



# Getting Comfortable With Long-Acting Injectables

HIV advocate Lamar McMullen practices what he preaches when it comes to fighting the virus.

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Lamar McMullen of Miami is positively evangelical about long-acting injectables for HIV treatment. Currently, only one such medication is approved for injection every other month; others in the pipeline are intended to last even longer. Since giving up his once-a-day pill for a long-acting injectable, McMullen has been pleased with the results.

“My labs are spectacular,” he says without hesitation.

McMullen also likes the peace of mind that came with his switch to an injectable. He especially appreciates not having to worry about missing doses.

“I do feel really good about it, and the reason I say that is because I don’t have to worry about forgetting my medication anymore,” McMullen explains. “I would have the pill on me, take it out of my pocket, put it in front of me while I’m at work or even while I’m home, and my anticipation or expectation was to actually take it, but I still forgot it.”

Many people living with HIV miss doses at some point in their journey with the virus.

Diagnosed HIV positive in August 2012 at age 24, McMullen, now 37, is deeply immersed in HIV culture and treatment. He uses his understanding of Florida’s ever-changing health care system to help connect economically and socially vulnerable people to care and social services.

McMullen volunteers as the chair of the Miami-Dade HIV/AIDS Partnership Community Coalition and the chair of the Black HIV/AIDS Coalition.

HIV is also his day job. “As the Mpowerment coordinator at the Empower U Community Health Center in Miami, I provide a space for the LGBTQIA community to have safe conversations around HIV stigma, sexually transmitted infections, HIV criminalization and sex work. Those are conversations that you would not have with just anyone,” he says.

McMullen’s many roles provide him with several perches from which to spread the gospel of progress, which includes long-acting injectables.

However, McMullen believes long-acting injectables could be better marketed. He references the days many years ago when advertising for HIV meds mostly featured athletic-looking gay white men.

“Marketing is so important,” he says. “It’s where we need to begin to reboot and do some searching. Because the face of HIV is changing.”

“We need to begin to start meeting people where they are to overcome whatever’s stopping them from accessing their greatness,” he says. “We’re still not reaching out to each one to teach one. What that means is meeting individuals where they are. Some people may have the experience to talk all of this jazz with medical terms and stuff like that. But not everyone relates,” McMullen adds, citing the type of language used when discussing treatment as one of many barriers people living with HIV face when it comes to their health care.

It’s McMullen’s job to break down HIV information in a stigma-free manner so that vulnerable people can more easily understand the tools—like long-acting injectables to treat HIV—at their disposal to put us all on the path to an AIDS-free generation.

McMullen mentions people who inject drugs as a cohort for whom long-acting injectables could be a game changer. Intravenous drug use is high-risk behavior that can spread blood-borne pathogens, including HIV. What’s more, the lives of people who use drugs intravenously are often unstable and not conducive to compliance with a daily regimen. Curbing HIV transmission among this vulnerable, heavily stigmatized population could have tremendous public health benefits.

“They are already comfortable with injecting,” McMullen explains. “They will be OK with needles.”

Fear of needles is a real concern for some people. Since the current long-acting injectable requires two shots, one in each buttock, every two months, it’s a concern that must be addressed in a culturally competent way. Arguably, for people who fear needles, a bigger efficacy window for long-acting injectables would be ideal.

For people newly diagnosed or newly on meds, McMullen suggests pairing up with someone who has already walked that walk.

“We hold each other accountable that way,” he explains. “That’s what I teach my clients today at the agency: to hold ourselves accountable. And that leads to better health care outcomes”

McMullen is keenly aware that not all people living with HIV embrace novel therapies as enthusiastically as he does. Fear of change and distrust of doctors and the health care system can deter people from switching to injectables. What’s more, many people on pills who have good labs believe if what they’re doing ain’t broke, there’s no need to fix it.

McMullen believes that long-acting injectables are the future of HIV care. Lean into the change, he advises, even it’s slightly uncomfortable at first.

“Sometimes in life, we have to get uncomfortable to become comfortable all over again,”

McMullen says. “And that might include embracing new technologies that might seem a little intimidating.”

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