Preparing for a future with a range of MPT options

Jessica Rodrigues, AVAC
There is a market for an oral pill MPT

ECHO trial underscored the potential benefit of an MPT given high rates of HIV incidence among women using various forms of contraception.

OC use has been stable over time in East and Southern Africa (ESA), even as LARC use increased; with high use in the US and globally.

Oral PrEP uptake has grown rapidly in sub-Saharan Africa (SSA), especially from 2020-2022 reaching almost 3 million new users.

Evidence that women (and their partners) prefer a user-controlled product that addressed multiple health needs with some preferring short-acting methods.

The Dual Prevention Pill (DPP) is an additional option and will be offered to women in the context of informed choice alongside other available contraceptive methods.

HIV prevalence and total addressable market for contraception (TAMC) data show substantial overlap of unmet need for FP and HIV prevention, indicating high potential for MPTs.

MPTs could help address unmet prevention needs

Kenya has relatively lower need, though regional pockets show promise for MPTs and DPP, given higher OC use, % non-FP users.

South Africa has moderate-to-high need for FP and HIV prevention, with certain provinces exhibiting higher % OC use.

Zimbabwe has high OC use and HIV prevalence rates across the country, with higher overlap in the Matabeleland South province.

The DPP is the MPT furthest along in the pipeline

- Viatris developing **co-formulated tablet with 28-day regimen** (TDF/FTC, oral PrEP + LNG/EE, combined oral contraception (COC))
- **Different color pills** for 21 vs. 7 days (dark pink and light peach, respectively)
- **Packaging will be wallet pack** with tear-off weekly sheets with instructions on them
- Pill color, packaging, brand names **validated with women**
- **Branding/secondary packaging** will have women’s lifestyle feel
- Longer term, Population Council/Medicines360 to **develop F/TAF-based DPP**

Viatris plans to file for regulatory approval with US Food & Drug Administration in early 2024
The DPP is poised to be the first MPT to reach the market since the condom.

**Introduced**
- OCP
- Oral PrEP

**Rollout In Progress**
- Dapivirine vaginal ring (DVR)
- Cabotegravir long-acting injectable (CAB-LA)

**Key:**
- Contraception
- HIV prevention

AT A GLANCE: THE MPT R&D PIPELINE
Status of products in development

The DPP can generate lessons for future MPTs

Future MPTs are likely to build on the **health system adaptations, regulatory, delivery and financing** lessons generated from DPP introduction and scale-up.

Funding **HIV and SRH innovations** would benefit other MPTs in the pipeline. Investment in the DPP could **signal to governments that MPTs are a priority**.

**Foster integration** of HIV prevention and sexual and reproductive health (SRH) services to deliver a dual-indication product.

A **user-controlled, co-formulated pill supports convenience** and may motivate increased knowledge, use and adherence. Women and couples prefer a dual-purpose product, even as an oral formulation.
Key questions we will address to deliver the DPP and MPTs

- How will MPTs be funded amid a shrinking funding envelope for HIV prevention and SRHR?
- How can integration of HIV/FP programs be strengthened?
- How can providers be supported to deliver the DPP/MPTs?
- How can end users be reached with information on and supported to use the DPP/MPTs?
## Demand, delivery and data for decision-making: How market preparation for the DPP is reimagining prevention programs for a future with MPTs

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<tr>
<th>Title</th>
<th>Presenter</th>
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<tr>
<td><strong>Introduction:</strong> Preparing for a future with a range of MPT options</td>
<td>Jessica Rodrigues, AVAC (co-chair)</td>
<td>17:45</td>
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<td><strong>Who is most likely to use the DPP and how might we engage them effectively?</strong> Using HCD research to design demand generation and marketing plans for the DPP</td>
<td>Wawira Nyagah, AVAC</td>
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<td><strong>How can providers counsel on the DPP as a novel, combined product?</strong> Recommendations and process for reconciling oral PrEP and COC counseling guidance</td>
<td>Dr. Lisa B. Haddad, Population Council</td>
<td>18:10</td>
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<td><strong>Cost-effectiveness of the DPP for HIV and contraception across different populations in Western Kenya and South Africa</strong></td>
<td>Dr. Anna Bershteyn, NYU Grossman School of Medicine</td>
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<td><strong>How can planning for the DPP help build platforms for future MPTs?</strong> Integrating HIV and FP programs to accelerate delivery of new MPTs with proven approaches</td>
<td>Dr. Nyaradzo Mavis Mgodi, University of Zimbabwe (panel moderator/co-chair)</td>
<td>18:40</td>
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<td><strong>Key takeaways:</strong> Ingredients for the successful rollout of MPTs</td>
<td>Jessica Rodrigues, AVAC (co-chair)</td>
<td>19:10</td>
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