

# Wrestling with the Bioethics of TasP in a World without Universal ART

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# Caveats

- The status of science and policy is rapidly changing, which may resolve or introduce ethical issues
- We live in a world of marked disparities, which complicates considerations related to HIV prevention and treatment
- While my comments may seem to make matters unnecessarily complex in the short term, they are intended to be constructive

# Overview

- Bioethics of TasP
- Further considerations in a world without universal ART

# Bioethics of TasP

- Acceptability
- Safety
- Alternatives

# Acceptability of TasP: HIV+

- “Medicalization” prior to sickness
- ART use and life-long adherence
- Side effects
- Risks
  - Physical
  - Social
- Informed and voluntary uptake

# Acceptability of TasP: HIV-

- Reliance on the actions of others
- Trust and trustworthiness
- Preventive misconception and a potential change in risk behaviors

# Safety and Effectiveness

- Delivery systems
  - Monitoring
  - Cost
- Effectiveness in different populations

# Alternatives

- Existing
- Emerging
- Aspirational
  - Vaccine
  - HIV Cure



# Considerations in a World without Universal ART

- Safety
- Fairness
- Allocation

# Safety

- Delivery systems
  - Monitoring
  - ART quality
- Sustainability

# Fairness

- Selection of communities
- Selection of clients

# Allocation

- ARTs
- ART and non-ART based approaches to prevention
- HIV and non-HIV priorities

# Allocation of ART

- Assumption of scarcity
- Treatment
- TasP
- Prevention
  - PMTCT (and B +)
  - PEP
  - PrEP

# The Intuitive Argument

- Treatment > TaSP > PrEP
- Moral principles regarding justice
  - Utilitarian
  - Equity
  - Urgent need\*
  - Prioritarian principle\*
  - Rule of rescue\*
  - Equal worth

Macklin R, Cowan E. *Health Aff* 2012;31:1537-44.

# Urgent Need

- Argument: Prevention less urgent public health need and uninfected may not become infected
- Counter: Prioritizing treatment over prevention simply pushes urgency to the future (Rennie)

# Prioritarian Principle

- Argument: Those infected are the least advantaged
- Counter: While *hic et nunc* compassion is appropriate, why should it trump the reality of those who will be least well off in the future (Rennie)



# Rule of Rescue

- Argument: Obligation to help identified others who are already infected
- Counter: Future suffering and death are also significant (Rennie)

# Other Counterarguments

- Inconsistency
  - If ART is scarce, then treatment would be greater than TasP & PrEP (Rennie)
- Alleviation bias
- Utilitarian
  - Consequences matter and suggest needs for prevention > treatment (Brock & Wikler)
- Human rights
  - A need for prevention among disempowered population subgroups (Singh)
- Solidarity and the common good (Dawson)

# Allocation

- ARTs
- ART and non-ART based approaches to prevention
- HIV and non-HIV priorities

# Social Justice

- Powers and Faden
  - Health
  - Personal security
  - Reasoning
  - Respect
  - Attachment
  - Self-determination
- Wolff and de-Shalit
  - Security of well-being

# Closing Comments

- TasP is an extremely promising means of helping to end the pandemic
- Like most, if not all interventions, TasP involves ethical challenges, which are exacerbated by global disparities in health, wealth and particular vulnerabilities of those infected and at heightened risk of becoming infected
- Transparent and explicit deliberation about these issues with meaningful engagement should help to address them well, but will inevitably leave a moral remainder