM and TGW HPTN 083: Cabotegravir Injection Site Reactions





IM Cabotegravir versus TDF-FTC for HIV PrEP for MSM and TGW HPTN 083: Results: Resistance with Cabotegravir

INSTI Resistance in Cabotegravir Group

- -1 at baseline; 4 with incident HIV infections
- -No resistance documented after last injection during "tail phase"







Conclusions: Long-acting cabotegravir was superior to daily oral Tenofovir DF–emtricitabine in preventing HIV infection among men who have sex with men and transgender women.



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