

Long-acting injectable HIV treatment



Information for patients

This leaflet explains starting injectable treatment to manage your HIV. If you have any questions, please speak to your clinic doctor, nurse or pharmacist.

What is long-acting injectable HIV treatment?

Antiretroviral drugs (ARVs) are now available in injection form and can be used as an alternative to tablets to manage HIV.

Which drugs are available as injections?

Cabotegravir (also known as Vocabria®)

and

Rilpivirine (also known as Rekambys®)

Cabotegravir and rilpivirine injections are a type of long-acting antiretroviral medication that is used to manage HIV. The two medicines work together and must be given at the same time to be effective at maintaining an undetectable virus level.

What are the benefits of long-acting injectables?

Once you are established on injectable treatment you will no longer need to take tablets. Injectable treatments are most suitable for people who struggle to take daily tablets, find it difficult to remember to take their tablets or find it difficult to swallow tablets. They may also be a good option for people without stable housing or worried about confidentiality.

How effective is injectable treatment?

Studies have shown that it works very well for most people, meaning that their virus levels stay undetectable when they switch to injectable treatment. A small number may develop a detectable viral load later, even if they have not missed any injections. This risk is about 1 in 70 in the first year and 1 in 60 in the first two years.

How does switching to long-acting injectables work?

If you are approved for injectable treatment, you will be started on tablets first, also known as an 'oral-lead in'.



Month 1	You will need to take the medicines in tablet form for two – four weeks to make sure they do not cause side effects. You will take one tablet each of cabotegravir and rilpivirine together, every day, with food.
Month 2	We will then start you on your first injections in clinic. You will have these in the muscle of each buttock (two injections at each visit). We will check your bloods, including your viral load.
Month 3	One month after your first injections, you will come to clinic for your second injections . We will check your bloods, including your viral load.
Continuation injections	You will attend clinic every two months for your continuation injections and blood tests.

In rare cases, we start some people on long-acting injections immediately. This depends on your individual circumstances and will be decided between you and your clinic doctor.

What happens if I miss or am late for an injection?

It is important to attend for your injections on the scheduled date or there is a risk that your viral load may go up and you could develop resistance to the injectable medicines and other similar ones.

- If you miss – or are late for – your injection, you may have to come to clinic for an extra dose before going back onto two-monthly injections.
- If this keeps happening, **because of the risk of resistance**, we may decide injections are not right for you and you may have to go back to taking pills.

How do I book my appointments?

During each visit we will book you in for your next injections. You might find it helpful to make a note of the date in your diary or on your phone to remind you. If you cannot make it to your appointment, please let us know as soon as possible.

We can rearrange your appointment, but it must be within **seven days before or seven days after** the date you are due to have the injection.

Are there any side effects of injectable treatment?

The most common is pain or swelling where you have the injection. This is generally mild and settles in a few days. If you are concerned about any side effects or new symptoms you have after starting treatment, please speak to your doctor, nurse or pharmacist who can advise you.

What if I no longer want to have injectable treatment?

Do not stop coming for your injections without speaking to your clinic team first. The injectable medications can stay in your body for several weeks or months after your last injection.

If you stop having the injections and do not switch to another treatment, there could be a long time during which your body could develop resistance to HIV treatment.

Can everybody use long-acting injectable HIV treatment?

This treatment is not suitable for everyone. We have set criteria to ensure you do not come to harm from switching to injections. It is not currently recommended if:



- you have HIV which is resistant to certain classes of antiretrovirals
- you have a detectable viral load in your blood
- you have an uncommon form of HIV
- you have a BMI of more than 30
- you are pregnant or planning to become pregnant
- you have hepatitis B infection or are not immune to it and are at risk of acquiring this infection
- you cannot manage to come to clinic every two months.

These criteria are likely to change as more evidence becomes available.

Important information

- It is very important to have your injections on time. If you cannot commit to attending clinic every two months, injectable treatment is not the best option for you.
- Even if you stick to this treatment 100%, there is still a risk of failure. This may limit your future treatment options.
- You can expect to spend 30 minutes in clinic at each visit.

References

1. Vocabria 600mg prolonged-release suspension for injection. <https://www.medicines.org.uk/emc/product/12957/smpc>
2. Rekambys 900 mg prolonged-release suspension for injection. <https://www.medicines.org.uk/emc/product/12950/smpc>
3. BHIVA guidelines on antiretroviral treatment for adults living with HIV-1 2022 (2023 interim update). [BHIVA-guidelines-on-antiretroviral-treatment-for-adults-living-with-HIV-1-2022.pdf](https://www.bhiva.org/file/6356671bcbecd/LA-CAB-RPV-for-ART-NTS.pdf)
4. BHIVA guidance on long-acting cabotegravir/rilpivirine for antiretroviral therapy: non-technical summary. <https://www.bhiva.org/file/6356671bcbecd/LA-CAB-RPV-for-ART-NTS.pdf>



Who can I contact with queries and concerns?

Nursing Team

Caldecot Centre Nurses, Email: kch-tr.nursesatcc@nhs.net

Beckenham Beacon Nurses

Email: kch-tr.bb-sexualhealth-queries@nhs.net Tel: 01689 866647

Pharmacy Team

Email: kch-tr.SexualHealthPharmacists@nhs.net Tel: 020 3299 3851

Main Reception

Email: kch-tr.caldecotenquiries@nhs.net Tel: 020 3299 5000

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams.

For assistance from PALS at the Caldecot Centre, please contact our service at King's College Hospital (Denmark Hill)

Tel: **020 3299 3601** Email: kch-tr.palsdh@nhs.net

For assistance from PALS at Beckenham Beacon, please contact our service at the Princess Royal.

Tel: **01689 863252** Email: kch-tr.palspruh@nhs.net

If you would like the information in this leaflet in a different language or format, please contact our Communications and Interpreting telephone line on 020 3299 4826 or email kch-tr.accessibility@nhs.net