New Monthly HIV Prevention Pill in Late-Stage Trials Could Provide a Giant Step Forward in Stopping New Infections

If proved effective, UNAIDS highlights that speed, affordability and equitable access will be critical.

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GENEVA/JOHANNESBURG — An oral monthly pill to prevent HIV, alimatravir (also known as MK-8527), produced by Merck Sharp & Dohme (MSD), is currently undergoing promising Phase III trials. If the trials are successful, this development could provide another tool in the HIV prevention toolbox and a positive step towards ending AIDS.

UNAIDS commends MSD for its early access plan to help partners prepare for manufacturing and delivery. MSD has announced voluntary licensing agreements with generic pharmaceutical manufacturers, including three in Africa, to produce the once-monthly oral HIV prevention candidate. Early planning for financing, demand forecasting, accessibility and regulatory readiness will be as important as scientific innovation to ensure that new HIV prevention technologies reach people rapidly and equitably.

“Scientific innovation has the power to change the trajectory of the AIDS pandemic, but only if it reaches everyone who needs it,” said Angeli Achrekar, Deputy Executive Director of UNAIDS.“If alimatravir proves to be safe and effective and receives regulatory approval, manufacturing must be rapidly scaled up and the product made affordable and accessible in low- and middle-income countries from day one. No one should have to wait years for life-saving HIV prevention.”

UNAIDS commends MSD for the proposed partnerships with Aspen Pharmacare in South Africa, Quality Chemicals Industries Limited in Uganda and Universal Corporation Limited in Kenya. If the trials are successful, the agreement will present an important opportunity to strengthen Africa’s local pharmaceutical manufacturing capacity. It will also bring innovative HIV prevention options closer to the people who need them most, supported by sustainable market development and technology transfer.

The announcement aligns with UNAIDS’ Global AIDS Strategy’s call to ensure equitable access to

innovation and the strengthening of health sovereignty through local production, regional manufacturing and pooled procurement commitments. This was reaffirmed by countries in June this year in the 2026 Political Declaration on HIV and AIDS.

Despite remarkable progress in scientific innovations in recent years, including antiretroviral-based HIV prevention options, millions of people—particularly adolescent girls and young women, marginalized populations and other people at heightened risk of HIV—still lack access to effective HIV prevention options.

In 2025, 1.2 million people acquired HIV, and more than half a million people (570 000) died of AIDS-related illnesses. Around 3,100 adolescent girls and young women acquire HIV every week in sub-Saharan Africa. Expanding choice through new prevention technologies, alongside sustained investment in community-led services and strong health systems, will be essential to ending AIDS as a public health threat by 2030.

“UNAIDS welcomes partnerships that link clinical research, regional manufacturing and equitable access to HIV services,” said Ms. Achrekar. “UNAIDS calls on governments, pharmaceutical companies, global health partners and communities to work together to accelerate production, ensure affordable pricing and remove barriers that delay access to new HIV prevention tools across all regions of the world.”

UNAIDS will continue working with countries and partners to monitor equitable access, support affordable pricing, strengthen costing and resource planning, and advance sustainable financing pathways for the introduction and scale-up of all new HIV prevention technologies.

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