The Cost-Effectiveness and Optimal Price Level of Injectable PrEP with Lenacapavir in South Africa

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BACKGROUND

- Injectable lenacapavir (LEN) is 100% effective in protecting African women from HIV infection
- Its acceptable price and cost-effectiveness is unknown
- We estimated the impact of LEN compared to daily oral tenofovir disoproxil fumarate and emtricitabine (TDF/FTC) and injectable cabotegravir (CAB) for HIV prevention in South Africa
- We calculated the threshold price at which LEN or CAB would be as cost-effective as TDF/FTC scale up

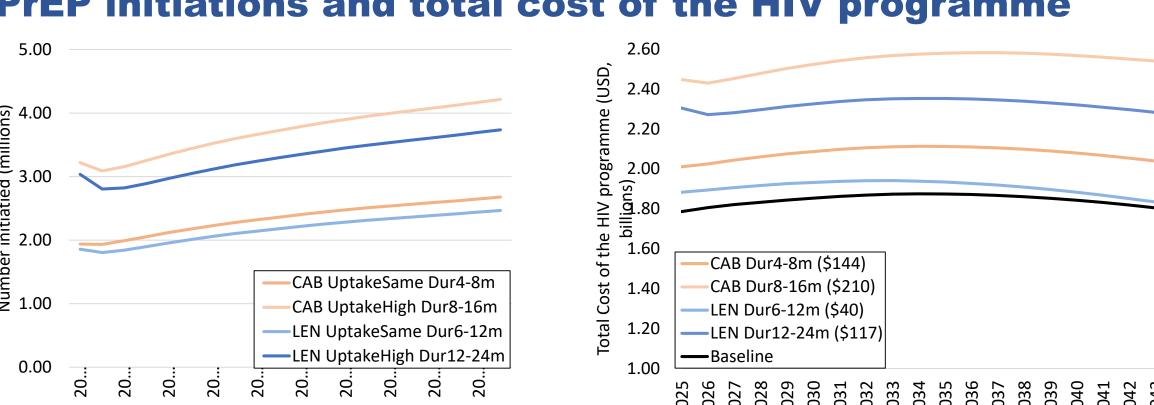
METHODS

- We used **Thembisa**, a deterministic HIV transmission model, to evaluate the impact and cost-effectiveness of PrEP provision to
- women (incl. female sex workers)
- gay men and other men who have sex with men
- heterosexual men.

over current TDF/FTC use over 20 years (2024-2045) of a) LEN; b) CAB; and c) TDF/FTC scale up

- Average cost in 2024 USD using ingredients-based costing and current South African market prices
- LEN assumed to cost \$40 or \$100 per injection
- Credible interval informed by probabilistic sensitivity analysis sampling 50 parameter combinations (incl. PrEP effectiveness, duration on TDF/FTC, tail protection for LEN/CAB, condom use reduction on PrEP)
- Assumed higher uptake and longer effective use duration of LEN or CAB compared to TDF/FTC throughout, with two scenarios each defined by average duration of use across populations (LEN: 6-12 or 12-24 months, CAB: 4-8 or 8-16 months).

PrEP initiations and total cost of the HIV programme



South Africa, the country that buys 20% of the world's PrEP, should not accept a lenacapavir price higher than \$225 per year (or \$59 per injection).

	Total cost of HIV programme [billions USD] (% increase over	New HIV infections [millions] (% increase over baseline)	Life years lost to AIDS (% saved over baseline)	Incremental cost- effectiveness ratio (ICER): Cost per life year	
Scenario	baseline)	Baseinie	Basemie	saved [USD]	
Baseline	36.84	2.00	16.46	_	
TDF/FTC scale up	38.55 (5%)	1.84 (8%)	16.28 (1%)	\$9,668	
Lenacapavir scale up (\$40 per injection)					
Same initiation rates as TDF/FTC; 6-12m duration	38.06 (3%)	1.45 (27%)	15.83 (4%)	\$1,946	
Higher initiation rates than TDF/FTC, 12-24m duration	39.96 (8%)	1.18 (41%)	15.49 (6%)	\$3,229	
Lenacapavir scale up (\$100 per injection)					
Same initiation rates as TDF/FTC; 6-12m duration	39.54 (7%)	1.45 (27%)	15.83 (4%)	\$4,318	
Higher initiation rates than TDF/FTC, 12-24m duration	44.39 (20%)	1.18 (41%)	15.49 (6%)	\$7,807	
Cabotegravir scale up					
Same initiation rates as TDF/FTC; 4-8m duration	42.57 (16%)	1.57 (21%)	15.98 (3%)	\$11,855	
Higher initiation rates than TDF/FTC; 8-16m duration	50.73 (38%)	1.31 (35%)	15.65 (5%)	\$17,156	

This study was made possible by the generous support of the American people through Cooperative Agreement 72067419CA00004 from the US Agency







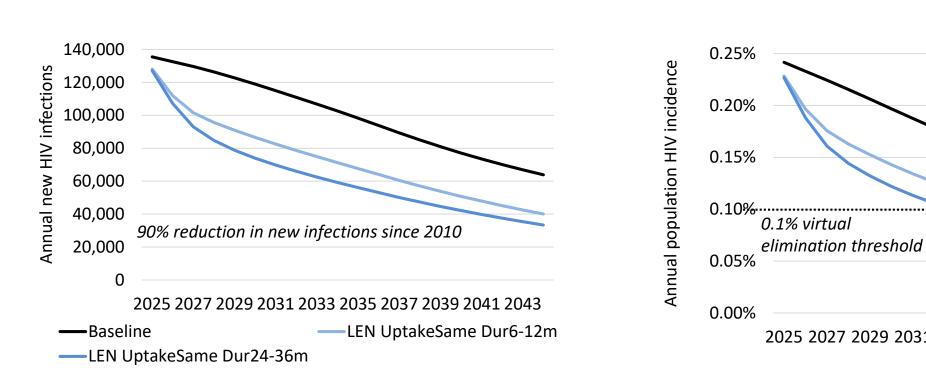




This work was also funded by Gates Foundation (INV-019496) under **Project Linganisa.**

RESULTS

- Despite similar effectiveness, LEN leads to higher impact throughout compared to CAB, due to higher uptake and longer effective use
- LEN could avert 27-41% of new HIV infections and 4-6% of deaths, and CAB 21-35% and 3-5%, resp., compared to 8% and 1% averted by TDF/FTC
- Because of its higher impact, LEN can be accepted at a higher price than CAB, with a threshold price of \$32-59/ injection (range \$19-115) or \$117-225 per person year, pppy (range \$74-469), compared to \$14-22/ injection (range \$9-30), and \$88-\$144/ pppy (range \$45-343) for CAB.



Scenario	Price per dose (credible interval)	Price per PY
Lenacapavir (per 463mg/1.5mL injection)		
Same initiation rates as TDF/FTC; 6-12m duration	\$59 <i>(\$31-115)</i>	\$225 <i>(\$125-469)</i>
Higher rates than TDF/FTC, 12-24m duration	\$32 <i>(\$19-58)</i>	\$117 <i>(\$74-231)</i>
Cabotegravir (per 600 mg/3 mL injection)		
Same initiation rates as TDF/FTC; 4-8m duration	\$22 <i>(\$9-49)</i>	\$144 <i>(\$64-343)</i>
Higher rates than TDF/FTC; 8-16m duration	\$14 <i>(\$6-30)</i>	\$88 <i>(\$45-211)</i>

CONCLUSIONS

- 1. Under high uptake, LEN could reduce incidence to below 0.1% by 2032 instead of 2042, helping to eliminate HIV in South Africa 10 years earlier
- 2. Injectable lenacapavir could be more costeffective than scaling up oral PrEP, and much more cost-effective than injectable cabotegravir, even at a drug price of \$100 per injection.
- 3. However, CAB should be rolled out now to cover the time to large-scale LEN manufacture (3-4 years).

FOR FURTHER INFORMATION, CONTACT

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