

Early Real-World Adoption Patterns of Long-Acting Lenacapavir for HIV PrEP in the United States (June 2025–March 2026)

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Disclosures

- **Li Tao:** Employee and shareholder of Gilead Sciences, Inc.
- **Juan Yang:** Employee and shareholder of Gilead Sciences, Inc.
- **Woodie Zachry:** Employee and shareholder of Gilead Sciences, Inc.
- **Joshua Gruber:** Employee and shareholder of Gilead Sciences, Inc.

Introduction

- Lenacapavir is a twice-yearly injectable antiretroviral approved by the US Food and Drug Administration for HIV-1 pre-exposure prophylaxis in June 2025^{1,2}
- Currently available PrEP options in the US include oral and injectable options with a range of dosing intervals^{3,4}



Daily oral PrEP

Emtricitabine/tenofovir disoproxil fumarate and emtricitabine/tenofovir alafenamide



Injectable PrEP

Twice-yearly LEN and every-2-month cabotegravir

- Assessing early uptake of long-acting PrEP may help identify initiation patterns and populations who could benefit from less frequent dosing due to utilization challenges with other PrEP regimens



To describe **early real-world initiation patterns** of **twice-yearly LEN** for PrEP in the US during the **first 9 months post-approval**

Methods: Cohort Selection and Key Metrics Assessed



Individuals in the US with at least one LEN PrEP prescription (June 18, 2025 to March 20, 2026) were identified using IQVIA pharmacy and medical claims^a

Metrics assessed



LEN PrEP utilization patterns



Prior PrEP experience of LEN adopters



Population characteristics of LEN PrEP adopters

^aLEN use was obtained by National Drug Codes 6195834021 (lenacapavir sodium, 463.5 mg/1.5 ML X2, solution; injection on day 1, and every 6-months [26 ± 2 weeks]) and 6195834031 (4 tablets, 300 mg/tablet; 2 tablets taken orally on each of day 1 and day 2); and Current Procedural Terminology code J0738 (Injection, lenacapavir, 1 mg, FDA approved prescription, only for use as HIV PrEP [not for use as treatment for HIV]).
FDA, Food and Drug Administration; LEN, lenacapavir; PrEP, pre-exposure prophylaxis.

Results: Early LEN PrEP Utilization Patterns



LEN PrEP was prescribed to **12,188 individuals** during the first 9-months post-FDA approval



59% received ≥ 1 injectable LEN dose

Prescription-to-injection conversion rate following respective FDA approvals for LEN (Jun 2025) and CAB (Dec 2021)



Among **7155 individuals** who received an injectable LEN dose



97%

had an oral loading LEN prescription^a



90%

had oral loading and injectable LEN dispensed on the same day



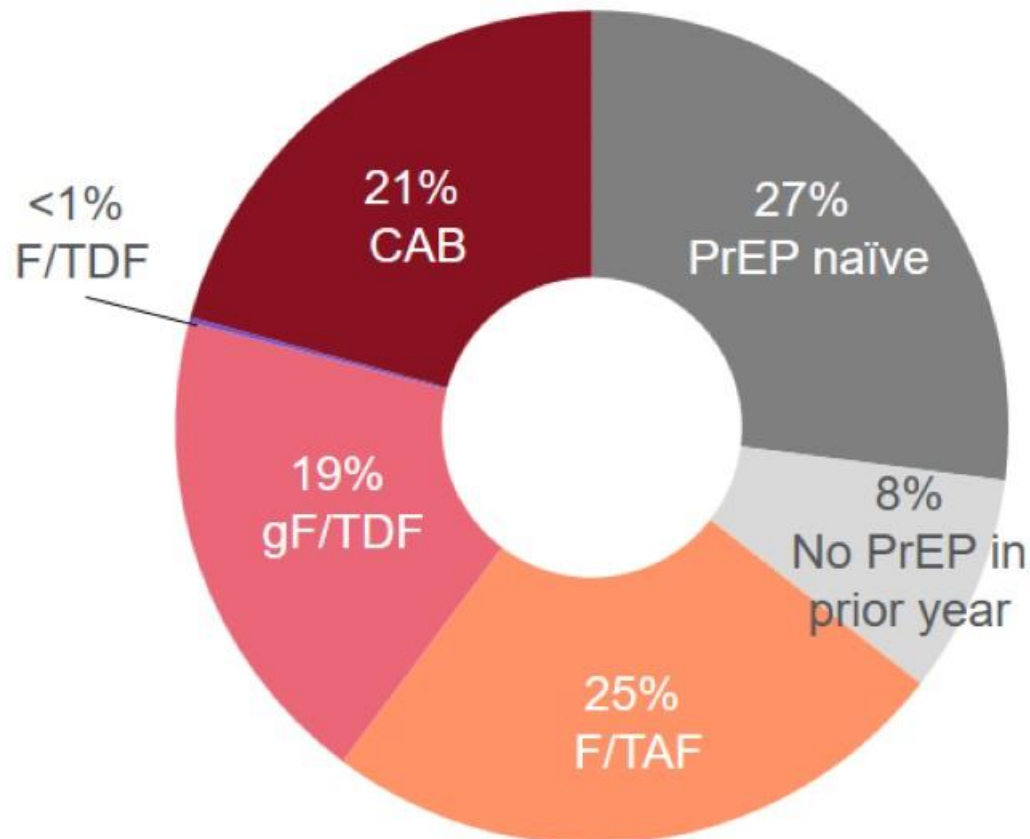
Early post-approval data show increasing prescription-to-injection conversion rates for LEN PrEP, with most oral loading and injectable LEN dispensed on the same day

^aAt initiation, LEN recipients take a short simultaneous course of oral LEN ('oral loading') to rapidly achieve therapeutic drug concentrations. CAB, cabotegravir; FDA, Food and Drug Administration; LEN, lenacapavir; PrEP, pre-exposure prophylaxis.

Results: Prior PrEP Experience



Distribution of prior PrEP use among injectable LEN dose recipients (n=7155)



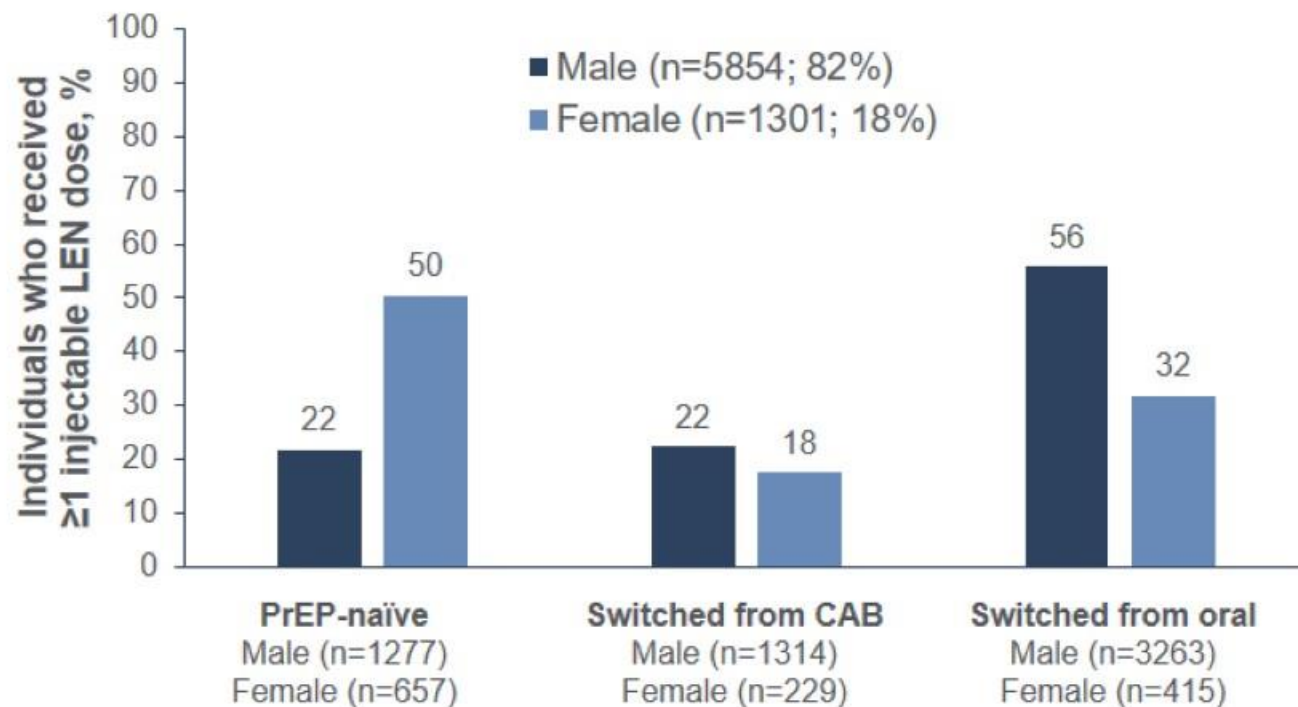
LEN recipients had diverse prior PrEP experience

- 35% had not used PrEP in prior year or had never used PrEP
- 44% previously used oral PrEP
- 21% previously used CAB

Results: Prior PrEP Experience by Sex



Prior PrEP use among injectable LEN dose recipients, by sex assigned at birth



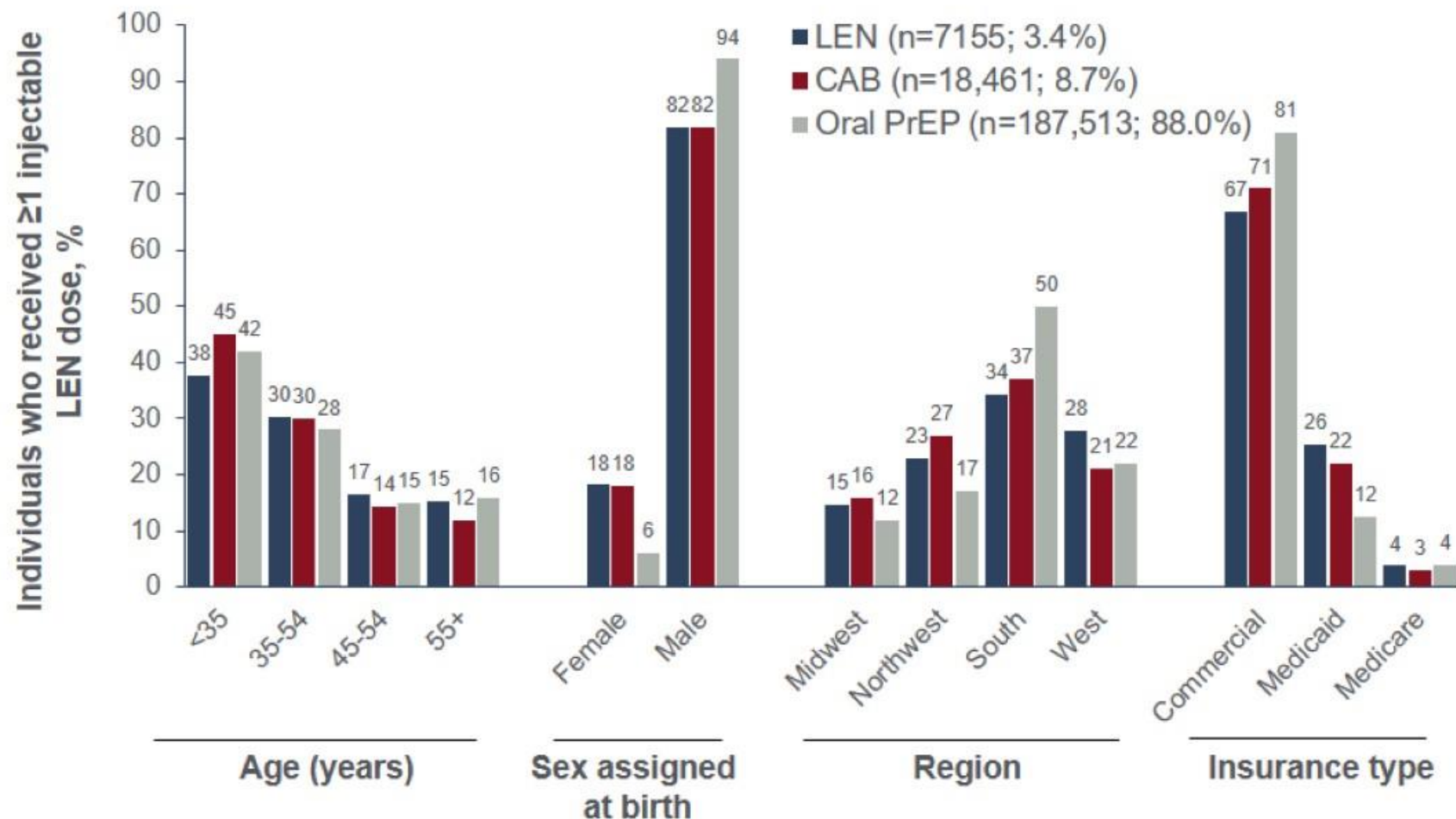
Prior PrEP use differed between male and female recipients

- 18% of LEN initiators were female; for context, females accounted for 10% of all US PrEP users in 2025¹
- 50% of female LEN initiators were PrEP-naïve
- 56% of male LEN initiators switched from oral PrEP

Results: Population Characteristics of PrEP Users



Characteristics of injectable LEN recipients versus other PrEP users^a



LEN was utilized by a diverse population

- Regimen use varied by age, sex, region, and payer type
- A greater proportion of females than males used injectable PrEP versus oral PrEP

Demographic characteristics were obtained from insurance enrollment or administrative files.

^aIncludes CAB and all oral PrEP options during the study period.

CAB, cabotegravir; LEN, lenacapavir; PrEP, pre-exposure prophylaxis.

Limitations



Claims data only capture paid prescription dispensations or injections and do not capture reasons for changes in utilization patterns or regimen selection



Findings reflect individuals who initiated LEN during the first 9 months following LEN approval; utilization patterns and characteristics may evolve as uptake expands over time



Long-term adoption patterns have not yet been fully evaluated and warrant future assessment as follow-up data mature

Conclusions



Strong early adoption of LEN PrEP

Increasing LEN prescription-to-injection conversion was observed in the first 9 months post-approval, with most **oral loading and injectable LEN dispensed on the same day**



Diverse prior PrEP experiences

LEN PrEP was utilized by both **PrEP-naïve** and **prior PrEP users**

Half of female LEN PrEP initiators were **PrEP-naïve**



Diverse populations

LEN PrEP initiation was observed across **age, sex, geographic region, and insurance groups**, supporting **broad early adoption across diverse populations**



Early real-world utilization data suggest twice-yearly LEN can potentially expand PrEP choice and may support broader PrEP engagement

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