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Educational Resources for Healthcare Professionals

- HIV BLUPrInt: <u>CAB-LA Resources</u>
- American Academy of HIV Medicine: Long-Acting Agent Resource Center
- American Academy of HIV Medicine: Injectable PrEP Guidelines
- California PTC: Injectable PrEP Learning Community Resources
- Denver PTC:
 - Options for HIV PrEP
 - Denver Sexual Health Clinic HIV PrEP Clinical Guideline

Accessing Medication

- <u>ViiV Resources</u>
 - Prescribing Information
 - Dosing and Drug Interactions
 - Medication Access and Patient Support
 - Includes medication acquisition options
 - Speciality Pharmacy
 - Buy and Bill
- <u>Resources for Healthcare Providers</u>
- Apretude Ordering Guide



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Prescribing Information: The below tables are from the medication package insert.

Dosing/Administration:

1. Direct to Injection Dosing Schedule:

Table 2. Recommended Dosing Schedule (Direct to Injection) for Pre-exposure Prophylaxis in Adults and Adolescents Weighing at Least 35 kg

Intramuscular (Gluteal)	Intramuscular (Gluteal)
Initiation Injection	Continuation Injection
(Month 1 and Month 2)	(Month 4 and Every 2 Months Onwards)
APRETUDE ^a	APRETUDE ^a
600 mg (3 mL)	600 mg (3 mL)

^a Individuals may be given APRETUDE up to 7 days before or after the date the individual is scheduled to receive the injections.

2. Dosing with Optional Oral Lead In:

Dosing with OPTIONAL oral lead in

Table 1. Recommended Dosing Schedule (with Oral Lead-in) for Pre-exposure Prophylaxis in Adults and Adolescents Weighing at Least 35 kg

		Intramuscular (Gluteal)
	Intramuscular (Gluteal)	Continuation Injection
Oral Lead-in	Initiation Injection	(Month 5 and
(at Least 28 Days)	(Month 2 and Month 3)	Every 2 Months Onwards)
Oral cabotegravir 30 mg by	APRETUDE ^a	APRETUDE ^b
mouth once daily for 28 days	600 mg (3 mL)	600 mg (3 mL)

^a Should be administered on the last day of oral lead-in or within 3 days thereafter.

^b Individuals may be given APRETUDE up to 7 days before or after the date the individual is scheduled to receive the injections.



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3. Dosing After Missed Injections:

Table 3. Injection Dosing Recommendations after Missed Injections

Time since Last Injection	Recommendation	
If second injection is missed and time since first injection is:		
Less than or equal to 2 months	Administer 600-mg (3-mL) gluteal intramuscular injection of APRETUDE as soon as possible, then continue to follow the every-2-month injection dosing schedule.	
Greater than 2 months	Restart with 600-mg (3-mL) gluteal intramuscular injection of APRETUDE, followed by a second 600-mg (3-mL) initiation injection dose 1 month later. Then continue to follow the every-2-month injection dosing schedule thereafter.	
If third or subsequent injection is missed and time since prior injection is:		
Less than or equal to 3 months	Administer 600-mg (3-mL) intramuscular injection of APRETUDE as soon as possible, then continue with the every-2-month injection dosing schedule.	
Greater than 3 months	Restart with 600-mg (3-mL) gluteal intramuscular injection of APRETUDE, followed by the second 600-mg (3-mL) initiation injection dose 1 month later. Then continue with the every-2-month injection dosing schedule thereafter.	

CAB-LA Considerations

Potential Risk of Resistance with Apretude

There is a potential risk of developing resistance to Apretude if an individual acquires HIV-1 either before or while taking Apretude or following discontinuation of Apretude. To minimize this risk, it is essential to clinically reassess individuals for risk of HIV-1 acquisition and to **test before each injection** to confirm HIV-1 negative status. Individuals who are confirmed to have HIV-1 infection must transition to a complete HIV-1 treatment regimen.

Alternative forms of PrEP should be considered following discontinuation of Apretude for those individuals at continuing risk of HIV-1 acquisition and initiated within 2 months of the final injection of Apretude.



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Patient Assistance Programs

Read more <u>here.</u>

1. Apretude Savings Program

The Apretude Savings Program may help consumers with their out-of-pocket costs for prescribed Apretude.

- The program is for commercially insured consumers prescribed Apretude
- If approved, consumers may pay as little as \$0 copay
- Consumers must be a resident of the United States or US territories
- Up to \$7,850 every calendar year.
- Medicare-eligible consumers and consumers enrolled in government-funded programs are not eligible.

2. Patient Assistance Program (PAP)

Eligibility for PAP, patients must:

- Live in one of the 50 states, the District of Columbia, or Puerto Rico
- Have a household income less than or equal to 500% of the Federal Poverty Level based on household size
- Not be eligible for Medicaid or Puerto Rico's Government Health Plan, Mi Salud And either:
- Have no prescription drug coverage, or
- Have a Medicare Part B, Medicare Part D, or Medicare Advantage Plan, and have spent at least \$600 or more on out-of-pocket prescription expenses during the current calendar year, or
- Have a private insurance plan limited to generic-only coverage, outpatient use only, or therapeutic class exclusion (non-coverage) of drug

