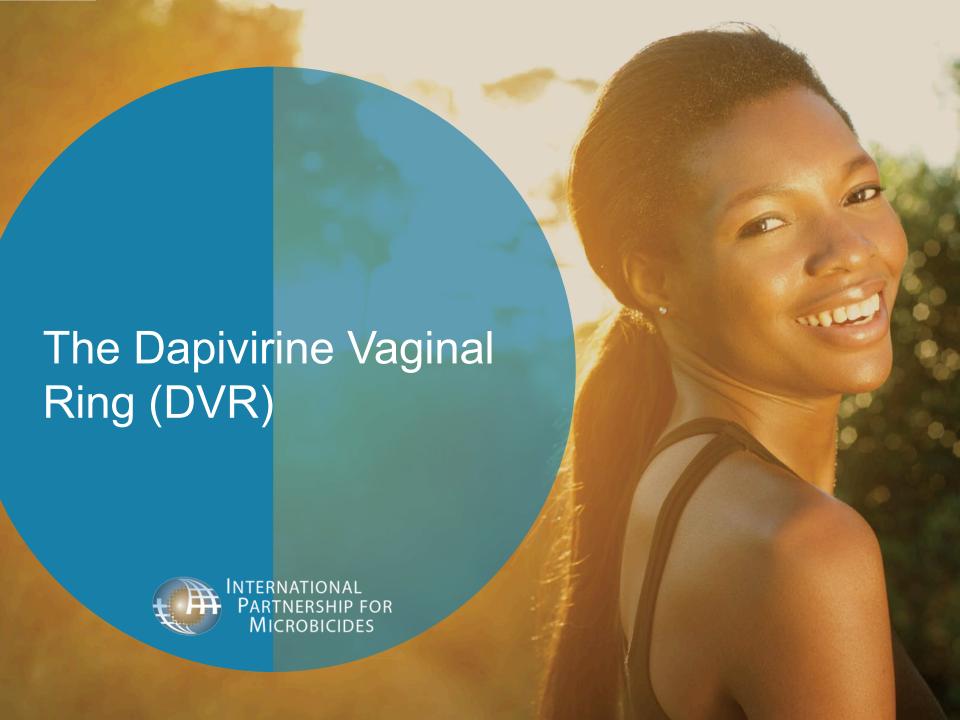


Advancing HIV Prevention Options for Women: The Dapivirine Vaginal Ring

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Why Did IPM Develop the Dapivirine Ring?







- Available methods have not done enough to slow the epidemic among women
- Need for discreet products that women can use on their own terms
- No one product will solve the HIV epidemic
- Women need multiple prevention options that make sense for their lives

Monthly Dapivirine Ring: Overview



- Flexible silicone vaginal ring
- Woman-initiated
 - Self-inserted monthly
 - Discreet
 - Does not interfere with sex
- Slowly releases ARV dapivirine locally
 - Exclusive worldwide rights through Janssen Sciences Ireland Unlimited Company
- Reduced HIV risk in Phase III trials:
 35% in The Ring Study, 27% in ASPIRE
- Open-label extension studies saw increased adherence, suggested greater risk reduction
- Positive EMA opinion and WHO PQ 2020;
 WHO recommendation and guidelines 2021
- First long-acting HIV prevention product

Regulatory Status: Country Submissions



African National Regulatory Authorities

- Submissions through WHO-coordinated collaborative registration procedure began November 2020 on rolling basis
 - Approval received in multiple African countries including Zimbabwe, South Africa
 - Submitted to Botswana, Kenya, Malawi,
 Namibia, Rwanda, South Africa, Tanzania,
 Uganda, Zambia, Namibia, Botswana
 - Submissions planned for Mozambique,
 Nigeria, Ethiopia
 - Import license processes in Eswatini, Lesotho



Five Action Areas to Support Ring Introduction









National Policy and Program Support

- WHO prequalification and normative guidance
- Global Essential Medicines List (EML)
- Global pharmacovigilance plan
- National regulatory approvals

- Manufacturing, packaging, and branding of the ring
- Quantification, forecasting and procurement
 planning for the ring
- Market research to identify ring users and understand their needs and preferences
- Development of demand creation strategies and materials that align with combination prevention
- Initiatives for early ring introduction
- Development of national policies, implementation plans, financing and M&E frameworks
- Development of healthcare provider clinical guidelines, training and supervision materials



Planned Pilot Projects & Implementation Studies

- IPM supports govts and implementers as they plan pilot projects and implementation studies
 - Working with procurement and SC partners
 - Market research with end users and HCPs
 - Technical assistance
 - Outreach
- CATALYST project to be implemented under USAID funded MOSAIC Consortium (SA, Zimbabwe, Lesotho, Kenya, Uganda)
- Other pilot studies being planned (Zimbabwe, Eswatini)

Initial Pathways for Access

- DVR incorporated into national guidelines: completed for Lesotho; in process for SA, Zimbabwe, Kenya, Botswana, Uganda, eSwatini
- Donor funded clinics in South Africa to start ring introduction - Global Fund to potentially fund introduction
- PEPFAR procurement for implementation projects through Chemonics/PSM contract
- Pilot projects under MSF and other implementers
- Private market interest



Supply Chain Overview





Commercial Manufacturing

- QPharma (now Sever Pharma Solutions) in Sweden
 - IPM owned equipment in dedicated facility
 - Validated scaled up process: ~35K rings/batch
 - Current capacity approx. 1 million rings/year
- 5-year shelf life; no special temperature conditions needed





Onboarding a Global Distributor

- IPM is appointing a sole distributor who will:
 - Work with buyers to determine demand and place orders with manufacturer
 - Store bulk rings at central facility
 - hold the commercial relationship with buyers of DVR including USAID/PEPFAR (through their procurement agent Chemonics/PSM project), the Global Fund, and others
 - Sell rings at an agreed price (to be finalized) with IPM oversight
- IPM remains Market Authorization Holder and has responsibility for technical and quality oversight



Service Delivery Considerations

- Easily integrated into service delivery platforms:
 - Periodic HIV testing, likely quarterly or less frequently
 - Prescription-based
 - Woman could receive 3 rings at a time (2 packaging configurations to be available)
 - Initial education/instruction from provider; can be selfinserted and replaced thereafter
- Clinical and implementation guidelines will vary by country - align with oral PrEP guidelines



Looking Forward...

Additional research led by MTN in partnership with IPM:

- REACH study: Adolescent girls and young women
- DELIVER study: Pregnant women
- B-PROTECTED: Breastfeeding women

Follow on products under development

- 3-month dapivirine ring
 - Potential for increased convenience to women; Lower annual costs
- 3-month dapivirine-levonorgestrel ring
 - HIV prevention and contraception





Potential Public Health Impact

Modeling data show that:

 A range of prevention options alongside scaled-up treatment is needed to achieve epidemic control

 Prevention methods with even modest efficacy would have a meaningful impact as part of a comprehensive strategy that could avert millions of HIV infections over time

 The ring would prevent infections among women that would otherwise not be averted by any other method

New, woman-centered options like the ring will be crucial to achieving epidemic control



BACK UP SLIDES

Dapivirine Ring Trials

Malawi, South Africa, Uganda, Zimbabwe

Phase III



4500

Women did not know if they're receiving the dapivirine ring or a placebo ring



O

Open-Label





HOPE
HIV Open-label Prevention Extension
Out of ASPIRE, there is HOPE

2400 Former Phase III participants

All women know they're receiving the dapivirine ring (there was no placebo group)

Phase III trials

HIV risk was lower with dapivirine ring use in the Phase III trials

35% ASPIRE 27%

Adherence was about 80% in Phase III trials

80%

No safety concerns were seen with use of the dapivirine ring in the Phase III trials **Risk Reduction**

Adherence

Safety

What we saw in

Open-label studies

62% 62% 639% HOPE

DREAM

Modeling data suggest HIV risk was reduced by about half with ring use across both studies

90%+

More than 90% of women used the daplylrine ring at least some of the time

The dapivirine ring's safety profile in the open-label studies was similar to the strong profile seen in the Phase III trials

WHAT WE KNOW

The Phase III trials
showed that HIV risk
was reduced in women
who used the dapivirine
ring

Open-label study results suggested that the dapivirine ring reduced HIV risk by about half across both studies, an encouraging trend

Adherence was higher in the open-label studies

The dapivirine ring had a strong safety profile in all the Phase III and open-label studies, with no safety concerns

The open-label study results suggest that when women are aware that the daplvirine ring reduced HIV risk in large clinical trials, they are more likely to use the product and see greater protection

