

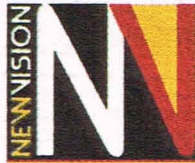
# Prevention drug roll-out brings new dawn in HIV fight

**UGANDA** last week rolled out Lenacapavir, the long-acting six-month HIV-prevention injection. The development represents a transformation leap in our decades-long battle against the epidemic that has decimated generations since the 1980s. This pre-exposure prophylaxis (PrEP) medication, which is administered as a single injection every six months, promises to overcome the challenge of daily adherence which has limited other prevention strategies.

Unlike the daily PrEP pills needing discipline, Lenacapavir slowly releases protective medication into the body, offering sustained defence against HIV without the burden of daily routines that many people, especially the youth, struggle to maintain.

In 2024 alone, 70% of Uganda's 37,000 new HIV infections happened among young people. While condoms and daily PrEP have served valiantly, their effectiveness depends on consistent use, a hurdle for populations facing economic pressures, stigma or simply the realities of daily life.

Lenacapavir's six-month protection window dramatically



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reduces this barrier, especially for key populations, including adolescent girls, truck drivers and those in relationships with HIV-positive partners.

This drug is a powerful addition to our prevention toolkit. However, the public needs to be cautious as it protects only against HIV. While clinical trials show it is

highly effective in preventing HIV when used correctly, it does not prevent infections such as gonorrhoea, syphilis or chlamydia, nor does it protect against pregnancy.

That's why we urge you to remain responsible even after receiving this pre-exposure prophylaxis. This means that condoms and comprehensive sexual education remain essential.

The phased rollout across 103 facilities targets high-risk populations, which maximises impact where it's most needed.

This advancement arrives as donor funding faces unprecedented cuts, including the closure of USAID. With Uganda having reduced new infections from 96,000 annually in 2010 to 37,000 today, Lenacapavir could accelerate this progress.

Fewer new infections mean reduced treatment costs, lighter strain on healthcare systems and more sustainable epidemic control.

Lest we forget, no medication substitutes for responsible behaviour. Therefore, let us commit to HIV prevention at every level.