

The treatment (cabotegravir + rilpivirine) aims to ease the burden of lifelong medication adherence.

BY TONNY ABET

Ugandan researchers and health officials have revealed ongoing plans to introduce long-acting injectable antiretroviral therapy (ART) that can replace daily pills with injections every two months for people living with HIV/Aids.

The researchers indicated that this revolutionary treatment (cabotegravir + rilpivirine) aims to ease the burden of lifelong HIV medication adherence, reduce Aids-related deaths and address disease spread through optimised viral load suppression.

Dr Robert Mutumba, the head of the Aids Control Programme at the Ministry of Health, in an interview with the *Daily Monitor* yesterday, expressed strong optimism about the breakthrough.

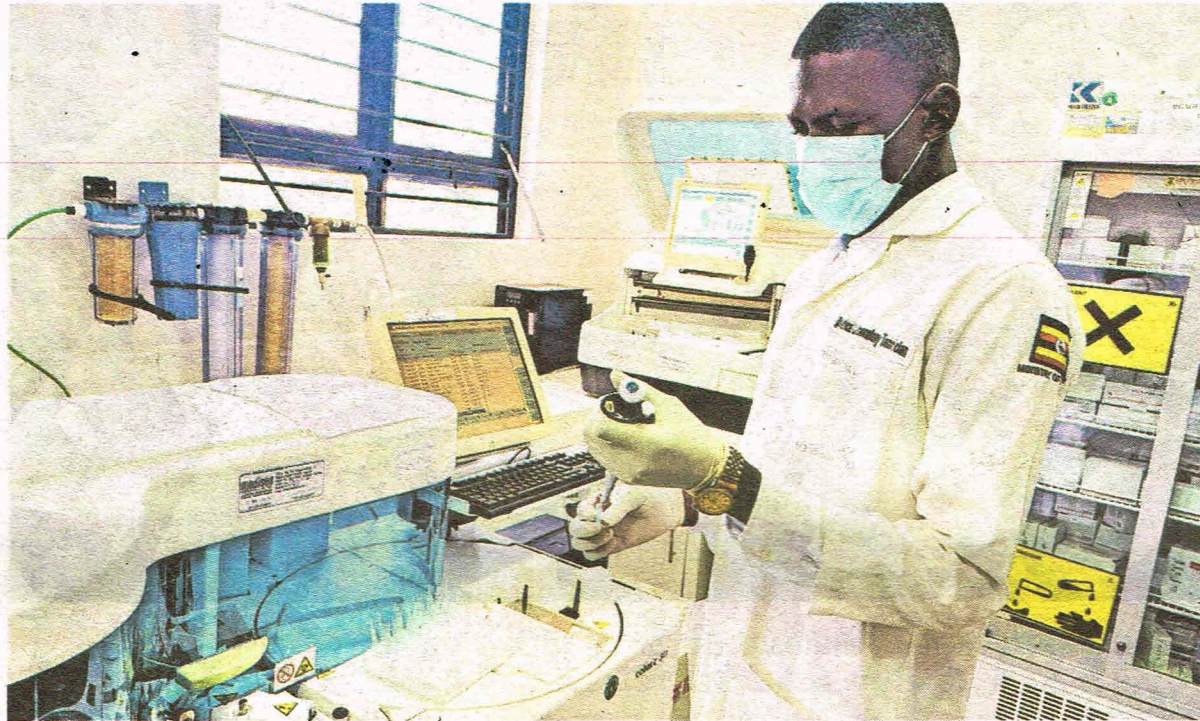
"The picture looks bright, and very soon, I believe Ugandans will also be able to access some of these combination treatment in the injectable form... this is still work in progress," he said.

Dr Cissy Kityo, the director of the Joint Clinical Research Centre, who led the trial on the African continent for the injectable drugs for treatment – cabotegravir and rilpivirine, stressed the urgent need to ensure access and improve ART adherence.

"The issue of adhering to antiretroviral drugs for those who have HIV is big. So we've also been working, as researchers, to see how we can get these injectable drugs for people who are taking oral antiretroviral drugs every day," she said.

She indicated that African-led research is already delivering results. "Last year, we led a study using injectable antiretroviral drugs across Africa. Those results have led to the World

Scientists eye monthly HIV jab to replace pills



A laboratory scientist at Lira Hospital conducts tests on blood samples on March 14, 2025. The shift to long-acting injectable antiretrovirals is expected to significantly improve treatment outcomes. PHOTO/ TONNY ABET

Health Organisation (WHO) revising the guidelines," she said.

The shift to long-acting injectable antiretrovirals is expected to significantly improve treatment outcomes. With WHO guidelines already updated based on African studies, focus is now on accelerating generic manufacturing to make the monthly shots affordable and widely accessible in Uganda.

"What we are doing today with the drugs we are using for HIV, they are pro-

duced by generic manufacturers at a low price. That is why everybody now is able to access these drugs," Dr Kityo said.

"So, after the research, the generic drugs will be out, I think, next year, maybe in the second quarter, for HIV treatment. I call upon the patients who are on ARVs and the civil society organisations to put the pressure. I urge the Minister of Health, let us work together to make the generic drug available for our

patients. This is a joint effort," she said.

Evidence

According to the Phase 3b clinical trial report, whose lead author was Dr Kityo, the long-acting injectable drug for HIV treatment was not inferior to daily pills. The injection was administered once every eight weeks. The report was published in the scientific journal "Nature Medicine" this year.

"At 96 weeks, 247/255 (97 percent) in

KEY FACTS

- Long-acting injectable ART combines cabotegravir + rilpivirine
- Injection is given every 8 weeks (or monthly in future plans)
- Designed to replace daily oral HIV pills
- 97% viral suppression in both injectable and oral groups
- Injectable therapy was non-inferior to daily pills

the long-acting group and 250/257 (97 percent) in the oral therapy group had Viral Load of less than 50 copies per millilitre of plasma, demonstrating noninferiority," the report reads.

"Cabotegravir and rilpivirine long-acting therapy produced durable virologic suppression, met the prespecified non-inferiority endpoint compared with oral therapy and demonstrated an acceptable safety and tolerability profile. Long-acting therapy may be considered for use in African treatment programmes," the researchers recommended.

According to statistics from the Uganda Aids Commission, the country registered 37,000 new HIV infections and 20,000 HIV/Aids-related deaths in 2025. Currently, around 1.5 million Ugandans are living with HIV/Aids.