



Southern African HIV Clinicians Society 3rd Biennial Conference

13 - 16 April 2016
Sandton Convention Centre
Johannesburg

**Our Issues, Our Drugs,
Our Patients**

www.sahivsoc.org
www.sahivsoc2016.co.za



Comparing SA and WHO guidelines

Michelle Moorhouse

14 Apr 2016



2016

3 Domains of WHO ART guidelines

WHAT TO DO?

- When to start
- What to use for children, adolescents, PW
- How to monitor
- Co-infections
- HIV and MH and NCDs
- PrEP, PEP

Clinical

Operational
and Service
Delivery

Programmatic
Prioritisation

HOW TO DECIDE?

- Approaches to prioritisation & sequencing
- Tool kits for country adaptation and implementation

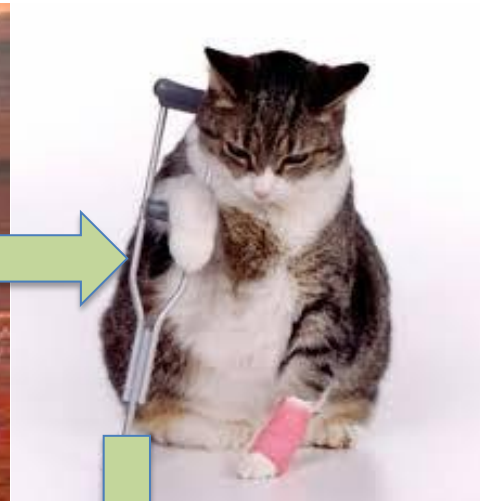
HOW TO DO IT WELL?

- Care Packages (Differentiated /Adaptive Care)
- Linkages, Retention, Adherence
- Quality of care
- Diagnostics
- Supply chain



2016

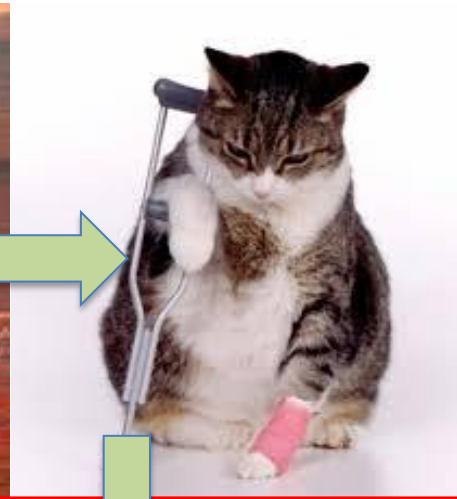
Similarities: process



HOW TO PICK UP CHICKS



Process for GL development



GUIDELINES



NATIONAL CONSOLIDATED GUIDELINES

FOR THE PREVENTION OF MOTHER-TO-CHILD TRANSMISSION OF HIV (PMTCT) AND THE MANAGEMENT OF HIV IN CHILDREN, ADOLESCENTS AND ADULTS

CONSOLIDATED GUIDELINES ON THE USE OF ANTIRETROVIRAL DRUGS FOR TREATING AND PREVENTING HIV INFECTION

RECOMMENDATIONS FOR A PUBLIC HEALTH APPROACH
JUNE 2013



GUIDELINE

Adult antiretroviral therapy guidelines 2014

By the Southern African HIV Clinicians Society



GUIDELINES

Southern African guidelines for the safe use of pre-exposure prophylaxis in men who have sex with men who are at risk for HIV infection



Similarities: topics

**GUIDELINE ON WHEN
TO START ANTIRETROVIRAL
THERAPY AND
ON PRE-EXPOSURE
PROPHYLAXIS FOR HIV**

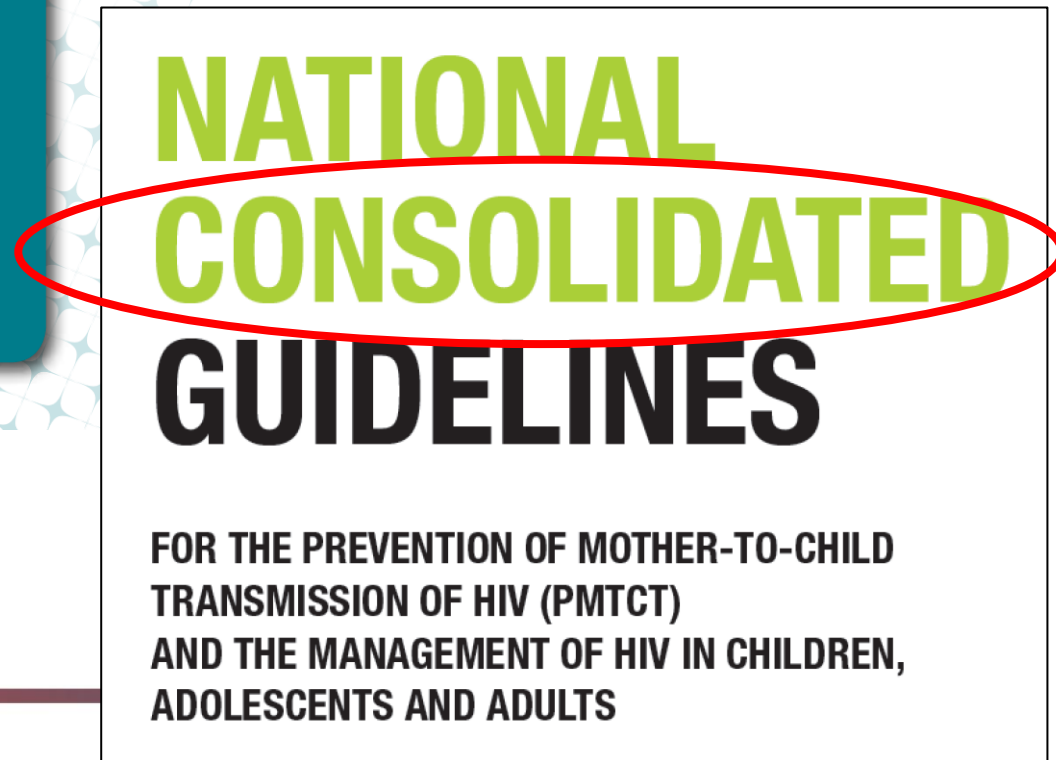
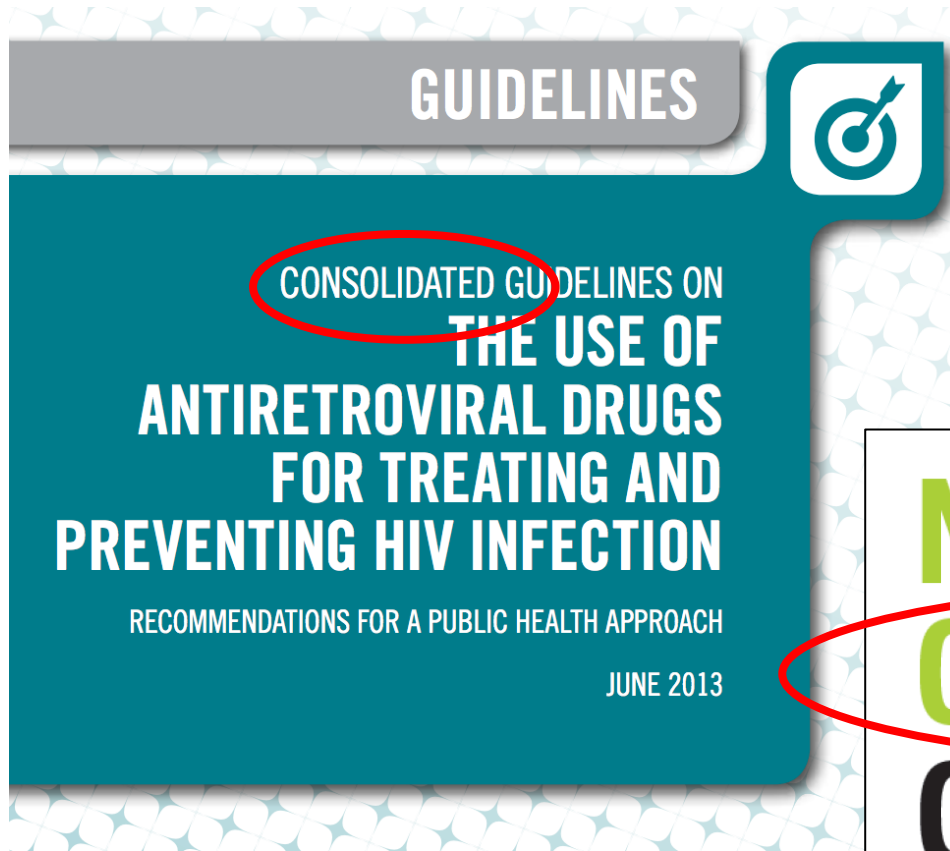
SEPTEMBER

*Southern African guidelines on the safe use
of pre-exposure prophylaxis in persons at risk
of acquiring HIV-1 infection*

*Guideline on the management of occupational and
non-occupational exposure to the human
immunodeficiency virus and recommendations for
post-exposure prophylaxis: 2015 Update*

**Southern African HIV Clinicians Society adult
antiretroviral therapy guidelines: Update on when to
initiate antiretroviral therapy**

Similarities: approach



Similarities: evolution

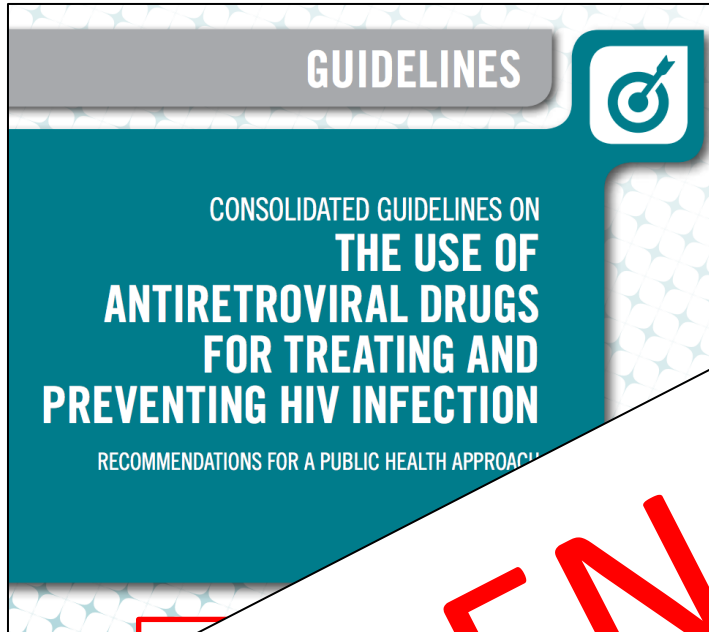
Topic	2002	2003	2006	2010	2013	2015*
When to start	CD4 ≤ 200	CD4 ≤ 200	CD4 ≤ 200 - Consider 350 - CD4 ≤ 350 for TB	CD4 ≤ 350 - Regardless CD4 for TB and HBV	CD4 ≤ 500 - Regardless CD4 for TB, HBV PW and SDC - CD4 ≤ 350 as priority	Towards treatment initiation at any CD4 cell count
Earlier initiation						
1st Line ART	8 options - AZT preferred	4 options - AZT preferred	8 options - AZT or TDF preferred - d4T dose reduction	6 options & FDCs - AZT or TDF preferred - d4T phase out	1 preferred option & FDCs - TDF and EFV preferred across all pops	Continue with FDC approach and phased introduction of new options (DTG, EFV₄₀₀)
Simpler treatment						
2nd Line ART	Boosted and non-boosted PIs	Boosted PIs - IDV/r LPV/r, SQV/r	Boosted PI - ATV/r, DRV/r, FPV/r LPV/r, SQV/r	Boosted PI - Heat stable FDC: ATV/r, LPV/r	Boosted PIs - Heat stable FDC: ATV/r, LPV/r	Add more heat stable PI options (DRV/r) and new strategies (NRTI sparing regimens)
Less toxic, more robust regimens						
3rd Line ART	None	None	None	DRV/r, RAL, ETV	DRV/r, RAL, ETV	Encourage HIV DR to guide
Viral Load Testing	No	No (Desirable)	Yes (Tertiary centers)	Yes (Phase in approach)	Yes (preferred for monitoring, use of PoC, DBS)	Support for scale up of VL using all technologies
Better and simpler monitoring						

Similarities: impact of evolution

Key parameters	2005	2015	2020	2030
New HIV infections	3 million	2 million [↓ 35%]	500,000	200,000
AIDS-associated deaths	2.4 million	1.2 million [↓ 50%]	500,000	400,000
PLHIV accessing ART	1.5 million	15 million [↑ 10x]	30 million	ALL
Investments for global HIV response (US\$)	7 billion	20 billion [↑ 3x]	32 billion	29 billion



Similarities: approach



EVIDENCE-BASED

**Consolidated antiretroviral therapy
guidelines 2014**

By the Southern African HIV Clinicians Society



2016

Differences: mainly contextual





2016

Treatment guidelines: when to start

WHO Guidelines

CD4	96	97	98	99	00	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	
>500	Grey	Grey	Grey	Grey	Grey	Grey	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Green
350-500	Grey	Grey	Grey	Grey	Grey	Grey	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Green	Green	Green	Green
200-350	Grey	Grey	Grey	Grey	Grey	Grey	Red	Red	Red	Red	Yellow	Yellow	Yellow	Green	Green	Green	Green	Green	Green	Green	Green
<200	Grey	Grey	Grey	Grey	Grey	Grey	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green

SA HIV CS Guidelines




CD4	96	97	98	99	00	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	
>500	Grey	Grey	Grey	Grey	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Green
350-500	Grey	Grey	Grey	Grey	Yellow	Yellow	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Green
200-350	Grey	Grey	Grey	Grey	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Green	Green	Green	Green	Green	Green	Green	Green	Green
<200	Grey	Grey	Grey	Grey	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green

SA NDoH Guidelines

CD4	96	97	98	99	00	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	
>500	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Red	Red	Red	Red	Red	Red	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
350-500	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Red	Red	Red	Red	Red	Red	Red	Yellow	Yellow	Yellow	Yellow	Green	Green
200-350	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Red	Red	Red	Red	Red	Red	Red	Yellow	Yellow	Yellow	Green	Green	Green
<200	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green

Comparing preferred and alternative first-line regimens

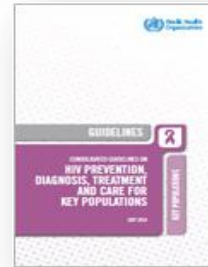
GUIDELINES	NRTI BACKBONE			NNRTI			INSTI			PI		
	TDF/XTC	ABC/3TC	AZT/3TC	EFV	NVP	RPV	DTG	EVG	RAL	ATV	DRV	LPV
IAS (2014)	preferred	preferred	not recommended/ special situations	preferred	alternative	preferred	preferred	preferred	preferred	preferred	preferred	alternative
DHHS (2015)	preferred	preferred	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	alternative	preferred	preferred	preferred	not recommended/ special situations	preferred	not recommended/ special situations
EACS (2015)	preferred	preferred	not recommended/ special situations	alternative	not recommended/ special situations	preferred	preferred	preferred	preferred	alternative	preferred	alternative
WHO (2015)	preferred	not recommended/ special situations	alternative	preferred	alternative	not recommended/ special situations	alternative	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations
SA NDoH	preferred	alternative	not recommended/ special situations	preferred	alternative	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations
SAHIVCS	preferred	alternative	not recommended/ special situations	preferred	alternative	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations	not recommended/ special situations

-  preferred
-  alternative
-  not recommended/ special situations

Evolution of PrEP guidance



2012:
MSM and
Serodiscordant
Couples in the
context of
demonstration
projects



2014:
**Consolidated Key
Populations
Guidelines -
*Recommendation
for MSM***



2015:
Oral PrEP - an
additional prevention
choice for **people at
substantial risk** of HIV
infection as part of
**combination
prevention**



GUIDELINES

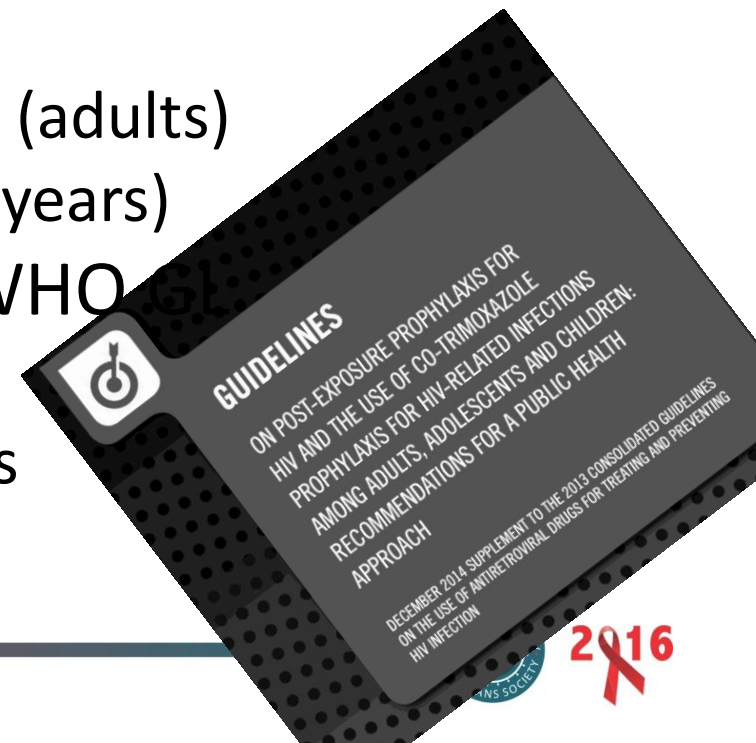
Southern African guidelines for the safe use of pre-exposure prophylaxis in men who have sex with men who are at risk for HIV infection



Southern African guidelines on the safe use of pre-exposure prophylaxis in persons at risk of acquiring HIV-1 infection

PEP guidelines

- DOH
 - Original GL 1993: AZT tds + IDV
 - Later AZT/3TC
 - Now in EDL: TDF/FTC + ATV/r OR LPV/r
- WHO end 2014
 - TDF + 3TC/FTC + LPV/r OR ATV/r (adults)
 - AZT + 3TC + LPV/r (children ≤ 10 years)
- Alignment with principles of WHO GL
 - Promote simplification
 - Harmonisation across guidelines
 - Specific adherence support



What about the latest WHO GLs?

Recommendation 1: When to start ART among people living with HIV			
Target population	Specific recommendation	Strength of the recommendation	Quality of the evidence
Adults ^a (>19 years)	ART should be initiated in all adults living with HIV at any CD4 cell count	<i>Strong</i>	<i>Moderate</i> NEW
	As a priority, ART should be initiated in all adults with severe or advanced HIV clinical disease (WHO clinical stage 3 or 4) and individuals with CD4 count ≤ 350 cells/mm ³	<i>Strong</i>	<i>Moderate</i>
Recommendation 2: Oral pre-exposure prophylaxis to prevent HIV acquisition			
Target population	Specific recommendation	Strength of the recommendation	Quality of the evidence
HIV-negative individuals at substantial risk of HIV infection ^b	Oral PrEP (containing TDF) should be offered as an additional prevention choice for people at substantial risk of HIV infection as part of combination prevention approaches	<i>Strong</i>	<i>High</i> NEW

Acknowledgements

- Francois Venter
- Marco Vitoria



2016



Southern African HIV Clinicians Society

3rd Biennial Conference

13 - 16 April 2016
Sandton Convention Centre
Johannesburg

**Our Issues, Our Drugs,
Our Patients**

www.sahivsoc.org
www.sahivsoc2016.co.za