

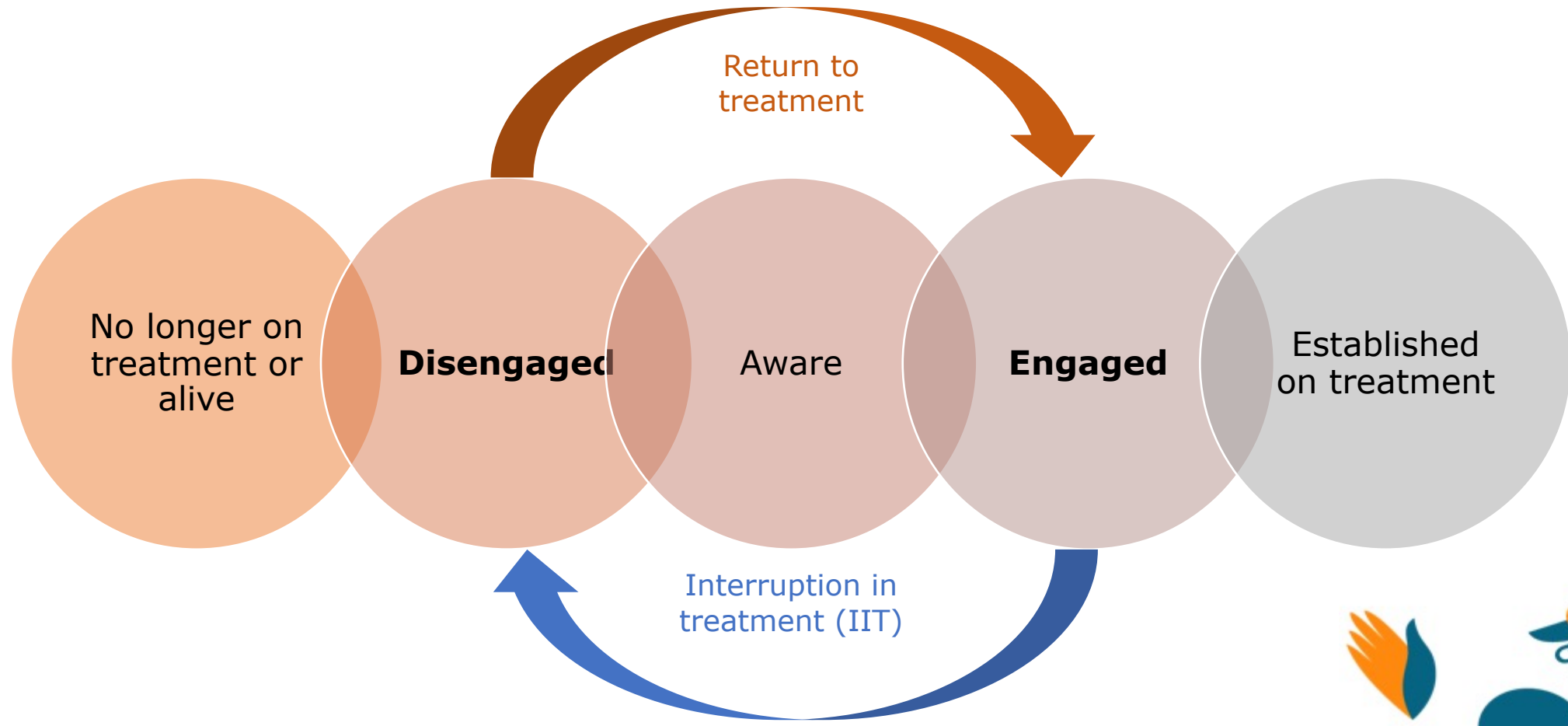
- Katy Godfrey, OGAC, United States
- [DSD for HIV treatment in 2022](#)

Changing epidemic: From initiation to re- engagement



I have no relevant financial relationships with ineligible companies to disclose

Engagement and reengagement in ART

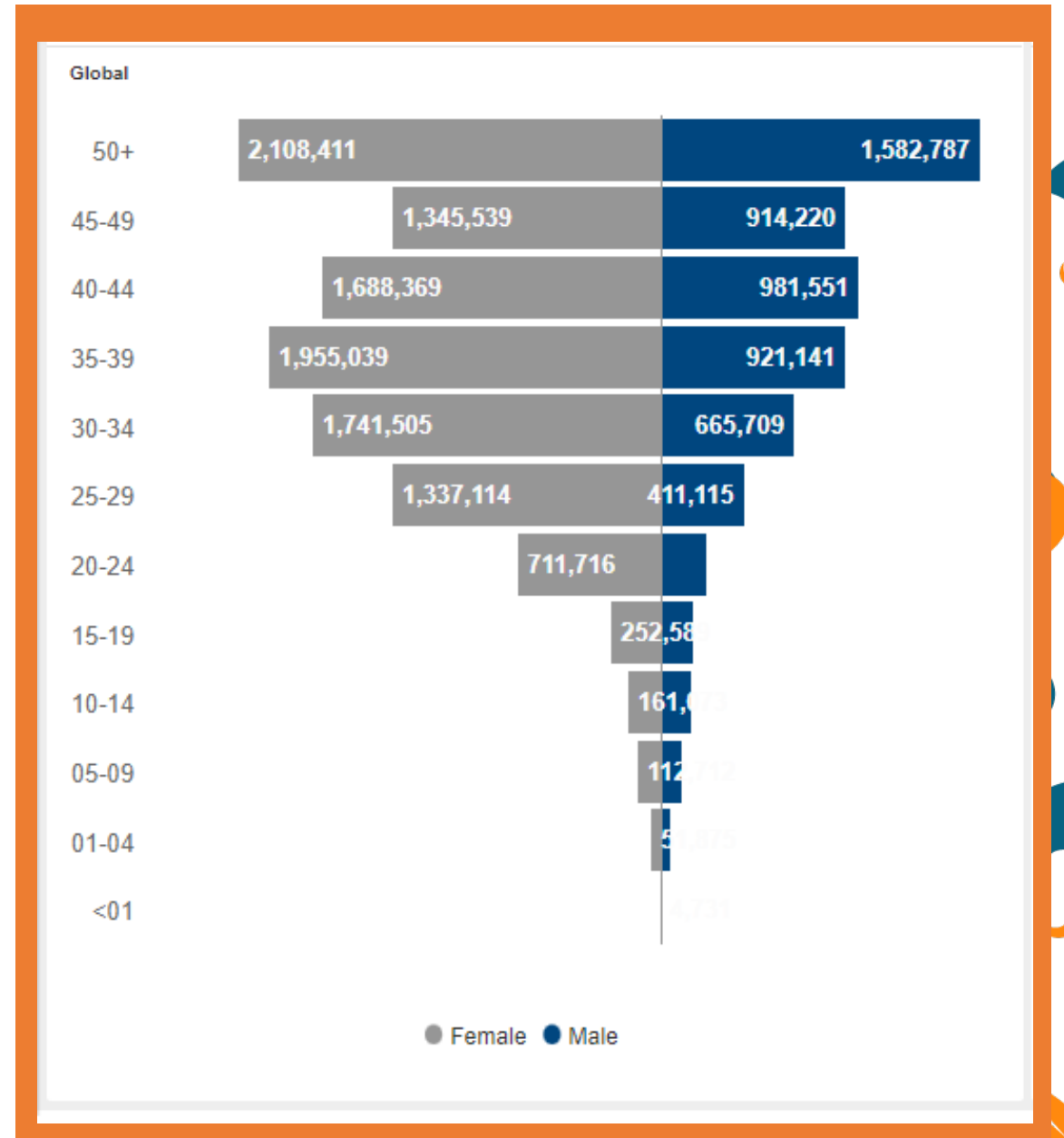


What do we know about interruptions?

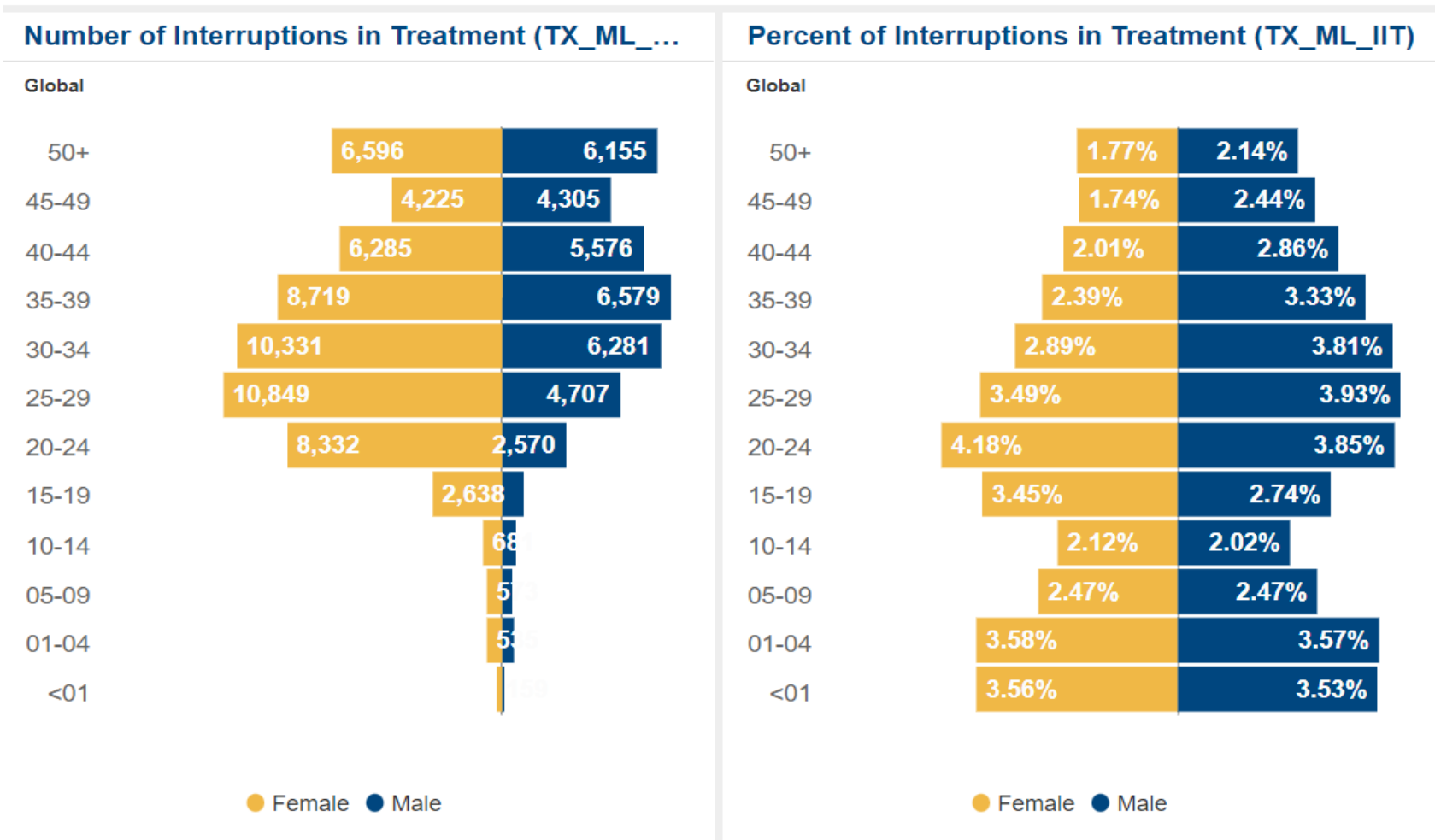
- Age and sex
- Early in treatment vs late



Number, age and sex of individuals with HIV supported by PEPFAR (FY22 Q2)

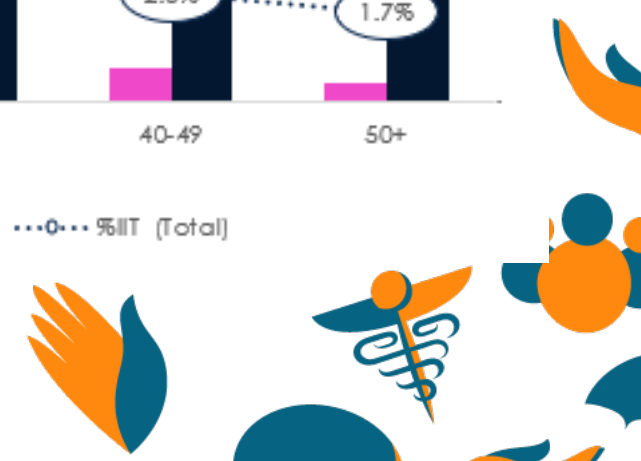
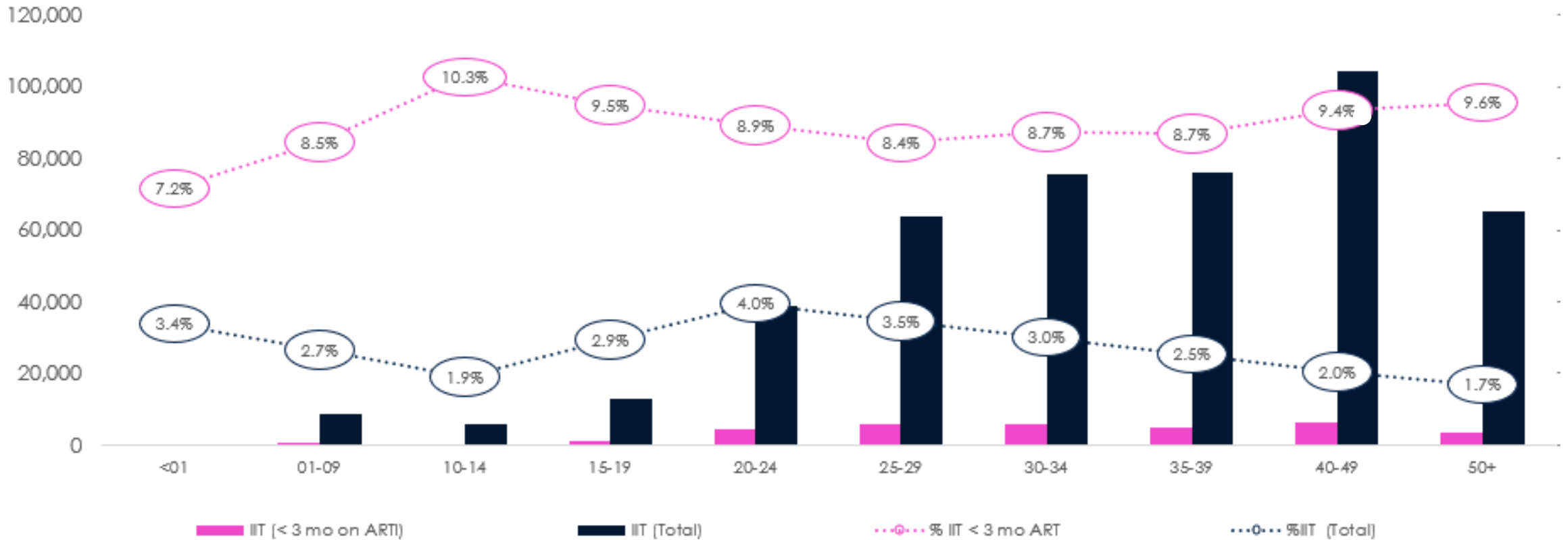


Treatment interruptions by age and sex



Interruptions in treatment (FY22 q2)

Number and percent IIT by time on ART and fine age



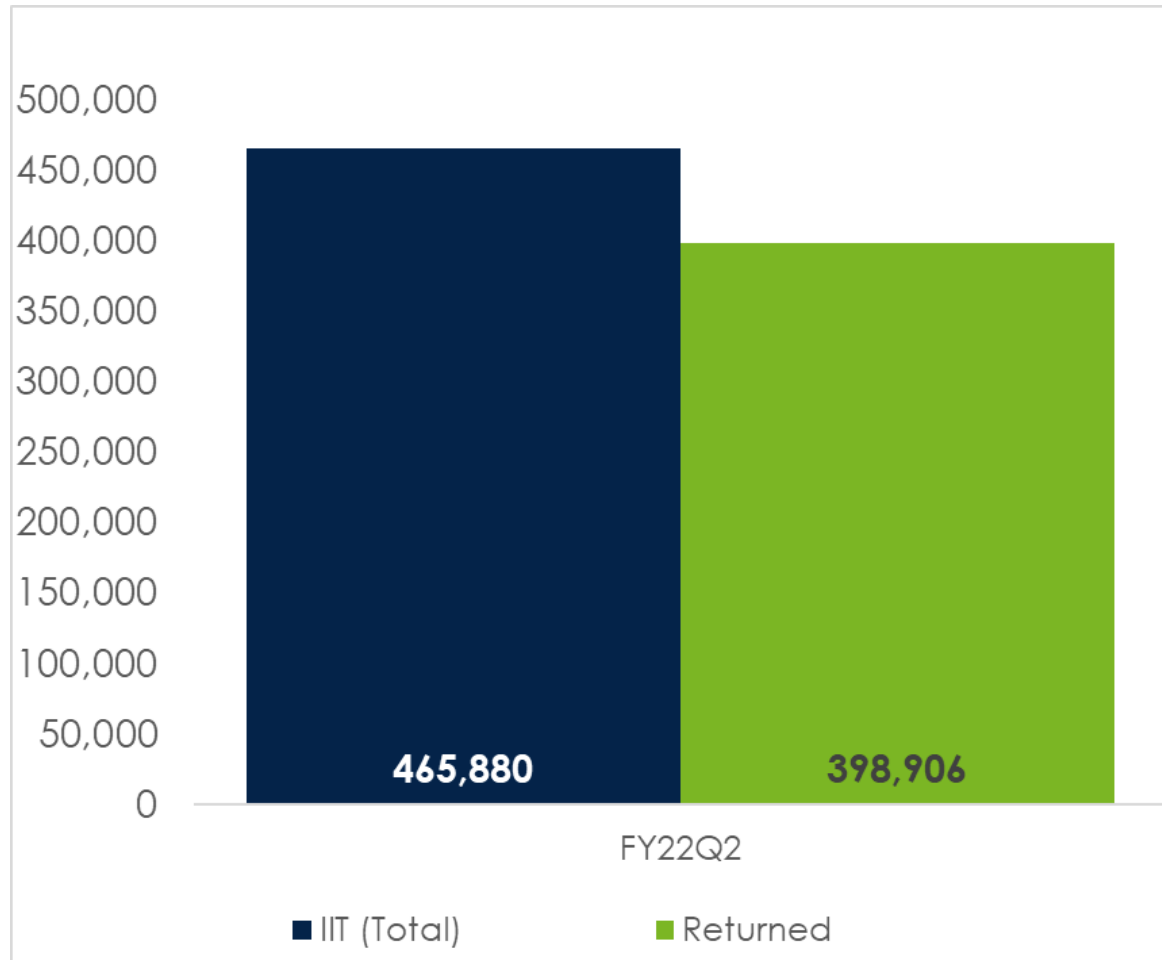
What about re-engagement?

We can look at re-engagements in addition to interruptions

- Returns are defined as the number of individuals returning to care after having been out \geq 28 days since the last expected contact with the health system
- Aggregate data-so this does not follow a particular individual
- We would like returns to match interruptions.

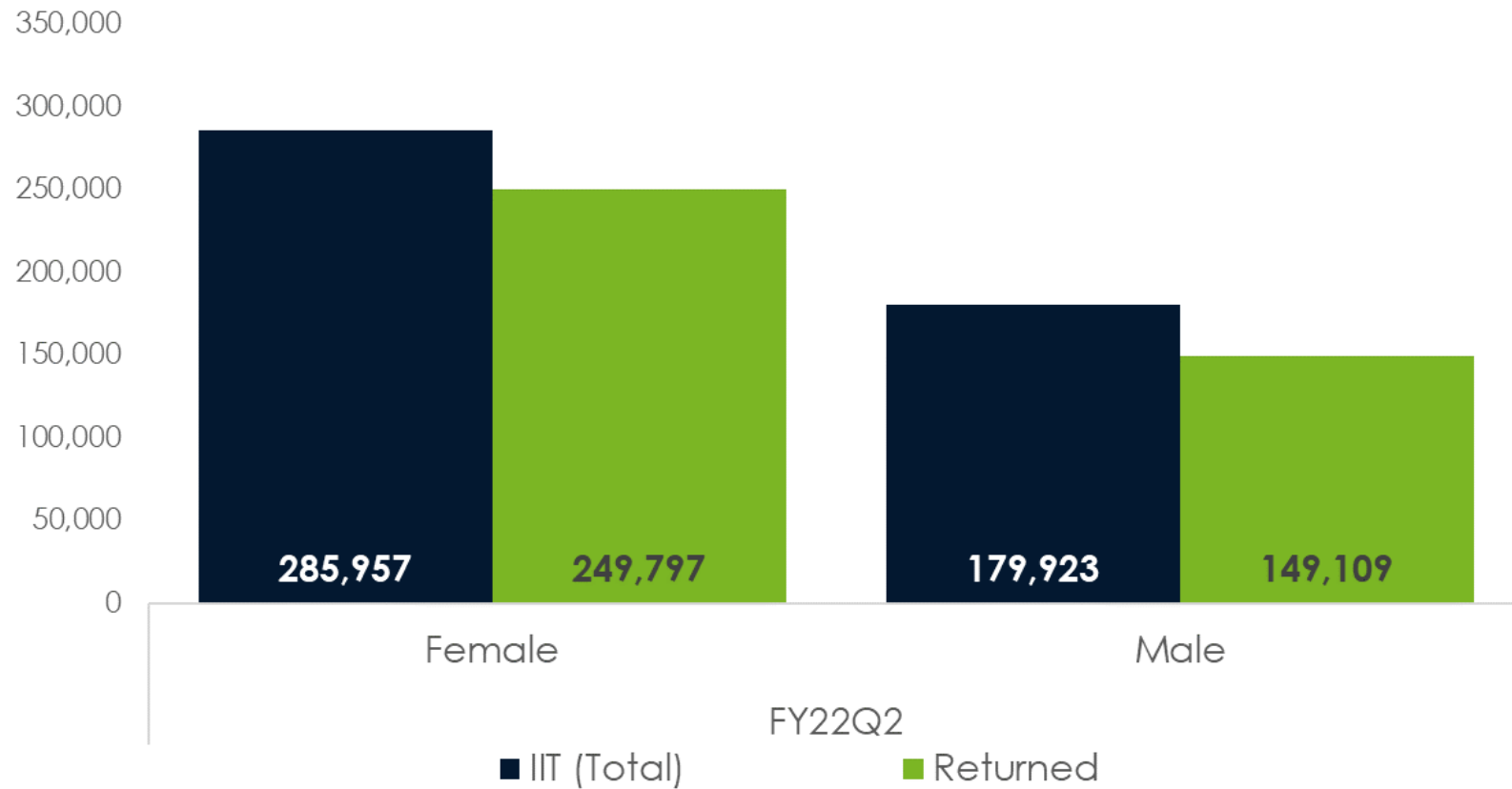


Returning individuals to ART (FY22 q2)



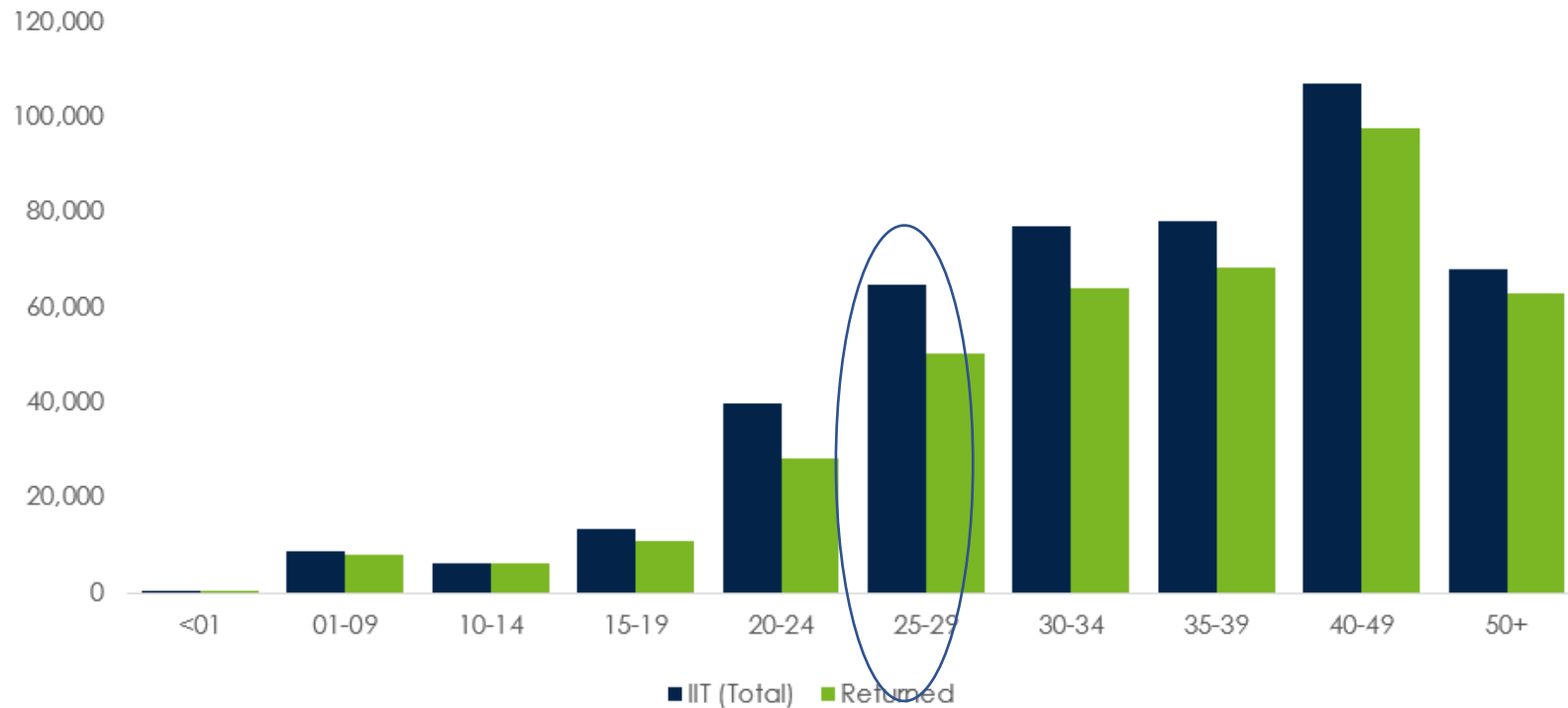
Re-engagement by sex

FY22 q2



Reengagement by age

FY22 q2



Length of interruption before return

FY22q2

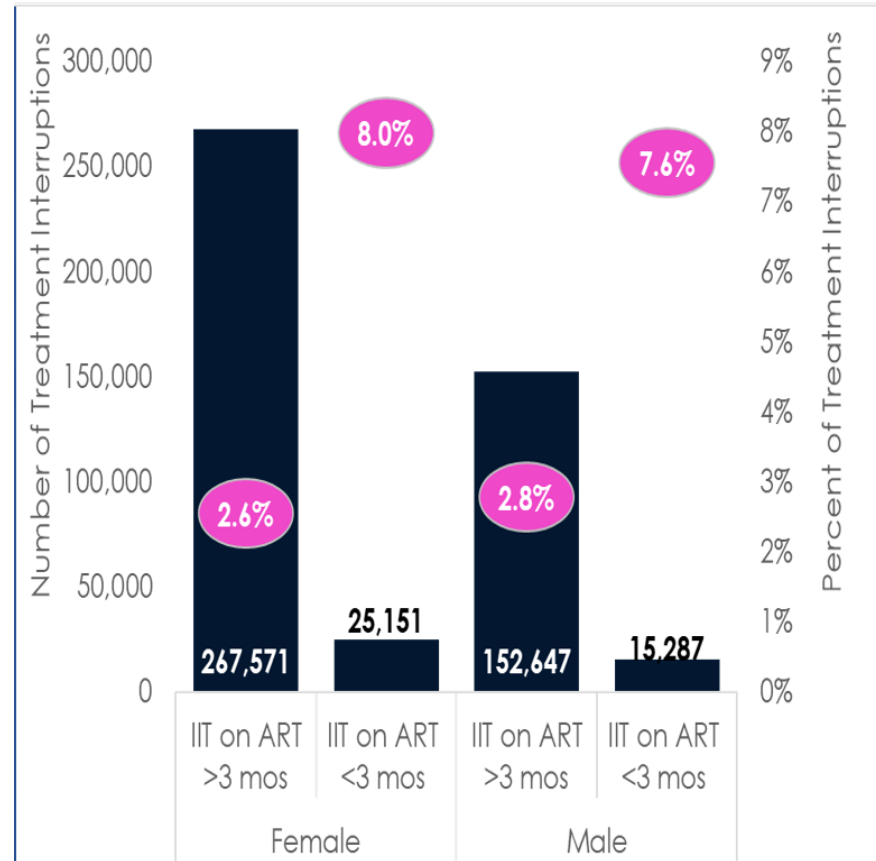


What about the re-engagers?

- Why do they come back?
- When do they come back?
- Where do they come back?
- How do they re-engage?



Number and percent of interruptions by duration on ART (45 countries)



Other considerations

1. Package of care upon return
 - If interrupted ≥ 1 year need assessment for advanced HIV disease including TB
 - When to assess viral load?
2. Timeline for resumption of less intensive dsd models
3. For children assure alignment with other family members.





Acknowledgments: the interagency treatment continuity community of practice

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