

# The State of HIV/AIDS Progress and Applying Lessons Learned to Current Public Health Emergencies

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OCTOBER 12, 2022

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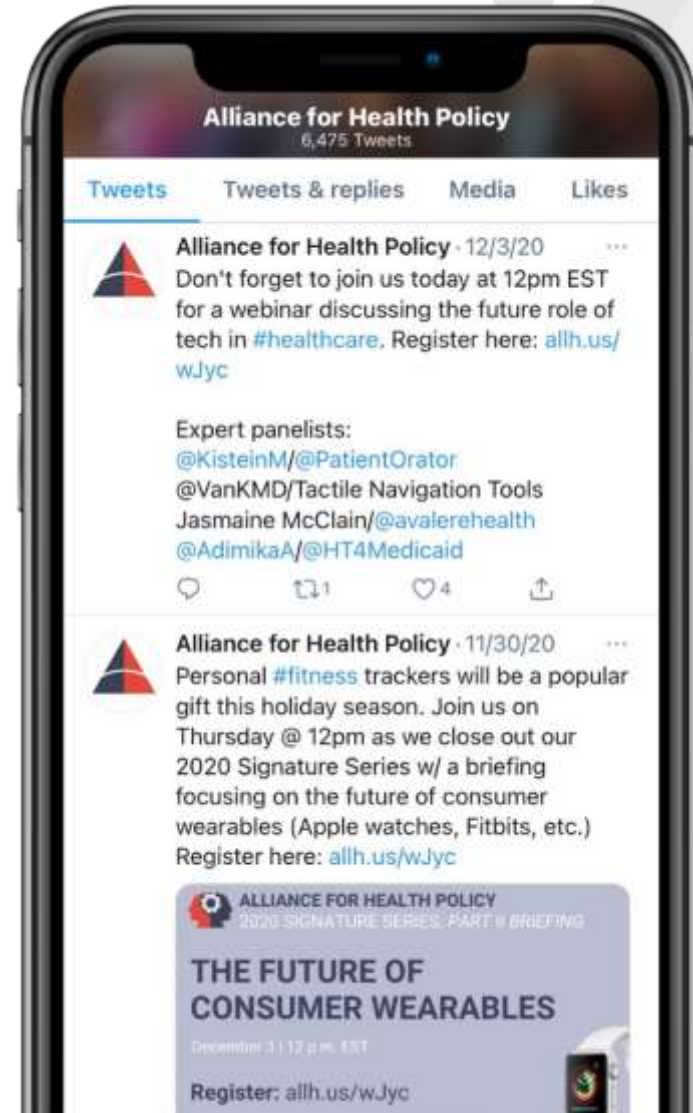


Alliance for Health Policy



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# PARTICIPATING



To mute yourself, click the microphone icon. The icon will appear orange when muted.

To ask a question, click the ? icon and enter your question in the chat box below.



@AParekhBPC

## **Anand Parekh, M.D., MPH**

Chief Medical Advisor

*Bipartisan Policy Center*

# SPEAKERS



**Lindsey Dawson, MPP**

Associate Director of HIV Policy  
& Director of LGBTQ Health Policy  
*Kaiser Family Foundation (KFF)*

 @LindseyH\_Dawson



**Amesh Adalja, M.D.**

Senior Scholar, Center for Health Security  
*Johns Hopkins Bloomberg School of  
Public Health*

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**Antoinette Jones**

HIV Public Speaker and Advocate  
*Positive Women's Network*

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*Moderator*

**Anand Parekh, M.D., MPH**

Chief Medical Advisor  
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@LindseyH\_Dawson

## **Lindsey Dawson, MPP**

Associate Director of HIV Policy;  
Director of LGBTQ Health Policy  
*Kaiser Family Foundation (KFF)*

# The State of HIV/AIDS Progress & Applying Lessons Learned to Current Public Health Emergencies

Lindsey Dawson

Presentation to: Alliance for Health Policy

October 12, 2022

[ldawson@kff.org](mailto:ldawson@kff.org)



Filling the need for trusted information on national health issues.



# Snapshot of the U.S. HIV Epidemic

1981-Present

An evolving epidemic



1.2 million

People living with HIV and living longer



About 35K new infections/yr

8% decline 2015 - 2019, previously stable



Disparities persist

Black Americans + Latinos

The South

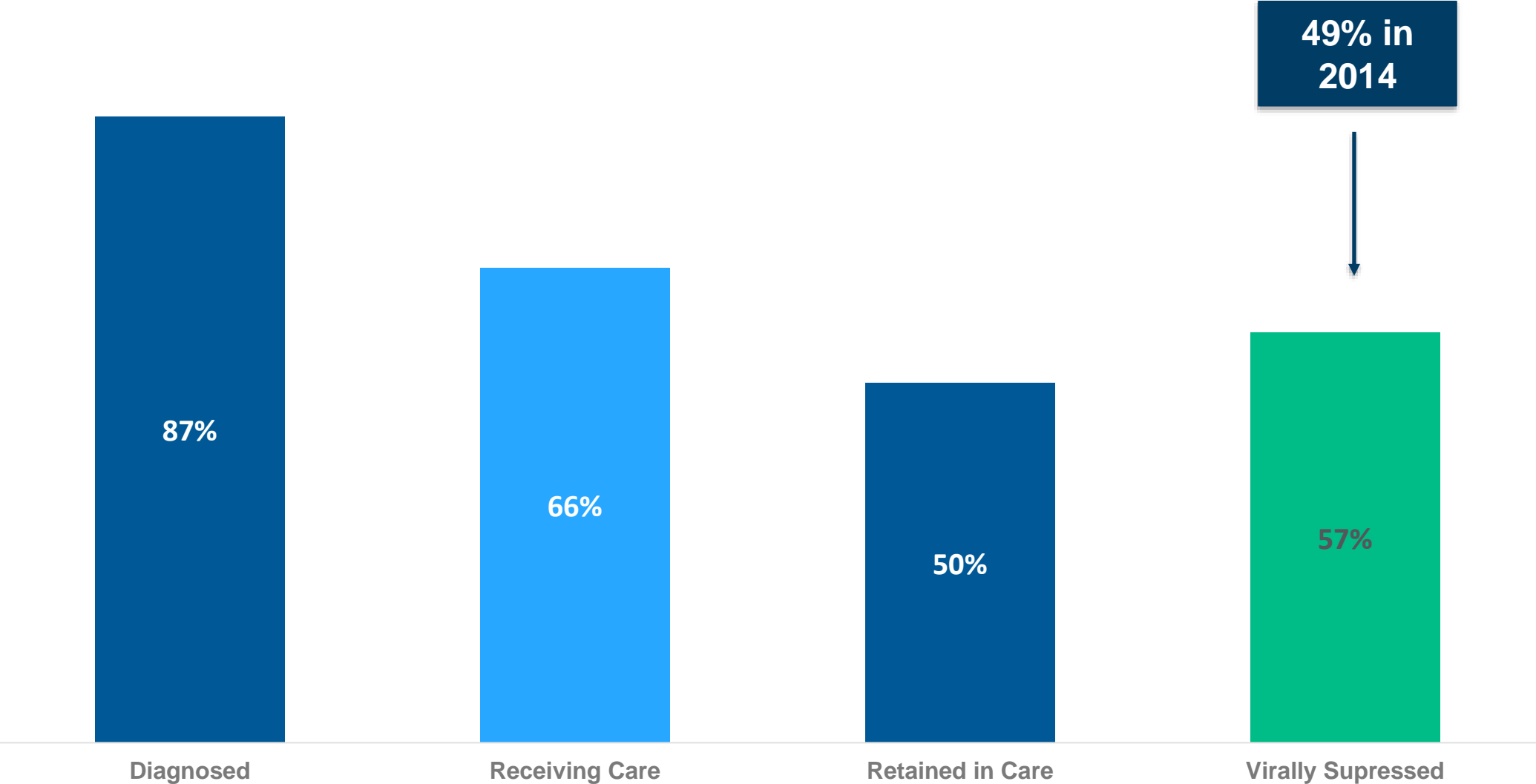
Gay/Bisexual Men + Transgender Women



New prevention options

PrEP, TasP

# HIV Care Continuum, 2019

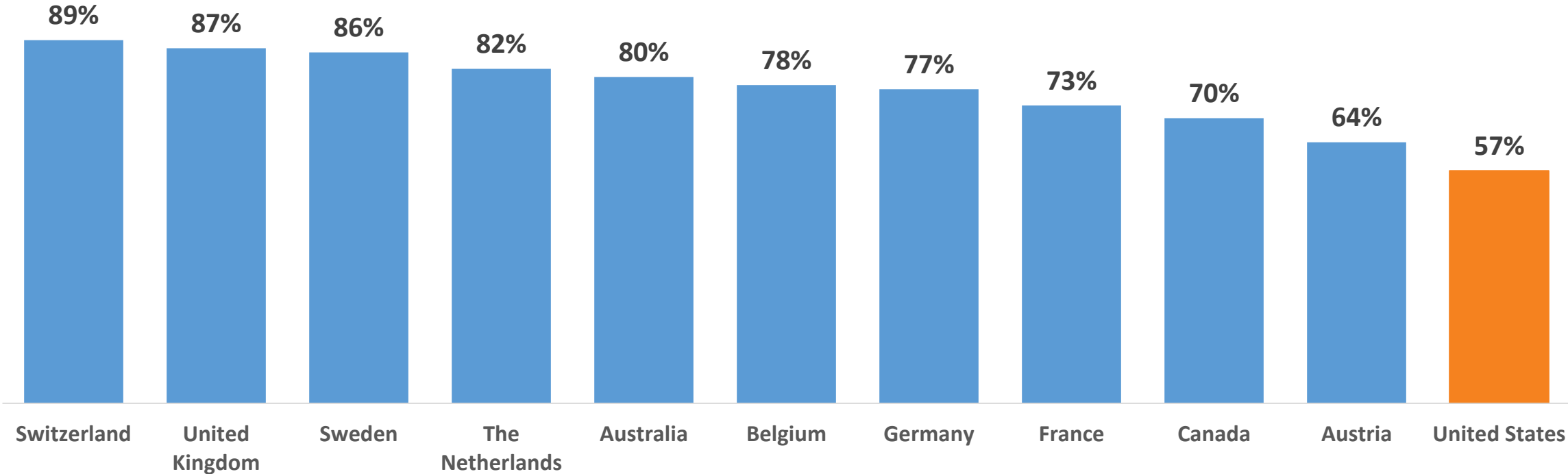


SOURCE: CDC. Status of HIV in the U.S. <https://www.hiv.gov/federal-response/policies-issues/hiv-aids-care-continuum>



# HIV Viral Suppression Rate in U.S. Lowest Among Comparable High-Income Countries, 2020 or Latest Year

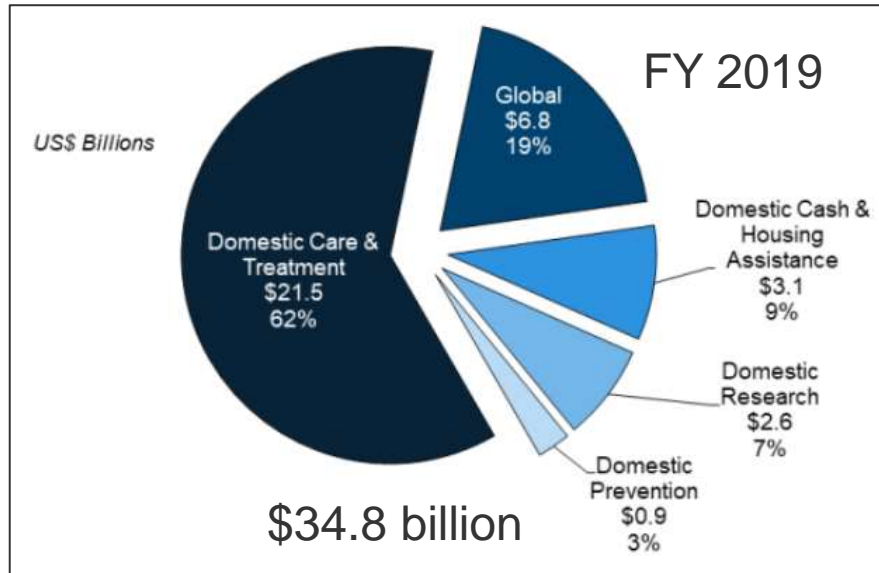
Rates of Viral Suppression Among People with HIV, by Country



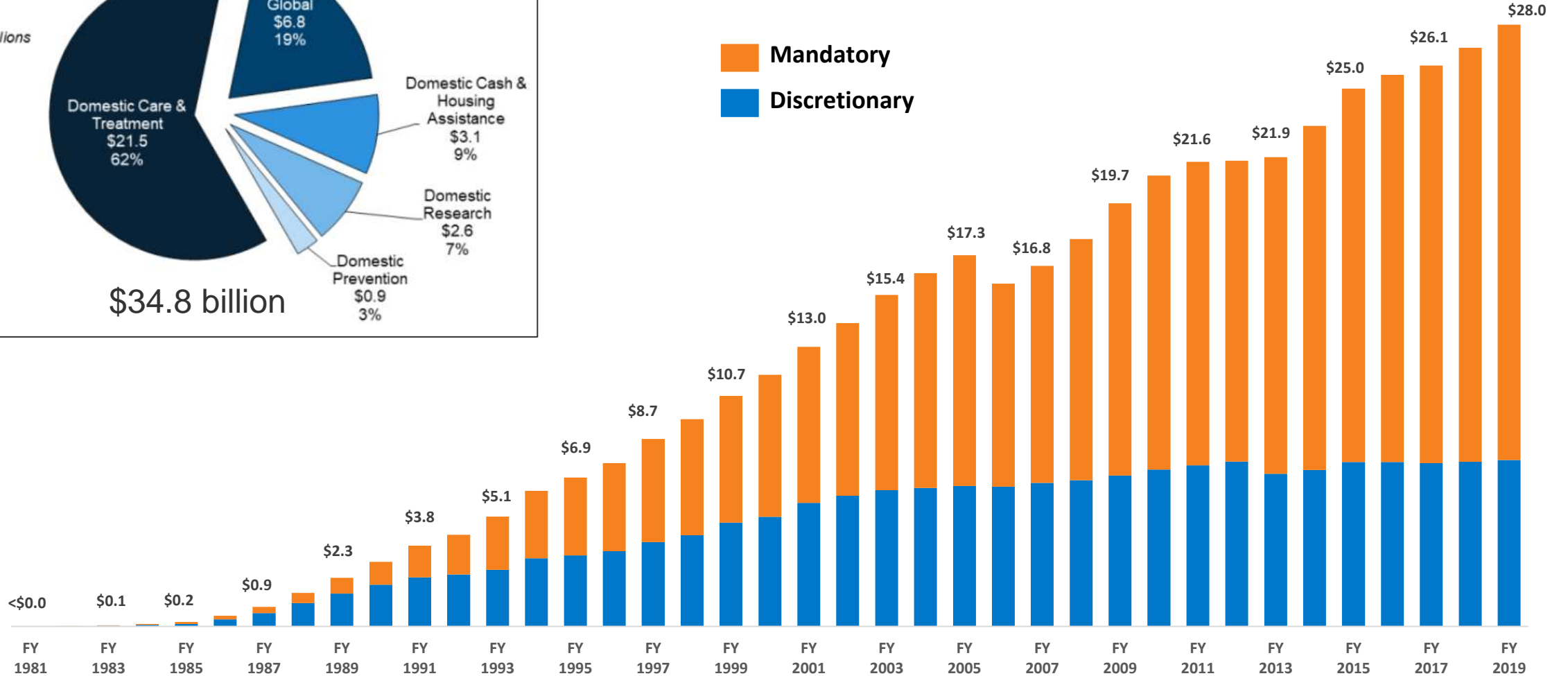
SOURCES: Australia: [https://kirby.unsw.edu.au/sites/default/files/kirby/report/Annual-Suveillance-Report-2021\\_HIV.pdf](https://kirby.unsw.edu.au/sites/default/files/kirby/report/Annual-Suveillance-Report-2021_HIV.pdf); Canada: <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/summary-estimates-hiv-incidence-prevalence-canadas-progress-90-90-90.html#c>; Europe: <https://www.ecdc.europa.eu/sites/default/files/documents/hiv-continuum-of-care-dublin-declaration-2021.pdf>; United States: Centers for Disease Control and Prevention. Monitoring selected national HIV prevention and care objectives by using HIV surveillance data—United States and 6 dependent areas, 2019. HIV Surveillance Supplemental Report 2021;26(No. 2), 2021. <https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-vol-26-no-2.pdf>  
NOTE: All data for 2020 except Canada which is for 2018 and U.S. which is for 2019.



# Federal Funding for HIV Programs, in Billions



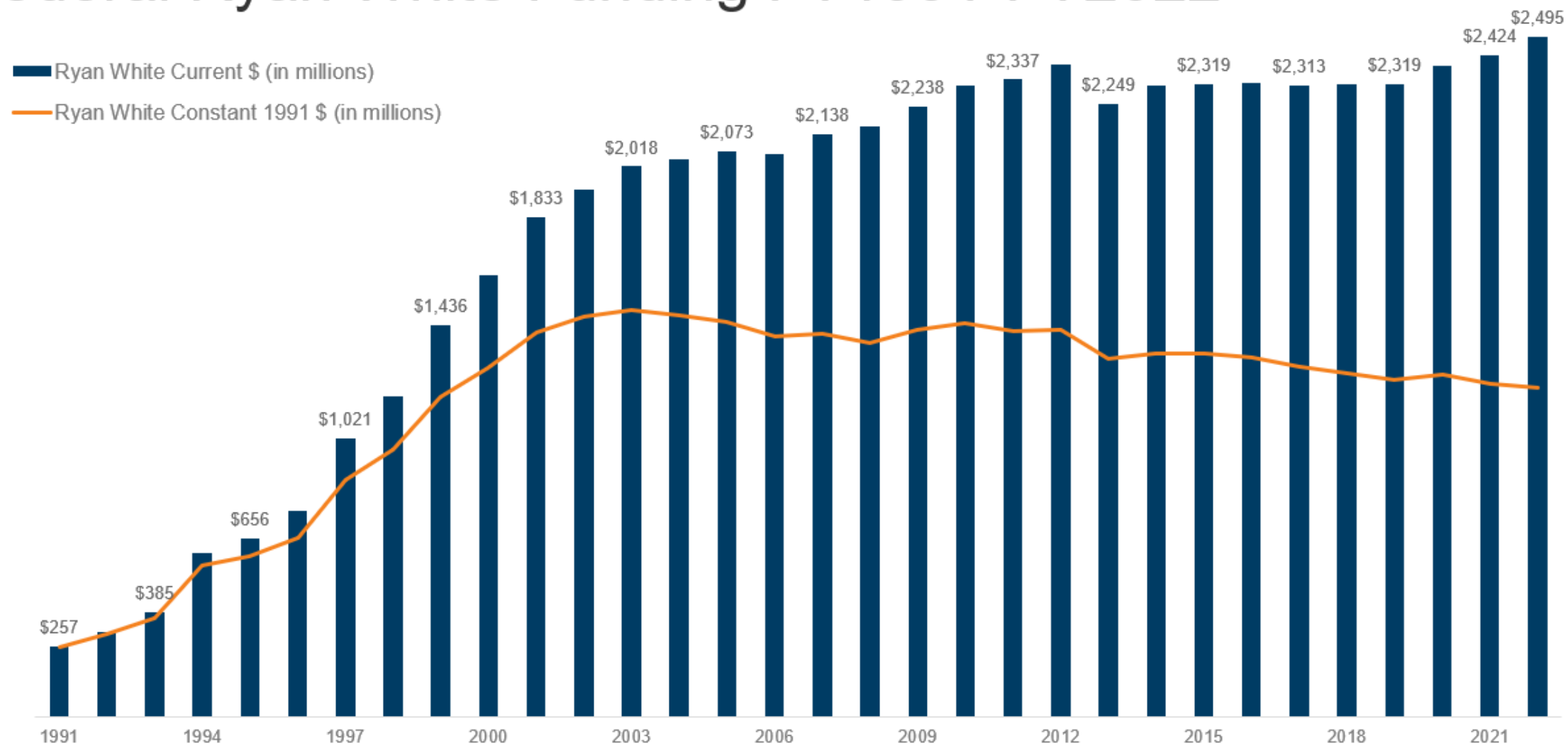
**Mandatory**  
**Discretionary**



SOURCE: KFF. U.S. Federal Funding for HIV/AIDS: Trends Over Time. <https://files.kff.org/attachment/Fact-Sheet-US-Federal-Funding-for-HIVAIDS-Trends-Over-Time>; KFF. ; KFF Analysis of data from OMB. Congressional Budget Justifications, spending bills., and personal communication with federal agencies.



# Federal Ryan White Funding FY1991-FY2022



Source: KFF analysis of data from OMB, congressional budget justifications, and appropriations bills

Notes: Funding adjusted using CPI-U [www.bls.gov](http://www.bls.gov)

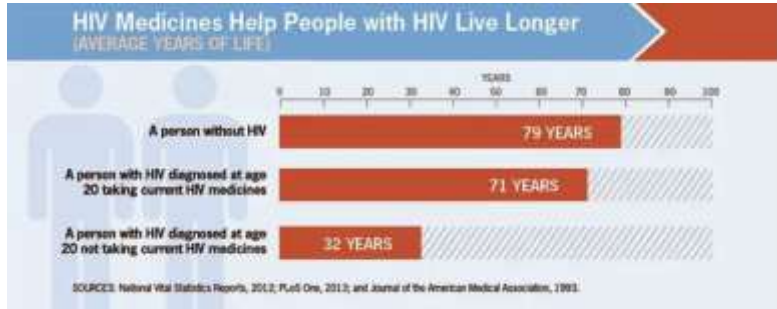




@AmeshAA

## **Amesh Adalja, M.D.**

Senior Scholar, Center for Health Security  
*Johns Hopkins Bloomberg School of  
Public Health*



### FDA Approval of HIV Medicines

1987-1994: AZT, ddI, ddC, Zalcitabine, Zalcitabine and ddI, ddC and ddI, ddI and ddC

Year	Medicine Name	Manufacturer
1987	AZT	Abbott Laboratories
1991	ddI	Abbott Laboratories
1992	ddC	Abbott Laboratories
1994	Zalcitabine	Boehringer-Ingelheim
1995	ddI	Abbott Laboratories
1996	ddC	Abbott Laboratories
1997	Zalcitabine	Boehringer-Ingelheim
1998	Zalcitabine	Boehringer-Ingelheim
1999	Zalcitabine	Boehringer-Ingelheim
2000	ddI	Abbott Laboratories
2001	ddC	Abbott Laboratories
2002	Zalcitabine	Boehringer-Ingelheim
2004	Zalcitabine	Boehringer-Ingelheim
2005	ddI	Abbott Laboratories
2006	ddC	Abbott Laboratories
2007	Zalcitabine	Boehringer-Ingelheim
2008	Zalcitabine	Boehringer-Ingelheim
2011	ddI	Abbott Laboratories
2012	ddC	Abbott Laboratories
2013	Zalcitabine	Boehringer-Ingelheim
2014	Zalcitabine	Boehringer-Ingelheim
2015	Zalcitabine	Boehringer-Ingelheim
2016	Zalcitabine	Boehringer-Ingelheim
2017	Zalcitabine	Boehringer-Ingelheim
2018	Zalcitabine	Boehringer-Ingelheim
2019	Zalcitabine	Boehringer-Ingelheim
2020	Zalcitabine	Boehringer-Ingelheim
2021	Zalcitabine	Boehringer-Ingelheim
2022	Zalcitabine	Boehringer-Ingelheim



# U = U

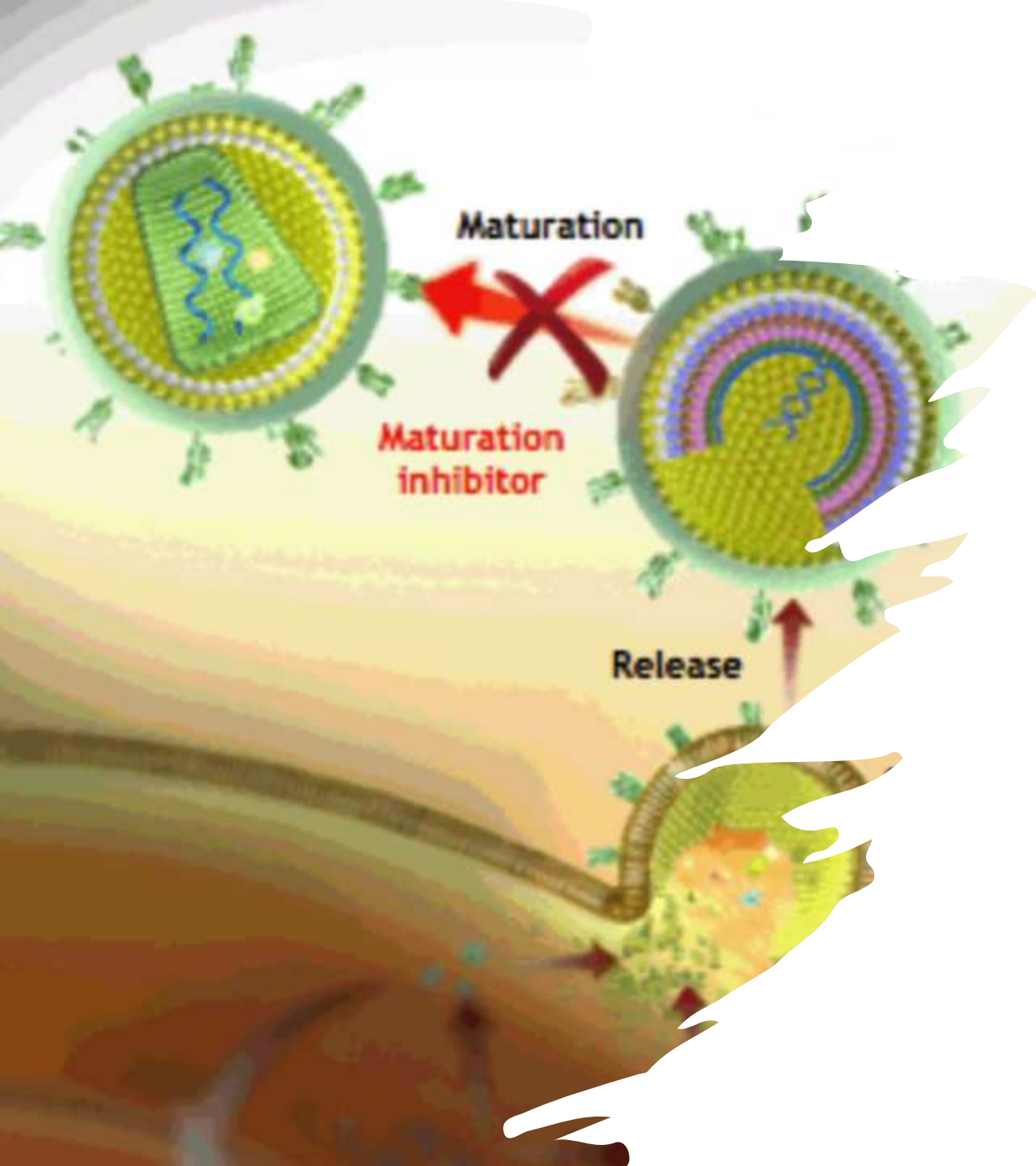
## UNDETECTABLE EQUALS UNTRANSMITTABLE



**TABLE 1.** FDA-Approved Options for HIV Preexposure Prophylaxis (PrEP)<sup>1-3</sup>

GENERIC NAME	BRAND NAME	DOSE	ROUTE OF ADMINISTRATION	FREQUENCY
Emtricitabine/tenofovir disoproxil fumarate (F/TDF)	Truvada	200 mg/ 300 mg	Oral	Once a day <sup>†</sup>
Emtricitabine/tenofovir alafenamide (F/TAF)	Descovy <sup>‡</sup>	200 mg/ 25 mg	Oral	Once a day
Cabotegravir (CAB-LA)	Apretude <sup>◇</sup>	600 mg	Intramuscular injection	Every 2 months <sup>§</sup>





# Next Advances

- New classes of drugs: maturation inhibitors
- Broadly neutralizing monoclonal antibodies
- Vaccines
- Cure



## **Antoinette Jones**

HIV Public Speaker and Advocate  
*Positive Women's Network*

# TAKE OUR SURVEY

Please fill out the evaluation survey you will receive immediately after this presentation, or via email this afternoon!

[www.allhealthpolicy.org](http://www.allhealthpolicy.org)



# UPCOMING EVENT

October 19, 2022 | 12:00 PM - 1:30 PM ET

## **Exploring the Market Competition Ecosystem: Lessons Learned and Next Steps**

Over the last few decades, horizontal and vertical consolidation within health care markets has become a pressing issue – with competing market forces driving this dynamic. While there is some bipartisan agreement on site-neutral payment policies and curbing anti-competitive practices in health care, it has been challenging to meaningfully address these dynamics. This event will: 1) discuss past and current trends in market consolidation ecosystem 2) explore current legislative and administrative policy levers and 3) identify lessons learned at the state and federal levels.

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THANK YOU FOR  
ATTENDING!