Supplemental Figure 1. Comparison of perceived benefits and concerns regarding the new treatment among HIV physicians and people living with HIV, 2019

Note. Not all perceived benefits or barriers were assessed in both surveys (depending on relevance to the target population). HCP = Healthcare provider; PLHIV = People Living with HIV.
“IHC survey: “Having an alternative for patients who cannot take daily pills for medical reasons (e.g. malabsorption, GI, CNS, dysphagia)”. People living with HIV survey: “I need long-acting injections as it is difficult for me to take daily pills due to other medical conditions (e.g. difficulty to swallow, neurocognitive disorder, gastrointestinal issue, surgery, co-infections)”


Healthcare provider survey: “Easier management of concomitant diseases (e.g. TB, Hep B, HCV, diabetes)”. Survey of people living with HIV: “Easier to take treatment for multiple diseases (e.g. TB, Hep B, HCV, diabetes)”.

Healthcare provider survey: “Removes food requirements”. Survey of people living with HIV: “No requirement to take food at certain times during the day”

Healthcare provider survey: “Reduced GI side effects related to oral ART”. Survey of people living with HIV: “Possible less stomach/gastric problems because of the medication”

Both surveys: “Route of drug intake (i.e. intramuscular injections)”

Healthcare provider survey: “Being able to propose an alternative if confidentiality concerns are reported with oral HIV treatment”. Survey of people living with HIV: “More discreet, less opportunity for someone to see me taking my medication”.

Healthcare provider survey: “Being able to propose an alternative if patients report an emotional/psychological burden when taking their medication every day (e.g. daily reminder of living with HIV)”. Survey of people living with HIV: “I would feel less stress/anxious if I didn’t have to take medication every day”.

Healthcare provider survey: “Giving more options to patients to suit their lifestyle and preference”. Survey of people living with HIV: “More convenient, better fit for my lifestyle”

Both surveys: “Reduced frequency of drug intake”.

Healthcare provider survey: “Remove uncertainty about adherence to daily dosing (directly observed therapy)”. Survey of people living with HIV: “No risk of missing a dose, which minimizes the risk of treatment failure”

Healthcare provider survey: “More frequent contacts with patients”. Survey of people living with HIV: “Seeing my doctor more often”

Healthcare provider survey “Concerned about patients missing their appointment and sending reminders”. Survey of people living with HIV: “Missing the 2-week injection window”

Healthcare provider survey: “Injection site reactions”. Survey of people living with HIV: “Pain of the injections”

Both surveys: “Route of drug intake (i.e. intramuscular injections in the gluteal muscle/buttocks)”.

Healthcare provider survey: “Time and capacity to receive patients 6 times/year for injections”. Survey of people living with HIV: “Seeing my doctor more often”

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