

## **CQUIN Differentiated MCH Workshop**

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### Integration of Point of Care (POC) Viral Load (VL) at Primary Health Center to Support DSD

Dr. Cheick Tidiane Tall

Sr. HIV&AIDS Specialist & MNCAH Integration

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HIV Learning Network The CQUIN Project for Differentiated Service Delivery

## The Issue

## Laboratory-based conventional VL

## Supply

Although access to VL testing has increased in many countries to allow for better monitoring of all patients on ART, laboratory-based conventional VL systems often face long result turnaround times and low result return rates, making it difficult to take timely clinical action when elevated VL is detected

Existing tests for early infant diagnosis (EID) and VL POC have a limited shelf-life and temperature tolerance range, which puts greater demands and pressure on inventories and stock management VL policies are not designed for Pregnant and Breastfeeding Women (PBW)

In many countries, the current algorithm for VL monitoring for all people living with HIV (PLHIV) on ART is to test at 6 months and 12 months post ART initiation, then annually thereafter, consistent with WHO recommendations.

For PBW, this timeline may be inadequate as it may not align with the window of transmission risk during pregnancy and breastfeeding.

## POC Diagnostic Technologies for EID and VL Testing: An Opportunity



UP UNTIL RECENTLY, Early Infant Diagnosis (EID) and Viral Load Monitoring (VL) tests needed to be performed in conventional laboratory systems that required significant infrastructure and training



**NOW BOTH EID AND VL** testing can be performed outside laboratory settings using innovative POC molecular technologies that have reduced the requirements for infrastructure and training



ALLOW FOR TESTS TO BE PERFORMED in close proximity to where patients are receiving care and can be performed by either professionals or lay health workers delivering the test results relatively quickly

# Rationale for use of POC-VL at Primary Health Care (PHC) to optimize care and treatment for (PBW)

Evidence shows that maternal viral load (VL) is closely associated with the risk of vertical transmission

Increased access to ART and VL for PBW living with HIV is a priority for promoting health during pregnancy and post-partum periods, and to minimize the risk of vertical transmission of HIV to their infants UNICEF is undertaking a comprehensive set of actions in support of HIV detection and monitoring, which includes:

- Advocacy for the deployment of HIV POC diagnostic technologies for EID and the VL testing of HIV-positive pregnant women and mothers;
- Programmatic support to help strengthen and optimize health and laboratory network systems
- Integration of disease programmes to avoid funding competition



## **CAMEROON CO EXPERIENCE**

## COUNTRY CONTEXT:

 HIV prevalence rate decreased from 5.4% in 2004 to 2.7% in 2018 (15 to 49)

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#### Mapping of platforms by category









## **CAMEROON CO EXPERIENCE**



# POC improves ART Coverage in HEI and VL testing in PBW



## **CAMEROON CO EXPERIENCE**

#### **KEY RESULTS – ROUTINE POC EID/VL IMPLEMENTATION:**

### POC EID 2018-2020

POC VL 2018-2020







- Routine collection of data on PBW
- Leadership and ownership by the MoH is essential for sustainability
- The empowerment of actors at all levels of the health pyramid is a source of motivation
- Strong communication provides added value for buy-in and increases demand and service utilization
- Implementation based on strengthening the health system is the ideal approach for ownership
- Integration of services stimulates demand and equity

# Thank you!

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# for every child