



What Matters Most for Long-Acting Antiretroviral Therapy?

A Discrete Choice Experiment

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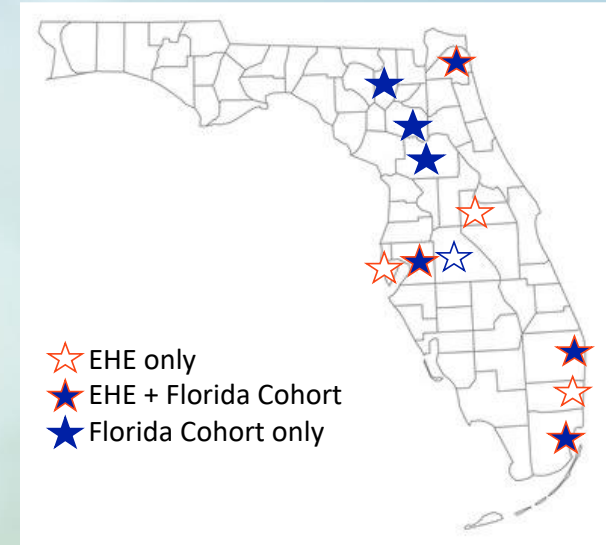
Background

- Alternative to daily pills needed and many options in development
 - Unknown what PWH may prefer in a treatment
 - Increases the likelihood of uptake
- More work on PrEP preferences and limited studies in PWH
 - More effective, less often, cost, side effects, type
 - Focus on MSM or outside US
 - PWH studies have geographic differences
- Aim: Assess preferences for long-acting ART characteristics using a discrete choice experiment



Methods: The Florida Cohort

- NIAAA-funded longitudinal study to identify barriers to HIV care continuum steps
- Enrolled adult PWH from clinics and case management agencies
 - October 2020-November 2023
- Baseline battery included multiple modules
 - 6- and 12-month follow-ups at some sites
- Written informed consent before participation




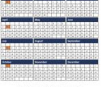











Methods

- Cross-sectional data from the Florida Cohort
 - February 2023-November 2023
- 12 Best-worst scaling DCE tasks
- Attributes and levels selected based on literature and earlier quantitative and qualitative work
- Hierarchical Bayes model
 - Exploratory Latent Class Analysis
- Sawtooth Software

(1 of 12) Which of the following HIV treatments do you think is the **best** option? Which is the **worst** option?

	Option 1	Option 2	Option 3
Type of Treatment	 Pill	 Implant in arm	 Shot or Injection
How often do I need to take it?	 Once a week	 Every 3 Months	 Once a month
Short-Term Side Effects	 Mild Tiredness	 Moderate Diarrhea	 Moderate Pain or Irritation
Long-Term Side Effects	 No increased risk of weight gain	 No increased risk of liver damage	 1% increased risk of kidney damage
How well does it work?	 Better than daily pills	 Better than daily pills	 About the same as daily pills
Where can I take it?	 At your local pharmacy	 At your doctor's office	 At home
	Best Worst	Best Worst	Best Worst

If the option you selected as the **best** was available, would you switch to that HIV treatment?

Yes

No



Methods

Attribute	Level
Type	Implant
	Shot
	Pill
	Patch
Frequency	Weekly
	Monthly
	Bi-monthly
	Quarterly
	Semi-annually
	Annually
Long-term Effects	No risk-liver
	No risk-kidney
	No risk- weight gain
	1% risk-liver
	1% risk-kidney
	1% risk-weight gain

Attribute	Level
Side Effects	Mild diarrhea
	Mild fatigue
	Mild pain
	Moderate diarrhea
	Moderate fatigue
	Moderate pain
Convenience	Home
	Pharmacy
	HIV doctor's office
	Mobile clinic
Effectiveness	Same as pills
	Better than pills
Opt-Out	Current regimen

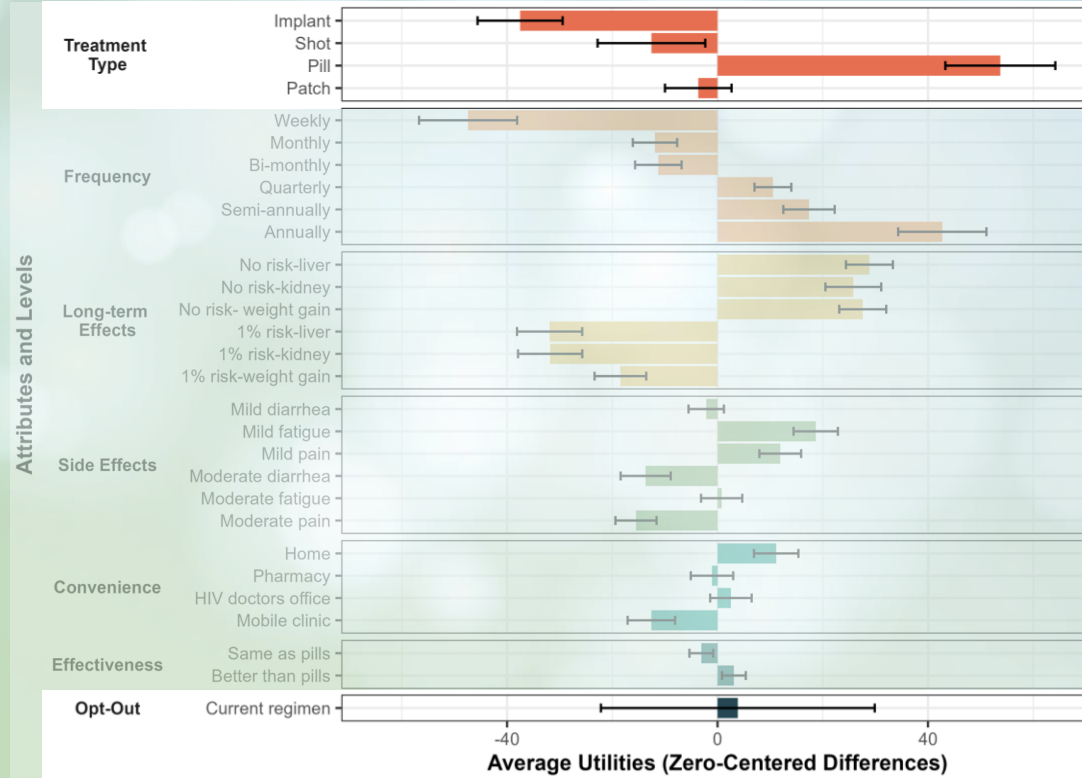


Results

- Study sample
 - 208 participants completed
 - 59% aged 50+
 - 48% non-Hispanic Black, 12% Hispanic
 - 91% on oral ART (89% adherent)

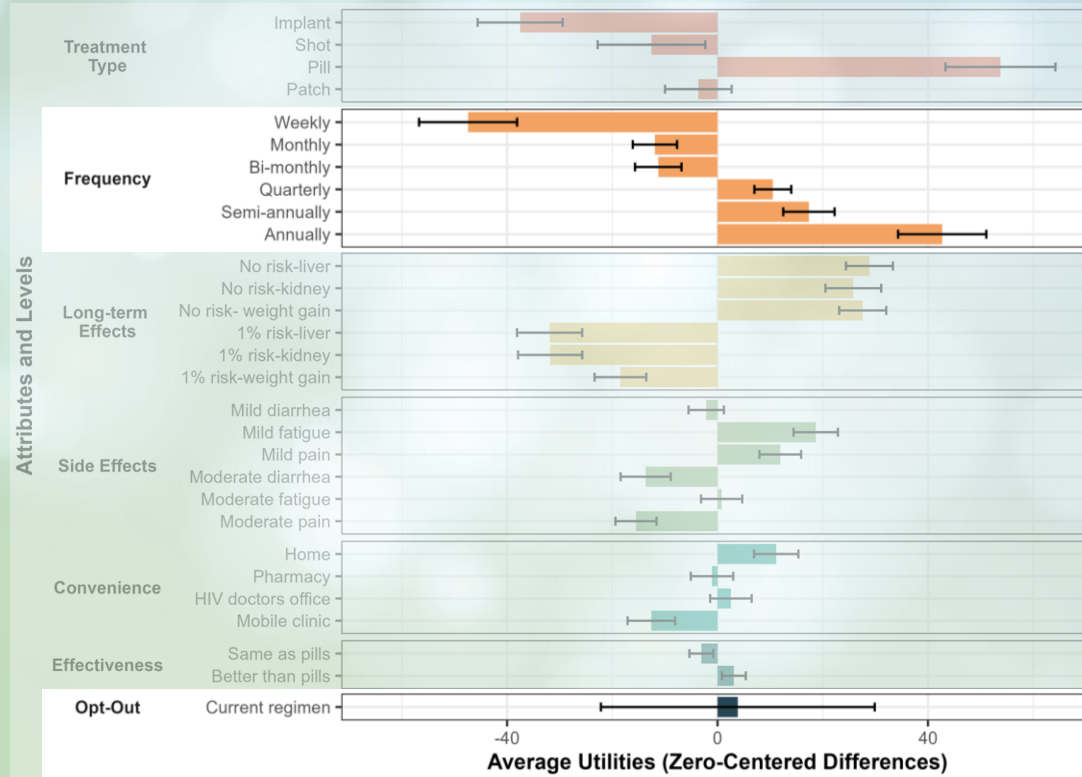


Results



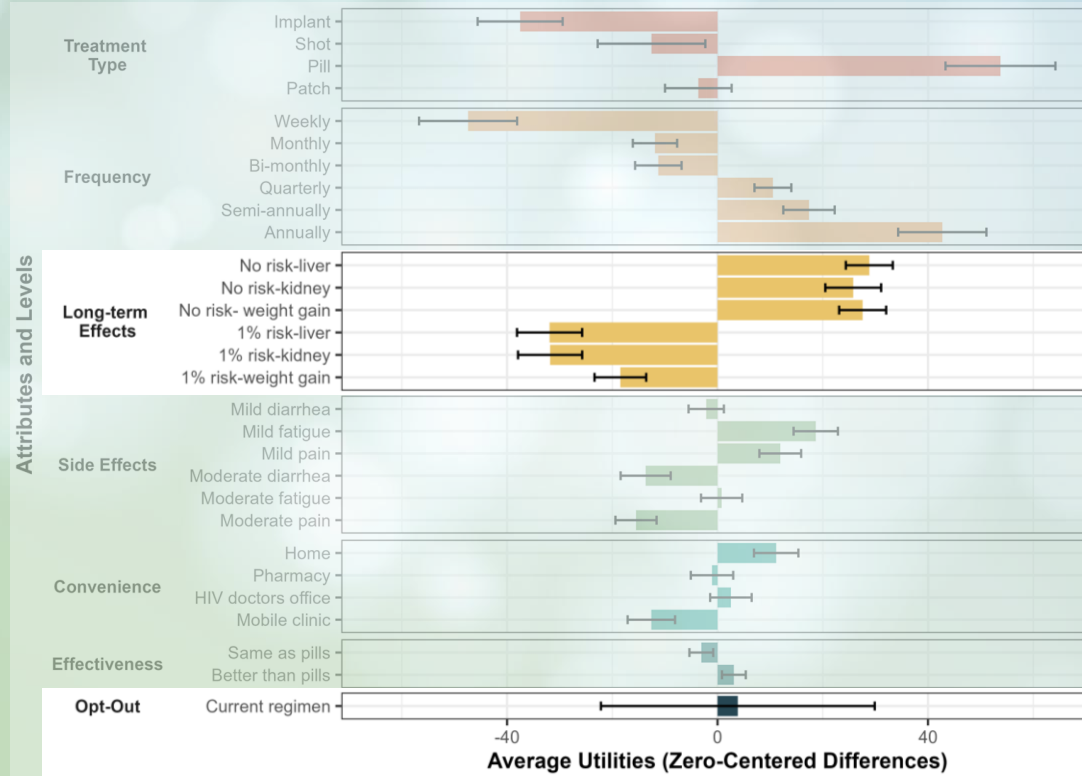


Results



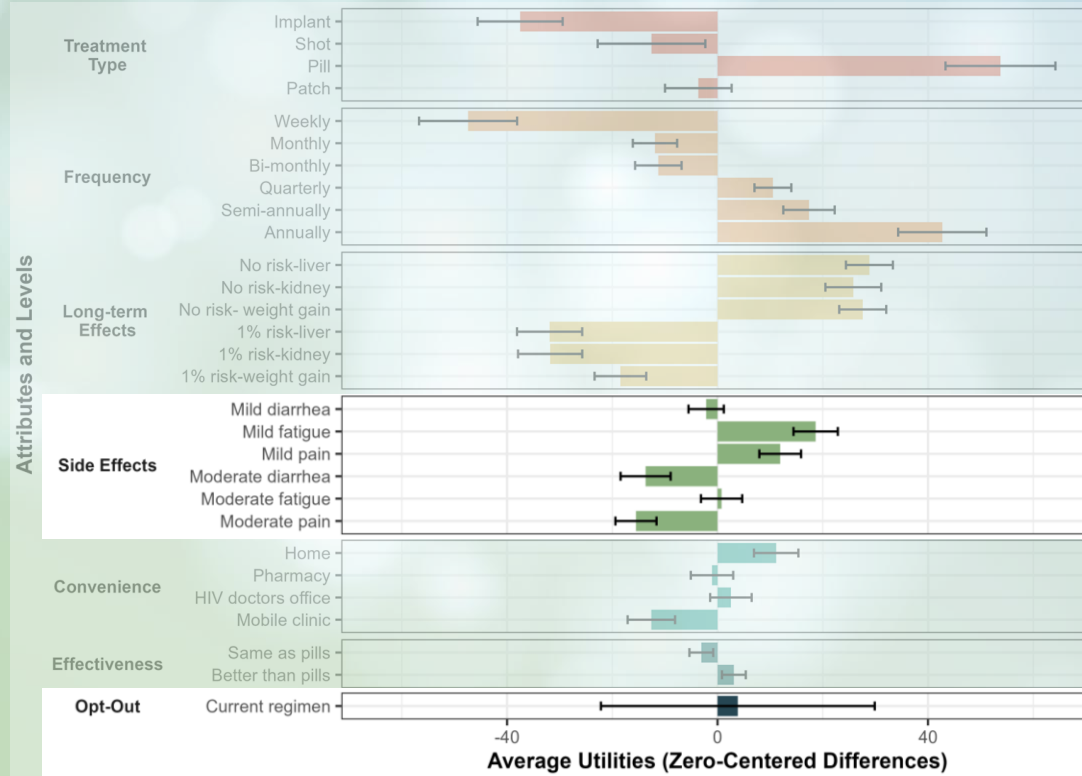


Results



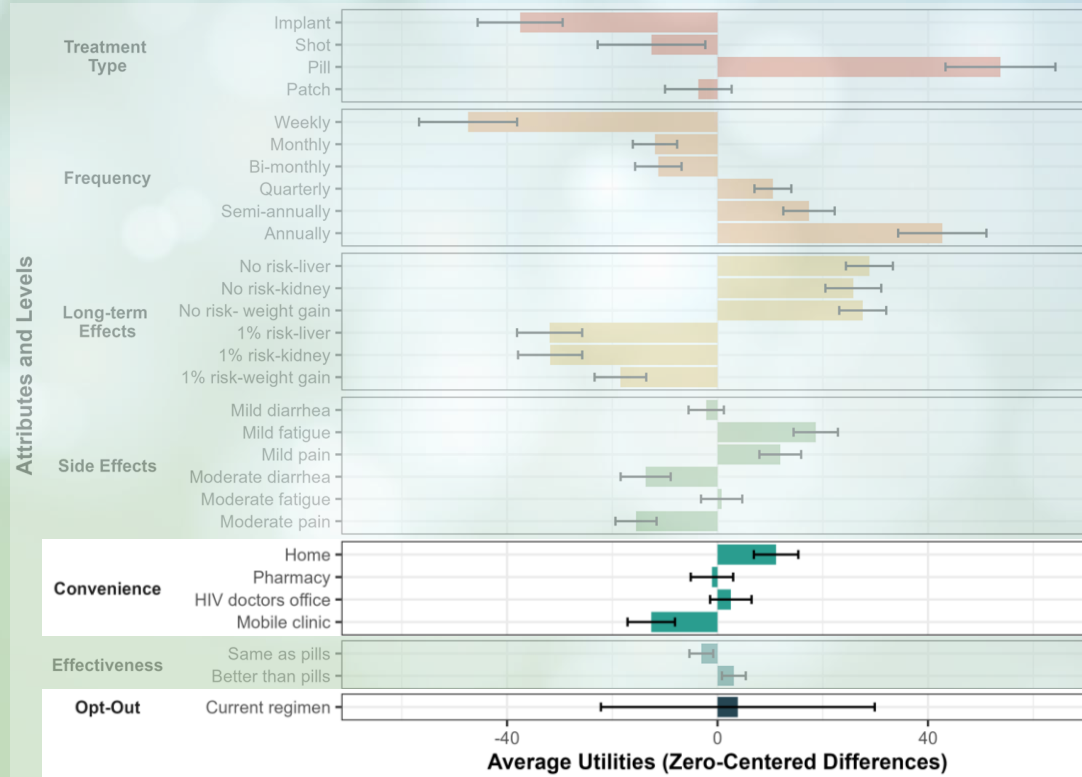


Results



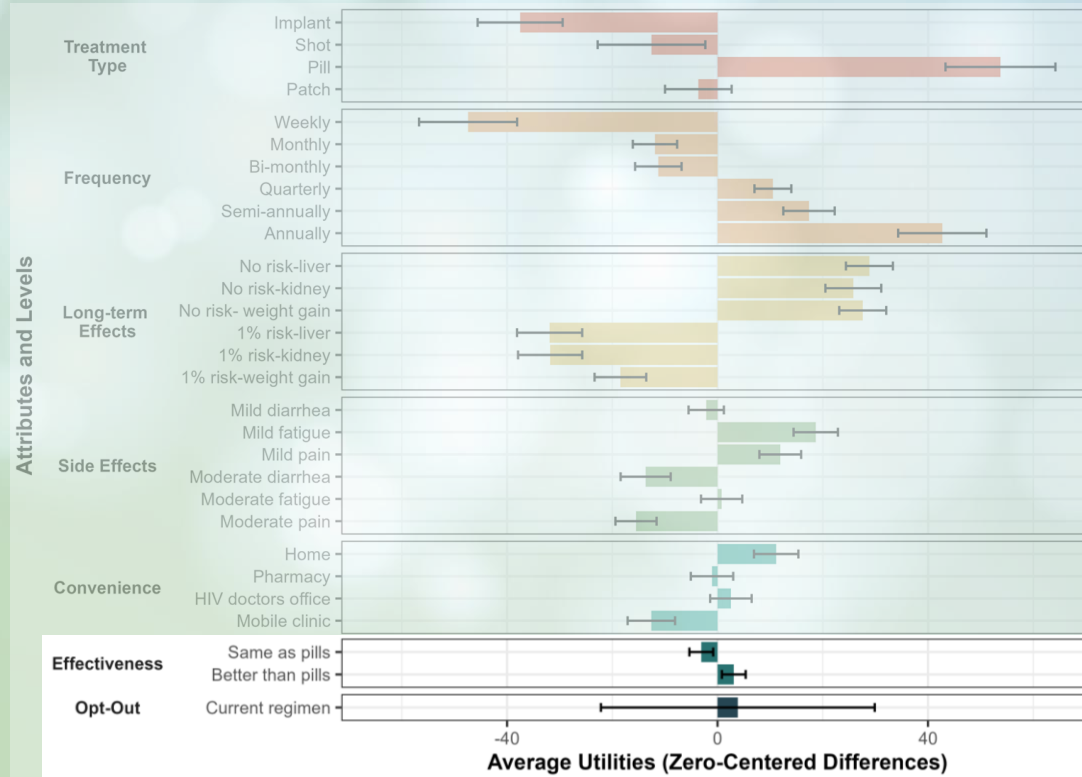


Results





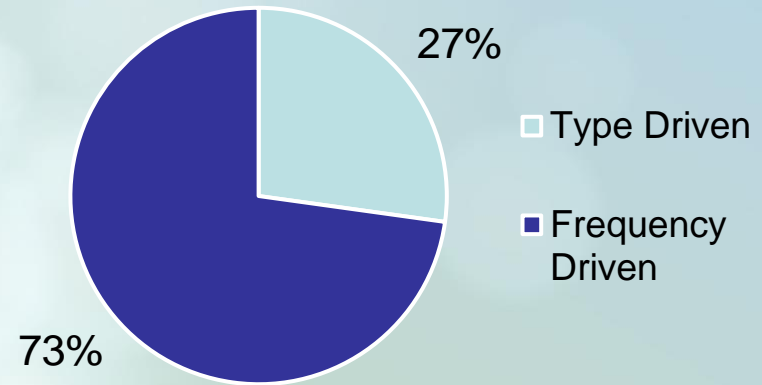
Results





Results

- Two classes:
 - “Type Driven”
 - Prefer current treatment
 - Strong preference for pills
 - “Frequency Driven”
 - Prefer alternatives
 - Strong preference for longer lasting
 - Still prefer pills





Conclusions

- Type of treatment and frequency most important attributes
 - Pills
 - Annual administration
- Defined the two identified classes
 - Minority will likely stay on oral ART
- Having a menu of options may help PWH find ART that best fits their lives



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