

The Ministry of Health indicates that most people may not access the drug because of the set rules.

BY TONNY ABET

Two quick injections in the lower belly will give Belmos Gom, a 29-year-old resident of Lira City, more than 99 percent protection against HIV infection for six months.

Gom is one of the first 15 people to access the free lenacapavir, the long-acting injectable drug for HIV prevention, launched by the Ministry of Health on April 17 in Lira City.

Moments earlier, health workers had drawn his blood for an HIV test, fired off a string of probing questions about his sexual history, and confirmed he was negative.

Now, with a nod of approval, they administered the first dose of lenacapavir, the Pre-Exposure Prophylaxis (PrEP). He was told to choose between the belly and the thigh as the injection sites.

"I chose the stomach because I had never tried it before," Gom recalls with a grin, still fresh from the experience. "It was just a normal jab, not painful at all. Two minutes and you're done," he adds.

By 12.40pm, around 60 people could be seen lining up, approaching the inquiry desk and making efforts to access the lenacapavir injection in the tent erected in an open ground near Lira Regional Referral Hospital.

But the interview with Ms Harriet Nangobi, the national PrEP trainer at the Ministry of Health, indicates that some of these people may not access the drug because of the set rules.

She says they started administering the drug the previous day (Thursday, April 16), but by Friday, only 15 people had qualified.

"But we have a procedure which we follow to screen; we have a set of questions we ask after testing to ensure the person is HIV negative," Ms Nangobi explains.

Priority groups

The questions asked by the health workers are meant to determine if the client is at "substantial" risk of HIV infection.

"Not all sex is risky sex. Regarding HIV prevention intervention, who is at risk? People who are sexually active but do not know the HIV status of the people they are having sex with, people who are engaging in multiple sexual relationships," Ms Nangobi states.

The other category is people who are engaging in sex with someone who is already known to be positive, and this person is either not on treatment, or they have just started their treatment, but their viral load is not suppressed.

"Then we have people who are injecting drug. They are not sexually active, but injecting drug usually make them share the injecting material, needle. You can share the needle with someone who is HIV-positive and you get the virus," she explains.

The other high-risk group is people who engage in sex with people who have other recurrent STIs but are HIV-negative.

Gom explains why he thinks he is at risk and qualifies for the injection.

"I am not married. I have a girlfriend, and we are cohabiting. So we have sex.

What it takes to access new HIV prevention jab



People line up to access lenacapavir injection to protect themselves from HIV infection during the launch of the exercise in Lira City last Friday. PHOTO/TONNY ABET

But as such, you are not sure," he shares.

Dr Robert Mutumba, the head of the Aids Control Programme at the Ministry of Health, sheds more light on priority groups.

"We have populations that are known to have the highest risk of HIV transmission, particularly for lenacapavir, we have discordant couples - you have a spouse with HIV, and the negative partner should be able to benefit from this, and we have truck drivers, commercial sex workers and the rest of the other high priority risk group," he reveals.

Ms Nangobi reveals that on Friday morning, many children showed up thinking it was a vaccine, but 'were gently turned away after explanation.

"This PrEP injection is not a vaccine; there is a difference between a vaccine and prophylaxis," she says.

PrEP is used to prevent HIV infection, whereas a vaccine trains your immune system to recognise and fight a disease permanently. While PrEP must be present in your body to work (and thus the need for injection every six months), vaccines provide long-lasting immunity.

Nangobi also says there are many other PrEP options that people can use.

"We have tablets (taken daily), vaginal ring and (cabotegravir) injection given once every two months," she says.

Combination prevention strategy

Dr Jane Ruth Aceng, the Health minister, says Uganda is committed to ending Aids as a public health threat by 2030 through a combination of prevention strategies that integrate biomedical tools such as lenacapavir with behavioural and structural interventions.

She called for adherence to the classic ABC approach: Abstinence for young people until ready for marriage, Being faithful to one partner, and correct and consistent Condom use for those with

multiple partners. /

Dr Mutumba, on the other hand, warns against recklessness after receiving the lenacapavir injection.

"... we must understand that even as individuals receive this lenacapavir injection, they should not forget about getting an unintended pregnancies so that we do not end up with a high rate of unsafe abortion..." he says.

"It does not protect them against contracting other sexually transmitted infections such as Hepatitis B, Chlamydia, and Gonorrhoea," he adds.

How lenacapavir works

Lenacapavir, approved for pre-exposure prophylaxis (PrEP), has demonstrated over 99 percent effectiveness in stopping HIV infections in clinical trials conducted in Uganda and South Africa.

The drug works in multiple stages of the life cycle of HIV by blocking the vi-

rus from entering healthy body cells, and for body cells that are already infected, lenacapavir damages the virus' outer layer, making them weak and unable to infect other cells.

Where to get lenacapavir

Information from the Ministry of Health indicates that currently, at least 103 health facilities are providing the free injections, including all regional referral hospitals.

The initial batch of 19,200 doses, donated by the Global Fund, targets high-burden areas, with plans to expand to 300 health facilities by December. Uganda expects to receive 94,560 doses, enough to cover at least 47,280 people initially.

"As per now, the need is quite high, we need over and above three million doses," Dr Mutumba says.

"And of course, we expect more doses

KEY STEPS

- Blood test to determine if you are HIV negative

- Assessment through questions to determine the client's risk of HIV infection

- Provided choice of injection site (abdomen or thigh)

- Provided two doses of oral lenacapavir tablets to be swallowed immediately after injection and on the second day

- Advised on other risks of sexually transmitted diseases and how to protect yourself

through the US government support, our team is going to split the 19,200 doses and be able to allocate based on the need. So I may not be able to tell you that this particular region received this particular number of doses," he adds.

Dr Mutumba says they have planned that those who receive the first doses will be able to access the next dose after six months of injection. He also says the government is planning to procure more doses.

"The government will, with time, also procure lenacapavir, but for now, it is a cascade, and it is not just about the product alone, but the government trains the health workers and avails the infrastructure to ensure lenacapavir, in addition to other PrEP methods, are undertaken," he adds.

Dr Aceng, however, says lenacapavir is a "game changer" in the government's drive to reduce new HIV infections. "However, HIV is still with us. About 100 new individuals acquire HIV every day, of whom 33 are young people, majorly adolescent girls and young women," she says.

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At risk:
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