Enhancing the Cost-Effectiveness of HIV Prevention in Kenya

East African Community
HIV Prevention Expert Think Tank Meeting
24-26 February 2009, Nairobi

Elliot Marseille and James G. Kahn University of California, San Francisco

Purpose: To address two questions

What does the best available data suggest about the cost-effectiveness of HIV prevention in Kenya?

- High risk groups
- General population

What does the answer suggest about HIV programming if . . . the goal is to prevent the most HIV infections with the available funds?

Methods Quick and dirty

 Data sources: KAIS; MoT; published data on unit costs and effectiveness; some imputation (e.g., PwP, MSM interventions)

CE calculations via spreadsheet model

Three factors determine intervention cost-effectiveness

- 1. Unit cost (eg, \$ per person screened/treated in STI program or \$ per condom distributed)
- 2. Effectiveness (risk reduction)
- 3. Incidence (risk of transmission if no intervention)

Large variation in all 3, but particularly incidence.

- Males in NE province: 0.001
 - SWs in Nairobi: 0.052

Thus, ability and willingness to target high-risk groups is major determinant of CE outcomes

Intervention Effectiveness and Unit Costs Used in CE calculations

		Cost						
Intervention	Effectiveness	(per 100 client/yr)						
General Population								
Abstinence	10.0%	\$1,000						
CT	17.3%	\$1,000						
CSM	45.0%	\$650						
Schools	10.0%	\$1,000						
STI screen / treat	0.0%	\$2,000						
Vol. Adult MC	60.0%	\$5,000						
High	er-Risk Populatior	1						
sw	60.0%	\$2,500						
Truck drivers	50.0%	\$2,000						
Other clients	40.0%	\$2,000						
IDU RR	25.0%	\$5,000						
PwP	33.0%	\$3,061						
MSM	40.0%	\$2,500						
MSM - Female partners	40.0%	\$3,000						
Prison (male)	40.0%	\$2,000						
Partners of prisoners	40.0%	\$2,500						
Fishing community	50.0%	\$2,500						

Sources: published & unpublished data; review articles; meta-analyses; interpolations and evidence-based 'guesstimates'.

Cost-effectiveness in *high-risk* populations

			Intervention characteristics			ristics		
			Risk reduction				Cost-Effectiveness Cost per HIV infection	
Province	Population Group	incidence - per year (to or from)	Decrease in risk		Infections averted per 100 clients	Cost per 100 clients (per year)	averted (Unadjusted for savings)	Interventions
	IDUs	0.285	25%	1	7.1	\$5,000	\$703	Needle exchange; RR
	IDU partners	0.071	25%	1	1.8	\$5,000	\$2,824	counseling
	SWs	0.052	60%	1	3.1	\$2,500	\$794	
	Truck drivers	0.023	50%	1	1.2	\$2,000	\$1,723	
Nairobi	"Other" clients	0.013	40%	1	0.5	\$2,000	\$3,843	
	MSM	0.065	40%	1	2.6	\$2,500	\$965	CSM; CT; STlrx; PwP
	MSM - Female partners	0.023	40%	1	0.9	\$3,000	\$3,248	
	Prison (male)	0.132	40%	1	5.3	\$2,000	\$377	
	Partners of prisoners	0.005	40%	1	0.2	\$2,500	\$12,450	
	IDUs	0.211	25%	1	5.3	\$5,000	\$949	Needle exchange; RR
	IDU partners	0.075	25%	1	1.9	\$5,000	\$2,685	counseling
	SWs	0.047	60%	1	2.8	\$2,500	\$879	
	Truck drivers	0.023	50%	1	1.1	\$2,000	\$1,751	
Coast	"Other" clients	0.018	40%	1	0.7	\$2,000	\$2,704	
	MSM	0.065	40%	1	2.6	\$2,500	\$965	Outreach CSM; CT; STIrx;
	MSM - Female partners	0.023	40%	1	0.9	\$3,000	\$3,248	PwP
	Prison (male)	0.132	40%	1	5.3	\$2,000	\$377	
	Partners of prisoners	0.005	40%	1	0.2	\$2,500	\$12,450	
	SWs	0.029	60%	1	1.7	\$2,500	\$1,439	
	Truck drivers	0.075	50%	1	3.7	\$2,000	\$534	
N	"Other" clients	0.018	40%	1	0.7	\$2,000	\$2,719	Outreach CSM; CT; STIrx;
Nyanza	MSM	0.089	40%	1	3.6	\$2,500	\$702	PwP
	MSM - Female partners	0.025	40%	1	1.0	\$3,000	\$3,022	
1	Prison (male)	0.132	40%	1	5.3	\$2,000	\$377	
	'Guess	timate' of I	ntervent	tion cos	st and CE f	or Fishing	communities	
Nyanza; Rift; Coast	Fishing communities	0.025	50%	1	1.3	\$2,500	\$2,000	Outreach CSM; CT; STlrx; PwP; MC
								ı

Note: Incidence estimates from Modes of Transmission Report - Appendix 3; only these three Provinces available.

Very CE	\$2,000
CE Threshold	\$4,000
Moderately unfavorable CE	\$4,000 - \$12,000
Very unfavorable CE	\$12,000

Dark Green Light green Orange

Package of interventions for general population

Intervention	Coverage
Abstinence	0.2
СТ	0.6
CSM	0.3
Mass media	0.2
School-based (comp.)	0.2
STIRx	0.2
VAMC	0.2
PwP	0.2

Cost and cost-effectiveness in general populations - 1

				Intervention characteristics			Cost per HIV	
			HIV	Risk red	duction			infect, averted
Province	Population Group	Prevalence	incidence per year (to or from)	Decrease in risk	Duration (yrs)	Infections averted per 100 clients	Cost per 100 clients (per year)	(Unadjusted for savings)
	Male 20-29	0.022	0.005	39.4%	1	0.2	\$2,180	\$12,264
	Male 30-54	0.139	0.015	39.4%	1	0.6	\$2,252	\$3,833
Nairobi Urban	Male 55 - 64	0.018	0.002	39.4%	1	0.1	\$2,178	\$30,359
Nairobi Orban	Female 15-19	0.020	0.010	31.2%	1	0.3	\$2,113	\$6,679
	Female 20-44	0.135	0.014	31.2%	1	0.4	\$2,183	\$4,856
	Female 45-54	0.164	0.018	31.2%	1	0.6	\$2,201	\$3,979
	Male 15-34	0.052	0.008	39.4%	1	0.3	\$2,199	\$7,316
	Male 35-49	0.069	0.007	39.4%	1	0.3	\$2,209	\$7,812
Central -	Male 50-64	0.012	0.001	39.4%	1	0.0	\$2,174	\$44,476
Rural	Female 15-24	0.021	0.004	31.2%	1	0.1	\$2,113	\$16,322
	Female 25-34	0.095	0.010	31.2%	1	0.3	\$2,158	\$6,959
	Female 35-64	0.030	0.003	31.2%	1	0.1	\$2,119	\$22,193
	Male 15-24	0.018	0.004	39.4%	1	0.1	\$2,178	\$14,904
	Male 25-49	0.071	0.007	39.4%	1	0.3	\$2,210	\$7,672
Coast - Rural	Male 50-64	0.037	0.004	39.4%	1	0.1	\$2,190	\$14,614
	Female 15-29	0.039	0.004	31.2%	1	0.1	\$2,124	\$17,260
	Female 30-59	0.075	0.008	31.2%	1	0.2	\$2,146	\$8,845
	Male 15-29	0.059	0.009	39.4%	1	0.3	\$2,203	\$6,431
Coast -	Male 30-64	0.096	0.010	39.4%	1	0.4	\$2,226	\$5,598
Urban	Female 15-29	0.102	0.015	31.2%	1	0.5	\$2,162	\$4,572
Olbali	Female 30-49	0.182	0.020	31.2%	1	0.6	\$2,212	\$3,561
	Female 50-64	0.185	0.020	31.2%	1	0.6	\$2,214	\$3,505

Source: KAIS, 2008.

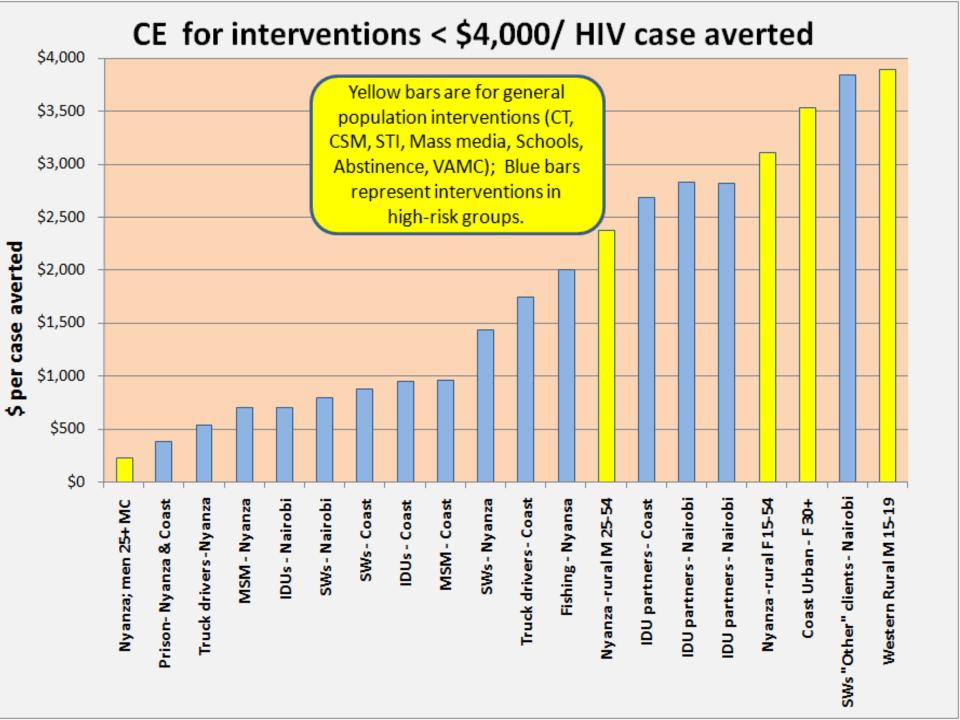
Note: Green = CE; Tables confined to Province – sex – age strata for which KAIS data available.

Cost and cost-effectiveness in general populations - 2

				Intervention characteristics				
			HIV	Risk red	luction			 Cost per HIV infect, averted
Province	Population Group	Prevalence	incidence per year (to or from)	Decrease in risk	Duration (yrs)	Infections averted per 100 clients	Cost per 100 clients (per year)	(Unadjusted for savings)
	Male 15-29	0.012	0.002	39.4%	1	0.1	\$2,174	\$33,402
Eastern -	Male 30-64	0.036	0.004	39.4%	1	0.1	\$2,189	\$15,197
Rural	Female 15-19	0.031	0.016	31.2%	1	0.5	\$2,119	\$4,354
Kulai	Female 20-54	0.061	0.006	31.2%	1	0.2	\$2,137	\$10,934
	Female 55-64	0.039	0.004	31.2%	1	0.1	\$2,124	\$16,973
	Male 15-24	0.018	0.004	39.4%	1	0.1	\$2,178	\$14,945
	Male 25-54	0.221	0.025	39.4%	1	1.0	\$2,302	\$2,369
Nyanza -	Male 55-64	0.102	0.011	39.4%	1	0.4	\$2,229	\$5,277
Rural	Female 15-19	0.079	0.041	31.2%	1	1.3	\$2,149	\$1,702
	Female 20-54	0.208	0.023	31.2%	1	0.7	\$2,227	\$3,104
	Female 55-64	0.072	0.007	31.2%	1	0.2	\$2,144	\$9,290
	Male 15-24	0.018	0.004	39.4%	1	0.1	\$2,178	\$14,945
	Male 25-49	0.085	0.009	39.4%	1	0.3	\$2,219	\$6,345
Rift Valley -	Male 50-64	0.029	0.003	39.4%	1	0.1	\$2,185	\$18,687
Rural	Female 15-24	0.036	0.007	31.2%	1	0.2	\$2,122	\$9,258
	Female 25-49	0.114	0.012	31.2%	1	0.4	\$2,170	\$5,772
	Female 50-60	0.062	0.006	31.2%	1	0.2	\$2,138	\$10,750
	Male 15-19	0.028	0.014	39.4%	1	0.6	\$2,184	\$3,888
Western -	Male 20-64	0.042	0.004	39.4%	1	0.2	\$2,192	\$13,036
Rural	Female 15-19	0.016	0.008	31.2%	1	0.3	\$2,110	\$8,225
Kulai	Female 20-49	0.078	0.008	31.2%	1	0.3	\$2,148	\$8,557
	Female 50-59	0.016	0.002	31.2%	1	0.0	\$2,110	\$42,823

Source: KAIS, 2008.

Note: Green = CE; Tables confined to Province – sex – age strata for which KAIS data available.



Summary Results and Recommendations

CE Rank	Cost/case averted	Intervention	Population	Epi setting
		VAMC	Males	Nyanza, Nairobi
		NE; RR counseling	IDUs	Nyanza; Coast
Most favorable CE	~\$2,500		Prison	Nairobi; Coast
		CSM; CT; STIrx; PwP	SW and partners	Nyanza, Nairobi
			MSM	Nyanza; Coast
	~ \$6,000		Females	Nairobi - Urban
			Males	Central - Rural
Moderate CE		Standard package	Males & Females	Coast-Urban
		, ,	Females	Nyanza - Rural
			Females	Rift - Rural
			Males & Females	Western - Rural
Least favorable CE	~\$14,000 +	Standard package esp. if emphasizes schools- based programs; IEC; female condoms; STI-Rx	General pop. Esp. Youth and those ~45+	Central Eastern North Eastern

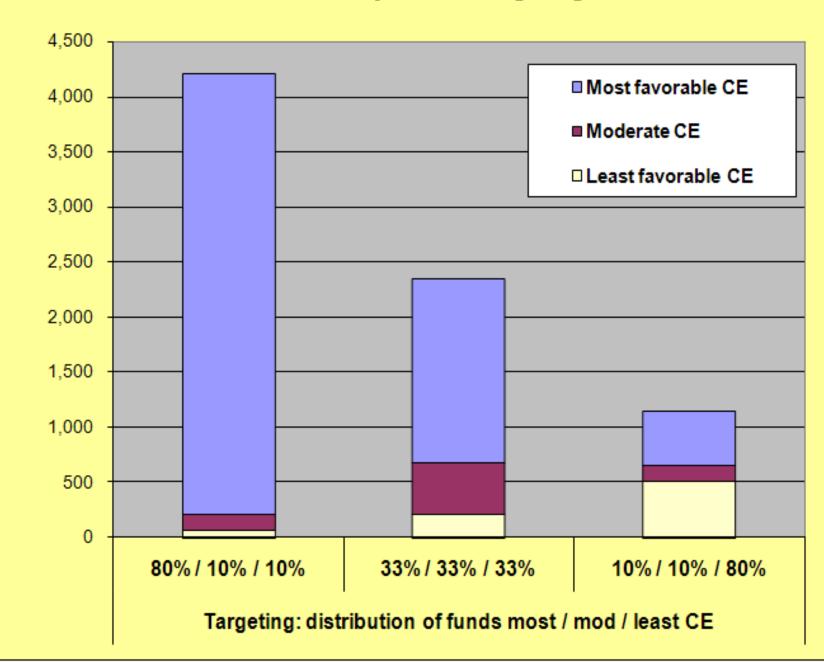
Population and epi settings are confined to KAIS and MoT data. Thus, results and recommendations are partial and indicative, not exhaustive.

Other Likely Cost-Effective Interventions - Settings

- Interventions for high-risk groups in other geographic settings including PwP, SW and MSM outreach, IDU-RR.
- Standard package for general population in other high-prevalence settings, especially
- emphasizing CT, pMTCT, PwP, condoms;
- less emphasis on schools, female condoms, STI Rx, mass media.

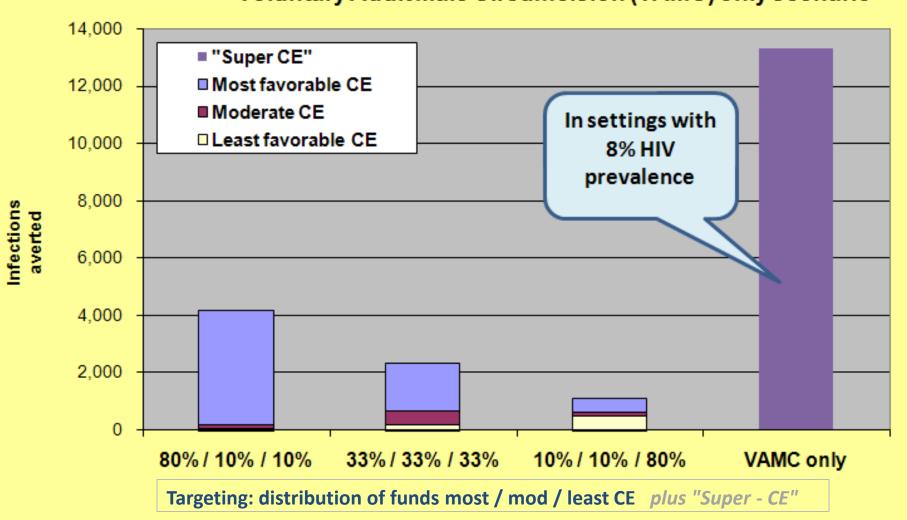
Projecting the Consequences of Different Intervention Mixes

HIV infections averted by level of targeting for \$10,000,000



Infections averted

HIV infections averted by level of targeting for \$10,000,000 with Voluntary Adult Male Circumcision (VAMC) only scenario



Quantifying the cost of low cost-effectiveness

Consequences of alternative allocations of \$10 million spent on prevention

Infections not averted									
If \$10M spent on	Instead of one of these:								
one of these:	"Super CE"	Most favorable CE	Moderate CE						
"Super CE"									
Most favorable CE	8,333								
Moderate CE	11,905	3,571							
Least favorable CE	12,619	4,286	714						
	Extra cost of ART needed								
15.04.04.0		Instead of one of thes	se:						
If \$10M spent on one of these:	"Super CE"	Most favorable CE	Moderate CE						
"Super CE"	,								
Most favorable CE	\$53,333,333								
Moderate CE	\$76,190,476	\$22,857,143							
Least favorable CE	\$80,761,905	\$27,428,571	\$4,571,429						

Note: Assumes universal access to ART and lifetime discounted cost of ART in Uganda \$6,400; (Marseille, et al, forthcoming)

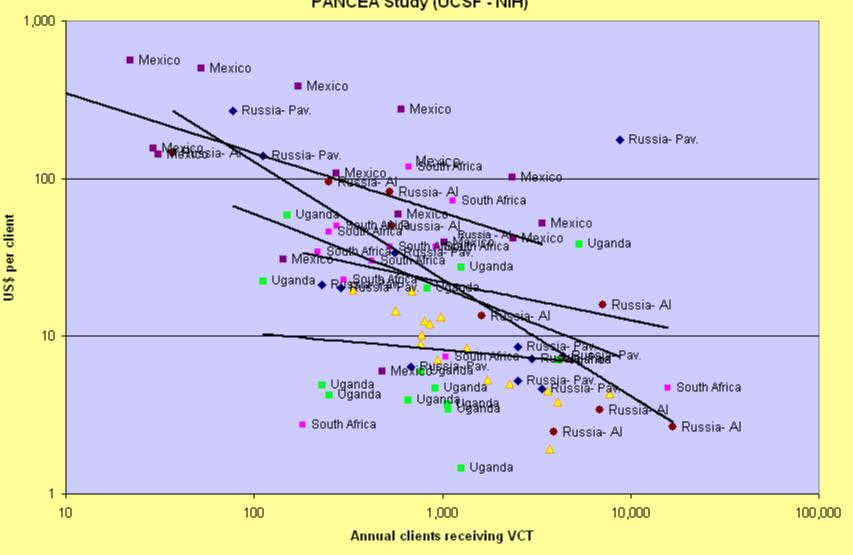
The effects of scale on cost

Static CE estimates derived from observing projects at one moment

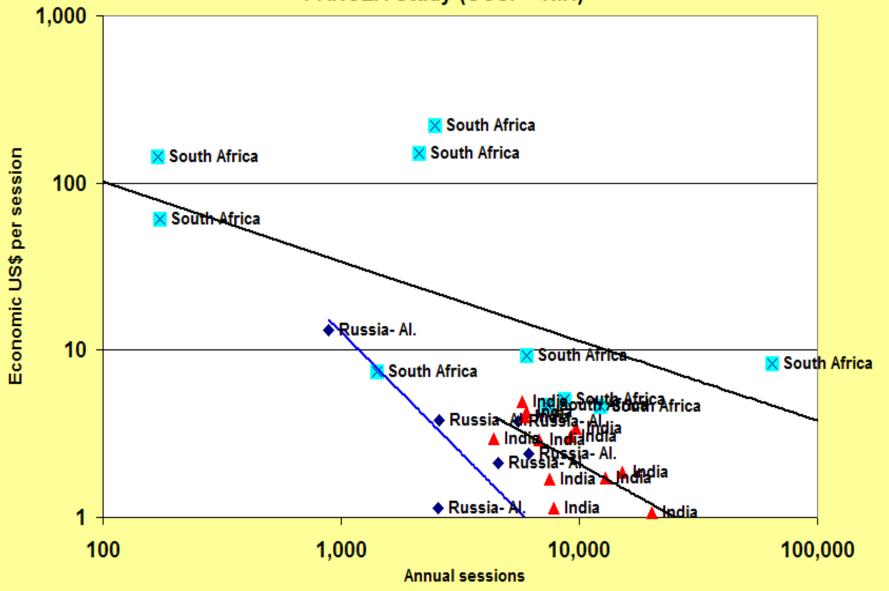
But...

As HIV prevention programs go to scale their cost-effectiveness profiles are likely to change and probably for the better.

Scale and efficiency of VCT programs in 5 countries PANCEA Study (UCSF - NIH)



Scale and efficiency of SW programs in 3 countries PANCEA Study (UCSF - NIH)



Scale effects and efficiency:

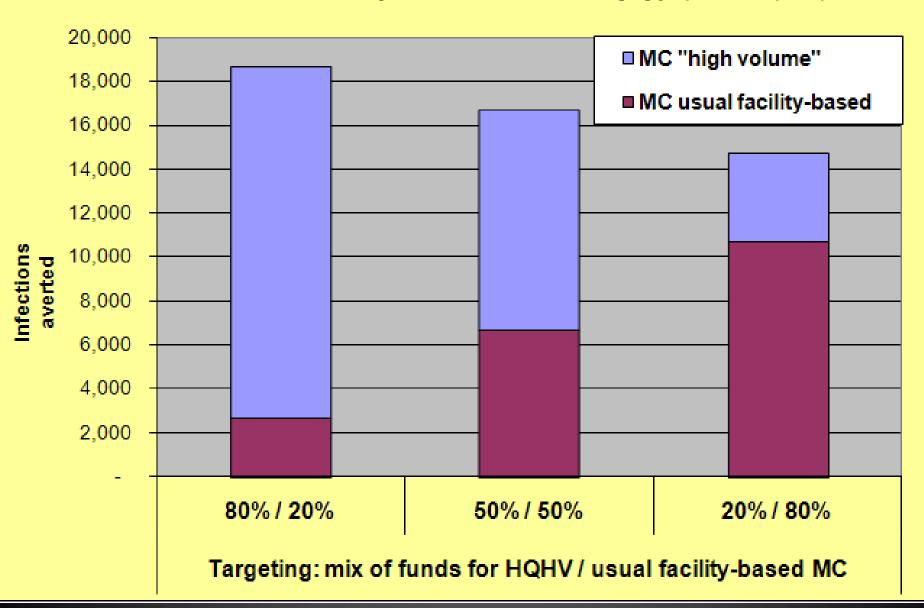
Example #1: VAMC

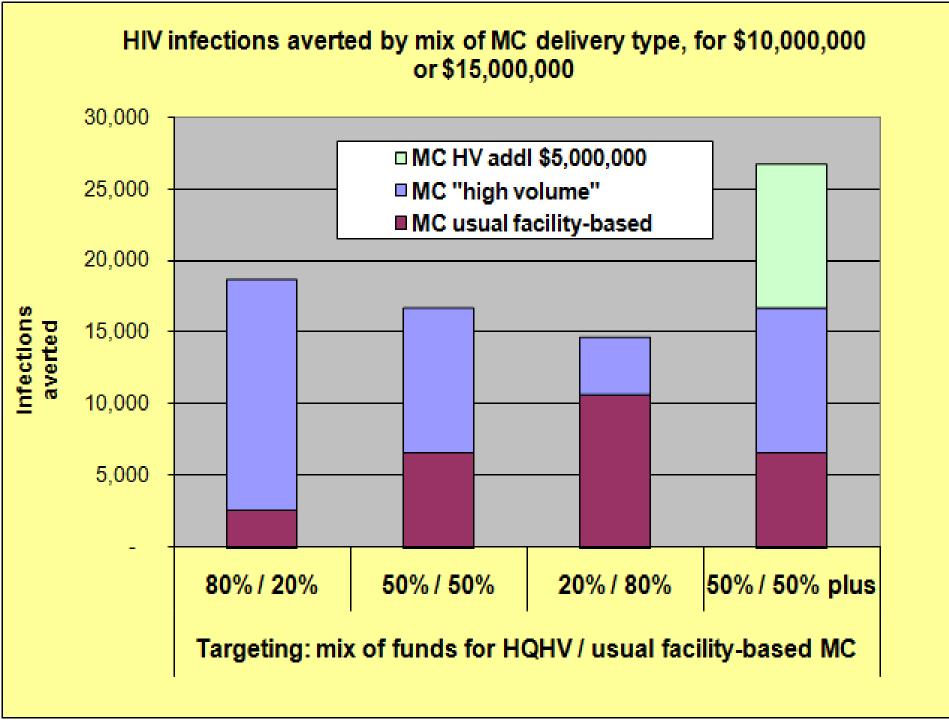






HIV infections averted by mix of VAMC delivery type, for \$10,000,000

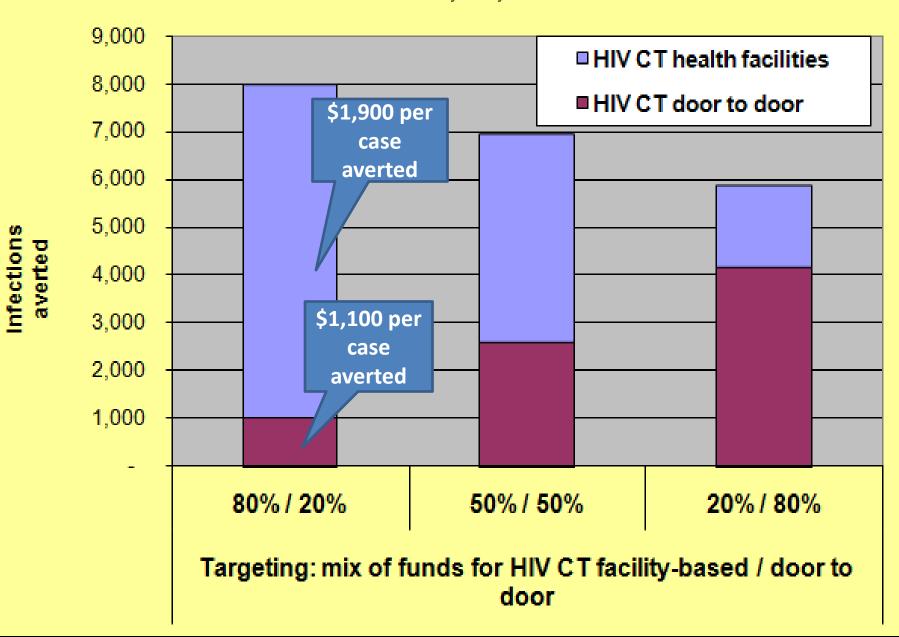




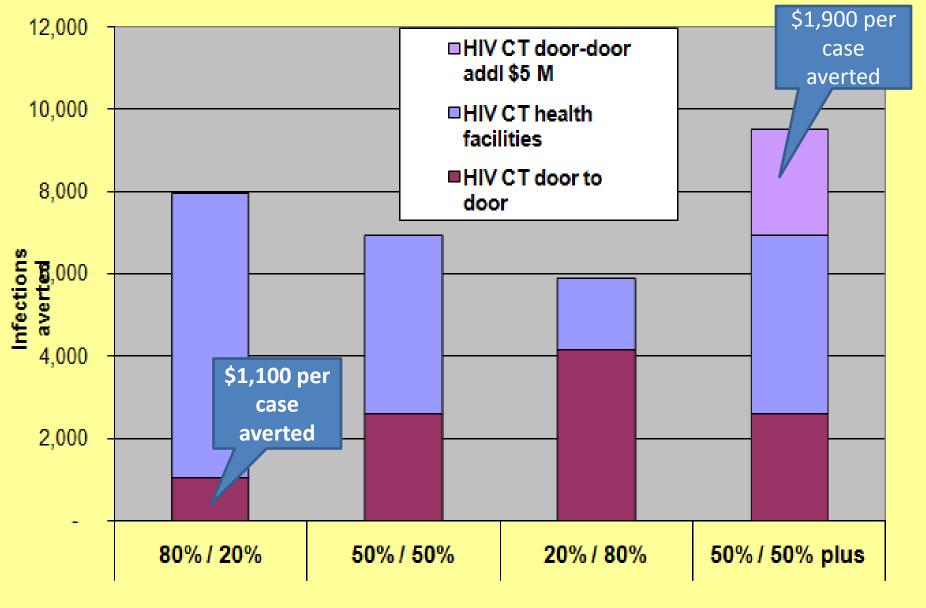
Scale effects and efficiency:

Example #2: CT

HIV infections averted by mix of HIV CT delivery type, for \$10,000,000



HIV infections averted by mix of HIV CT delivery type, for \$10,000,000 or \$15,000,000



Final Remarks

Targeting matters!

Cost-effectiveness analysis can help quantify the epidemic control implications of new epidemiologic data.

The examples presented here illustrate potential gains in HIV infections averted due to improved cost-effectiveness.

This CE tool can be readily adapted to other data and different interventions.