

An Innovative Long-acting Injectable Clinic: A Multidisciplinary Approach to HIV Care in General Practice

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Disclosures

- Both authors of this presentation have previously received honorarium from ViiV Healthcare.

View Street Medical

- North Perth WA – Whadjuk Noongar Country “Always was always will be”
- Several clinicians have a special interest and qualification in HIV treatment
 - X5 S100 prescribers
- 500 patients living with HIV
- MDT – Drs, practice nurses, part-time pharmacist, specialist phlebotomist, long-acting injectable nurse
- Non-dispensing pharmacist:
 - WA Primary Health Alliance funded a Non-dispensing Pharmacist (GP Pharmacist) for two days a week in 2019
 - Program aimed at enhancing multidisciplinary work within GP practices and to improve the quality use of medicines.
 - COVID vaccinations available 2021 – enabled VSM to fund position to assist with vaccination campaign
 - Pharmacist is well embedded within the VSM Clinical team
- Cabenuva clinic Since 2023
 - Patient numbers increased from 4 to approx. 60 in 2 years



Clinical Need for Cabenuva Clinic

- Wanted to provide a clinically relevant, convenient and bulk-billed service
 - Flexible timing of appointments (evenings and weekends) to facilitate working patients
 - Checking in with regular GP every second appointment
- Benefits of Cabenuva:
 - Removing the challenges associated with daily HIV therapy¹:
 - Fear of disclosure
 - Anxiety with staying adherent
 - Daily reminder of HIV
 - Inconvenience
 - Fatigue with daily ARVs

How is the Cabenuva Clinic Sustainable?

- View St Medical: Mixed billed private practice
- Nurse Long-Acting Therapies (Project) NLAT
 - Pilot program
 - Nurse provided to View St through third party funded by ViiV Healthcare
- Funding:
 - GP Management Plans
 - Participation in Case Conferences – 3 health professionals
 - Home Medicine Reviews (HMR) – referrals done by pharmacist
 - GP time saved by pharmacist

Role of the GP Pharmacist - Overview

- Non-dispensing role
- Patient directed services
 - Medication counselling, medication reviews, device training
 - HMR referrals
 - Case conferences
- Liaison Services
 - Transitions of care
- Staff directed services
 - Medication queries from Drs and nurses
 - Staff education
- Quality Improvement
 - Medication audits

Cabenuva Basics

Long-acting HIV treatment – 2 monthly injections:

Cabotegravir 600 mg/3 mL

Rilpivirine 900 mg/ 3 mL

Loading dose – Month 1 and 2

Cabotegravir and rilpivirine injections should be administered at separate gluteal injection sites during the same visit. A complete dose requires two (2) injections: one injection of cabotegravir and one injection of rilpivirine¹



Cabenuva Pharmacological Considerations

1. Importance of adherence

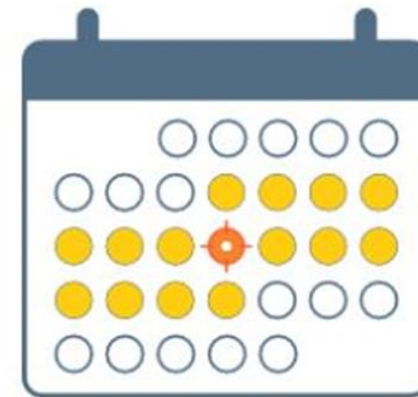
- Viral suppression
- Reduce risk of viral rebound
- Development of resistance
- Flexible Treatment Window 7 days either side

2 . Drug-drug interactions

- Rifampicin, rifapentine, carbamazepine, oxcarbazepine, phenytoin,
- phenobarbital, rifabutin, St John's wort (*Hypericum perforatum*),
- systemic dexamethasone, PPI (oral rilpivirine). ¹

3. Cold chain management

- Store at 2°C to 8°C. Do not freeze.



 **Target Treatment Date**

 **Flexible Treatment Window**

Image adapted from: CABENUVA Dosing and Administration Guide, ViiV Healthcare, 2025

Cabenuva Clinic: Initial Set-up

Education

- Learning about the medication
- Conferences, visits from medication reps, nurse injection training, visits to Royal Perth Hospital (RPH), reception upskilling

Clinical process

- Collaborative meetings – Drs, nurses, pharmacist

Written clinical protocol developed – very detailed with clinical information

1. Dr Identification of patient
2. Patient Counselling – nurse or pharmacist
3. Appointment Itself

Medication management – cold chain management

- Engagement with delivery pharmacy
- Storage - fridge

Cabenuva Clinic: Evolution Overtime

Currently Pharmacist Overall governance and management:

- Ongoing Education
 - In house training –reception staff, new nurses and Drs

Clinical Process

- Clinical protocol updates, flow chart, autofill's, spreadsheet, appointment recalls
- Patient counselling by pharmacist:
 - Checking Drug interactions
 - Explaining medication management process

Medication management

- Liaison with delivery pharmacy
- Prescriptions up to date – streamline procedure with each Dr
- Cold chain management

Trouble shooting

- Patient appointments
- Managing missed appointments – oral bridging

Patient Flow Chart

Clear role for each team member:

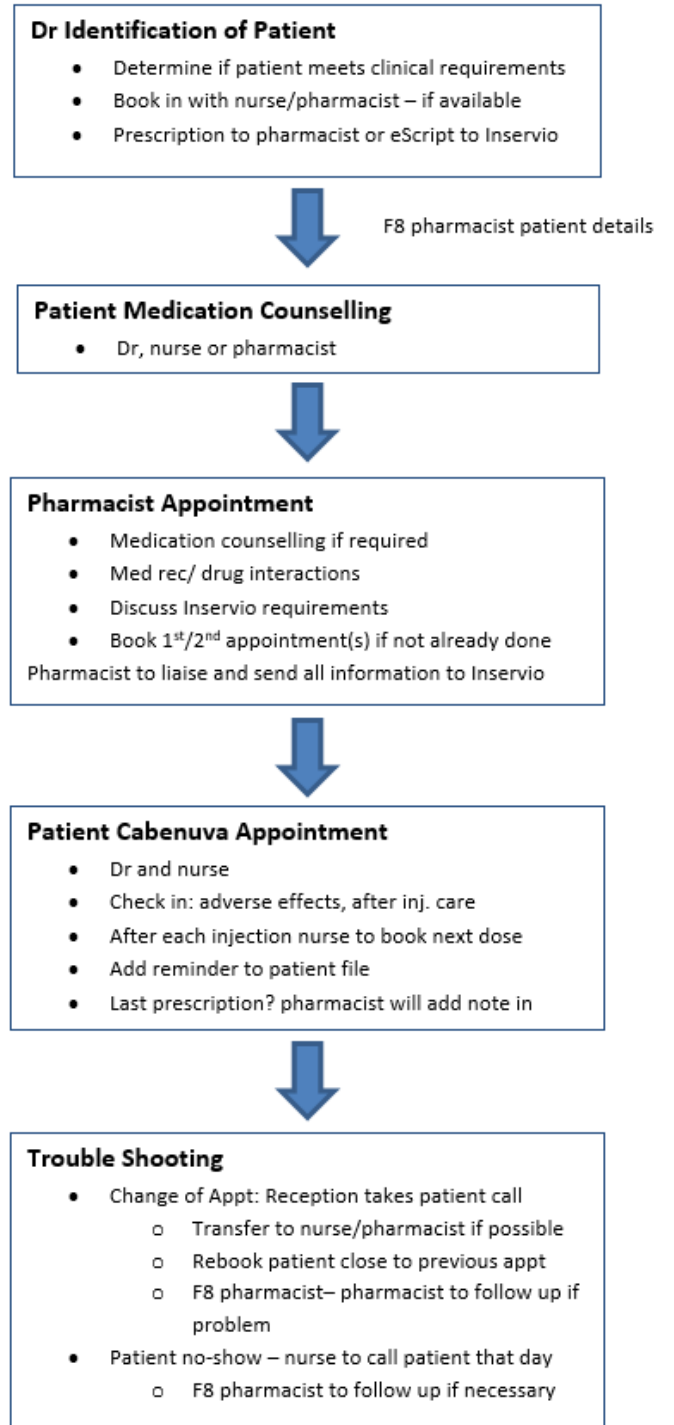
- Dr, nurse, pharmacist, reception

Pharmacist appointment for every patient

Processes in place to make sure patients are adherent:

- Every patient is booked in advance for next appointment
 - 8 weekly at completion of previous one
- Reminders set in practice software
- Pharmacist weekly checks


Trouble shooting



Trouble Shooting

- Example 2: Patient calls up and wants to cancel appointment/ move appointment
 - Reception staff all trained up in procedure
 - Put call through to pharmacist/nurse if possible
 - Book patient in as close to previous appointment
 - Internal message to pharmacist (F8)
 - Pharmacist to follow up with patient if there is a problem
- Example 1: Patient No-Show to Appointment
 - Nurse call patient
 - Internal message to pharmacist (F8)
 - Pharmacist/nurse follow-up get patient in ASAP
 - Refer to Dr if unable to reach
- In all cases - training, communication via internal messaging system (F8) and collaboration

Appointment type:

 Cab Injection

Patient Notes

Pharmacist appointment - autofill

Detailed notes

Check list

Covers pharmacological considerations:

- Importance of adherence
- Drug-drug interactions
- Cold-chain management

CABENUVA COUNSELLING

Cabenuva contains two medicines, cabotegravir and rilpivirine prolonged-release injections for HIV infection

How is it Given

You will be given CABENUVA as two injections, **once every month for the first 2 doses and then once every two months.**

A nurse or doctor will give you the injections in the muscle on each side of your buttocks (intramuscular injection [IM]).

Target Treatment Window

+/- 7 days

Regular Appointments Are Important

Cabenuva will replace your current antiretroviral treatment.

To control your HIV infection, you **must attend your planned appointments** to receive Cabenuva

You should continue receiving Cabenuva for as long as your doctor recommends. Do not stop unless your doctor advises

you. Talk to your doctor if you are thinking about stopping treatment.

Cabenuva is Long acting - low levels of the medication can remain in your system for 12 months or more after your last injection.

Missed Appointments/Planned Missed Appointments

Can take oral medication to bridge the gap between appointments if necessary

Give us a call

Other Medications

- Medication reconciliation
- OTC, herbal medication? - St John's Wort

Medication Management

Rilpivirine has strict cold chain requirements

We have an agreement with a delivery pharmacy - Inservio

Deliver our Cabenuva medications for free - so it is here waiting for you when you have your appointment

Lisa from Inservio will give you a call to enroll you

Book in First Two Appointments

Inj One:

Inj Two:]

Explain Day of Injection

- take last dose of oral medication
- can take paracetamol, ibuprofen before the appointment
- See Dr first and then nurse - approx. time 30 mins total
- can be painful - pain decreases with each dose
- pain for approx. 3 days - can take pain relief meds, hot or ice packs
- no intense exercise e.g. leg exercises, massage for first few days

- Patient added to Cabenuva spreadsheet
- Prescription to Inservio
- Emailed Inservio - patient details (enrolment form), start date

Cabenuva Patient Spreadsheet

Patient Name	Dr	1st Dose	2nd Dose	3rd Dose	4th Dose	5th Dose	6th Dose *	7th Dose	Next Dose	In Fridge	New Prescription	Delivery	Initiation			Notes
													Inservio Form	Prescription	Counselling/ Inservio chat	
DA	MC	25/07/2023	22/08/2023	24/10/2023	17/12/2023	18/02/2024	20/04/2024		20/04/2024		Needs new script next appt	25th March	✓	✓	✓	
GH	MC	09/01/2024	06/02/2024	03/04/2024					03/04/2024	1		✓	✓	✓	✓	
MM	BW	RPH	RPH	20/03/2024					20/03/2025				emailed to patient	✓	✓	Transfer from RPH

Allows easy check:

- Patient has had medication counselling
- Medication in fridge or upcoming delivery
- Every patient has an upcoming appointment
- Every patient has a valid script

Benefits of MDT

Improved patient outcomes

- Improved adherence
- Decreased drug-drug interactions
- Effective medication management

Collaborative work environment

- Immediate source of expert advice
- Reduced stress for other team members

Looking to the Future

- Increasing patient choice
- Facilitating inter-site care
- Preparing for new long-acting injectable treatments
- Long-acting PrEP
- MDT Case Manager lead care

- Collaboration & Resource Sharing

