



**ADHERENCE STRATEGIES TO IMPROVE UPTAKE OF TRUVADA AND
DAPIVIRINE VAGINAL RING AMONG ADOLESCENTS AND YOUNG WOMEN
IN UGANDA; EXPERIENCE FROM MTN034 STUDY, KAMPALA MUJHU SITE**

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BACKGROUND

- Adolescent girls and young women (AGYW) in sub-Saharan Africa, aged 15-24, are at substantial risk of acquiring HIV and yet they have adherence challenges with daily oral pre-exposure prophylaxis (PrEP).
- Supporting adherence among AGYW is thus important to ensure high uptake and effective use of PrEP.
- In the MTN034 trial, adherence was moderately high and similar between oral PrEP and the dapivirine vaginal ring, thus we describe the adherence support strategies used at the Kampala site.

METHODS

- MTN-034/REACH was a randomized, open-label, phase 2a crossover trial among HIV-seronegative adolescent girls and young women aged 16–21 years at four clinical research sites in South Africa, Uganda, and Zimbabwe.
- Participants were randomly assigned to either the dapivirine ring or daily oral PrEP for 6 months, then switched to the other product option for 6 months, followed by a third 6-month period in which participants were given a choice of oral PrEP, the dapivirine ring, or neither.
- Participants were offered a menu of adherence support options, including digital support (text messages daily or weekly), group support (in-person or WhatsApp group meetings), and individual support (extra counselling sessions or peer buddies).
- Counselling was provided when drug concentration results were available to ascertain the needed adherence support.
- Adherence support choices and outcomes were documented in participants 'charts.

RESULTS

- A total of 60 participants were enrolled at the MUJHU site in Uganda.
- All enrolled participants (n=60) attended group adherence support meetings, held bi-weekly in groups of 8-15, facilitated by study counselors.
- Individual sessions were also held for each participant at their follow-up visits and as needed.

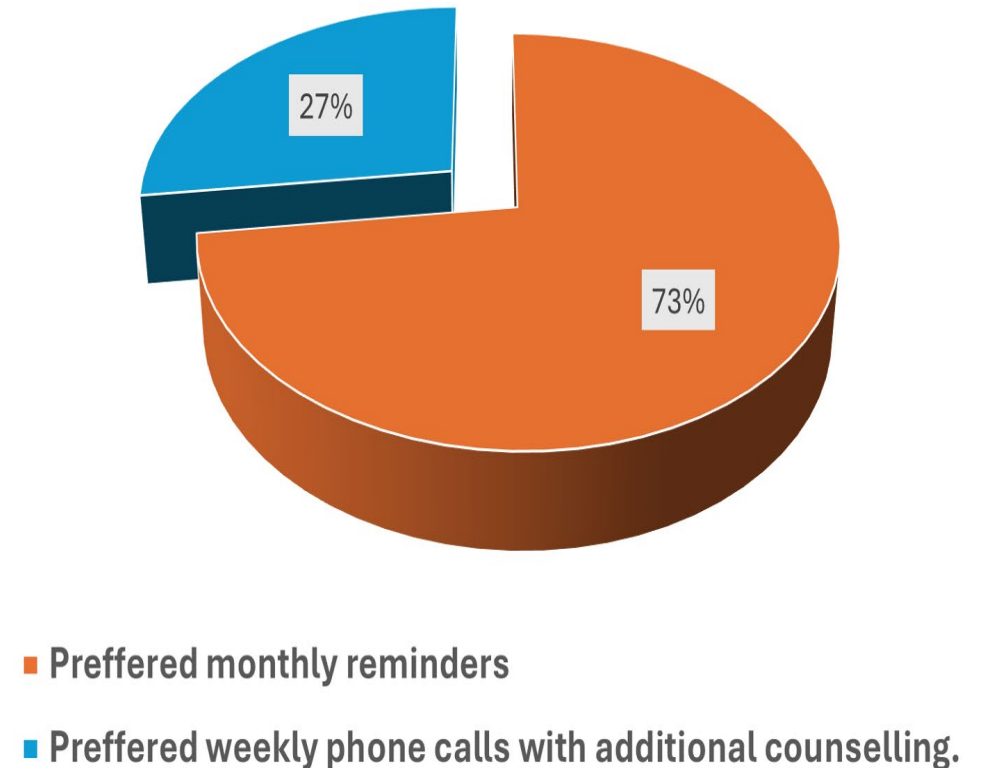
Results Continued

Adherence support options:

73% (44) of participants preferred monthly reminder calls, since majority did not have their own phones and they relied on their friends' phones for communications.

27% (16) preferred weekly phone calls with additional counseling. No WhatsApp group meeting was held because few had smartphones. (Figure 1).

Fig 1. Adherence Support Options



RESULTS CONTINUED

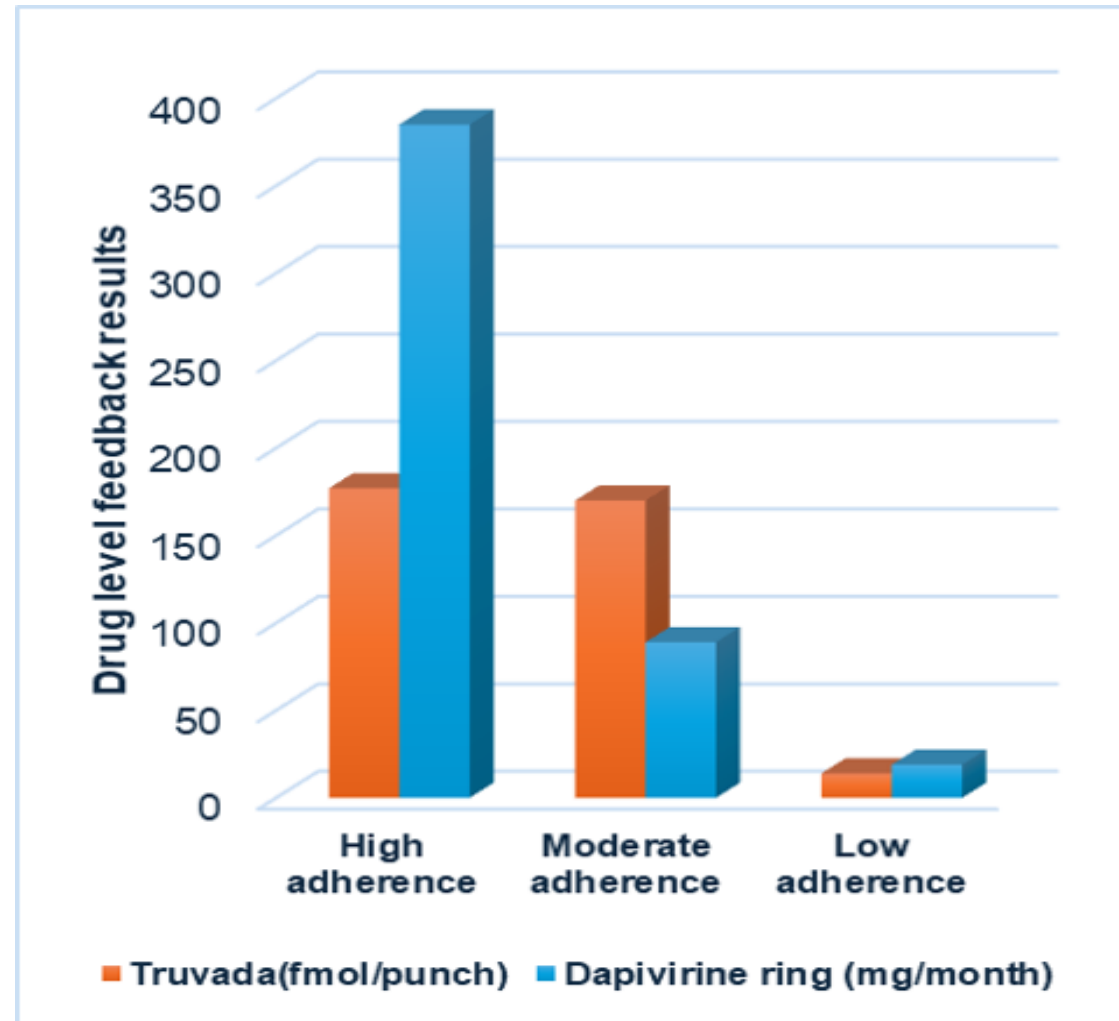
No participant chose text messages.

Reported challenges were addressed by the study counselors and the ring/tablet champions' which enhanced adherence. The Male partner challenge of feeling the vaginal ring was addressed by proper ring insertion and also informing the partner about the purpose of using the ring for HIV prevention

HIV risk reduction counselling and sexual and reproductive health education sessions in the waiting room empowered them to reduce their potential exposures.

All these efforts combined, resulted in improved adherence and continued use as shown in figure 2.

Figure 2. Drug level feedback results by product



CONCLUSION

- Providing a variety of adherence support options is key to improving AGYW's adherence to HIV prevention products.
- Our experience among this population in Uganda highlights a desire for in-person support groups and monthly reminder calls.

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