Long-Acting Injectables and Older People

Here are considerations for long-term survivors thinking about switching HIV treatments.

October 11, 2021 By Heather Boerner

Mark Watkins, DO, an HIV provider at Philadelphia's Mazzoni Center, has been in practice for more than 30 years. He's had patients who he's treated for that whole time. For them and other people aging with HIV, the emerging issues aren't necessarily about HIV treatment. They are about all the other conditions of aging.

People living with HIV are predicted to have more chronic conditions to manage as they age. So it would be understandable if they wanted to take one pill out of their pill boxes by using a long-acting injectable, such as Cabenuva (cabotegravir/rilpivirine).

But before you do, consider these issues that will optimize their HIV treatment regimens:

1. Do you already have resistance to one of the medications in Cabenuva? If you've been taking HIV medications for any length of time, there's a good chance that one (or more!) medications stopped working for you. And your virus may have even developed resistance to some treatments. Cabenuva contains a reformulation of Edurant (rilpivirine) for long-acting treatment. "If you're resistant to it, you're going to be resistant to this medication," he said.

2. What are your other health issues? If so, you may experience fewer drug-drug interations between your HIV treatment and your other meds. That's because the drugs in Cabenuva don't have the same interactions with medicines that other drugs, like protease inhibitors or other boosting agents that have been found to impact those other drugs.

"If I'm 60 years old and I'm taking my HIV meds, my blood pressure pills, my cholesterol medication and I'm pre-diabetic, I'm on all these medications," Watkins said. With your HIV medications off your plate, "All you have to worry about now is your cholesterol, your diabetes. You can now focus your attention on your diabetes, say, because now you don't have to think about your HIV anymore."

3. Does it work for you logistically? Many long-term survivors are still in the prime of their working life and may not have the freedom that their retired peers do to take the time to go to the office once a month. If that's the case for you, Cabenuva may not be the right choice—at least not right now, said Watkins.

“As it gets easier and easier—when it’s available every two months or more—that could change,” Watkins said.

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