



MINISTRY OF HEALTH NATIONAL AIDS AND STI CONTROL PROGRAM

J F K MEDICAL COMPOUND

20TH STREET

MONROVIA, LIBERIA

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Interim Guidance for COVID- 19 for all Persons with HIV

Current reports identify that individuals aged >60 years and those with diabetes, hypertension, cardiovascular disease, or pulmonary disease are at highest risk of life-threatening COVID-19. There is limited data to indicate any difference in the disease course between persons living with HIV and persons living without HIV.

The National Program would like to emphasize the need for a heightened universal precaution for much needed infection control within the health facility. Also, in view of the possible unanticipated risks of disruption of services at the ART clinics, and in recognition of the need for continued adherence to ART medications, the following guidance is hereby provided for all PLHIVs and the clinicians providing care in ART clinics in Liberia .

PREVENT AND STAY SAFE!!

- Wash your hands often—and thoroughly—with soap and water for at least 20 seconds. Do it when you enter your home, after using the toilet and after touching any object or surface used by many people. This is the most effective way to protect yourself.
You can also use hand sanitizer, if it contains at least 70% alcohol.
Do not touch your face unless you have just washed your hands thoroughly!
- Wipe surfaces that are touched often (doorknobs, faucets, toilets, phones) with disinfectant at least once a day.

Prompt Self Isolation is more easily implemented than testing!!

- If you are sick, isolate yourself from other people!
- People who are not sick are encouraged to avoid going out whenever possible and stay more than 6 ft (2m) away from other people.
- Do not hug, kiss or shake hands with other people - This is 'social distancing.'
- Cover your cough or sneeze with a flexed elbow or a tissue, then throw the tissue in the bin.
Wash your hands more often!

LOOK OUT FOR SYMPTOMS

Some people who have COVID-19 do not feel ill at all but they can still spread it.

People are most likely to spread COVID-19 when they are feeling ill.

Most people with COVID-19 begin to feel ill 1 to 14 days after becoming infected.

Many people begin to feel sick 5-6 days after becoming infected. • Symptoms include any or all of these:

Cough (usually dry),

Shortness of breath

Sore throat

fever ($\geq 38^{\circ}\text{C}$)

Diarrhea

Headache

Loss of sense of smell and taste (in some people)

Use a mask only if YOU are sick, (coughing, sneezing etc.) to protect others. Change your mask regularly. Wash your hands after touching your mask.

People Living with HIV and COVID-19

Currently, there is no evidence that people living with HIV who are taking antiretroviral therapy are at higher risk for COVID-19

Every effort should be made to help persons with HIV maintain an adequate supply of ART and all other concomitant medications through multi month dispensing models (Community ART refills, teen clubs, 6MMD).

Persons living with HIV should maintain on-hand at least a 30-day supply and ideally a 90-day supply of antiretroviral (ARV) drugs and other medications.

HIV service providers are encouraged to provide a supply of 3 months or more to all clients presenting at facilities for refill.

For PLHIV due for refills in the coming weeks, clinicians are encouraged to expedite additional drug refills as needed.

Viral load services are to be continued with contact numbers for all recipients of care noted to enable feedback of results via telephone and return for intensified adherence support if required.

In the event that a person living with HIV develops COVID-19, the following are recommended:

A) When Hospitalization is Not Necessary, the Person with HIV Should:

Be managed at home with strict self-isolation and disinfection practices put in place.

Close communication with their health care provider and report if symptoms progress (e.g., sustained fever for >2 days, new shortness of breath).

Continue their ARV therapy and other medications, as prescribed.

B) When a Person with HIV is hospitalized:

ART should be continued. All efforts should be made to ensure supply of the client's current regimen

ARV drug substitutions **should be avoided**.

For critically ill patients who require tube feeding, some ARV medications are available in liquid formulations and some, but not all, pills may be crushed. Clinicians should consult the National Program to assess the best way for a patient with a feeding tube to continue an effective ARV regimen.

To enhance care engagement and continuity of ARV therapy, clinicians should make every attempt to assess their patients' need for additional social assistance and connect them with resources, including navigator services when possible.

During this crisis, social distancing and isolation may exacerbate mental health and substance use issues for some persons with HIV. Clinicians should assess and address these patient concerns and arrange for additional consultations, preferably virtual, as needed.

References

<https://www.who.int/news-room/q-a-detail/q-a-coronaviruses>

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World Health Organization (WHO) Q&A on COVID-19, HIV and Antiretrovirals

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