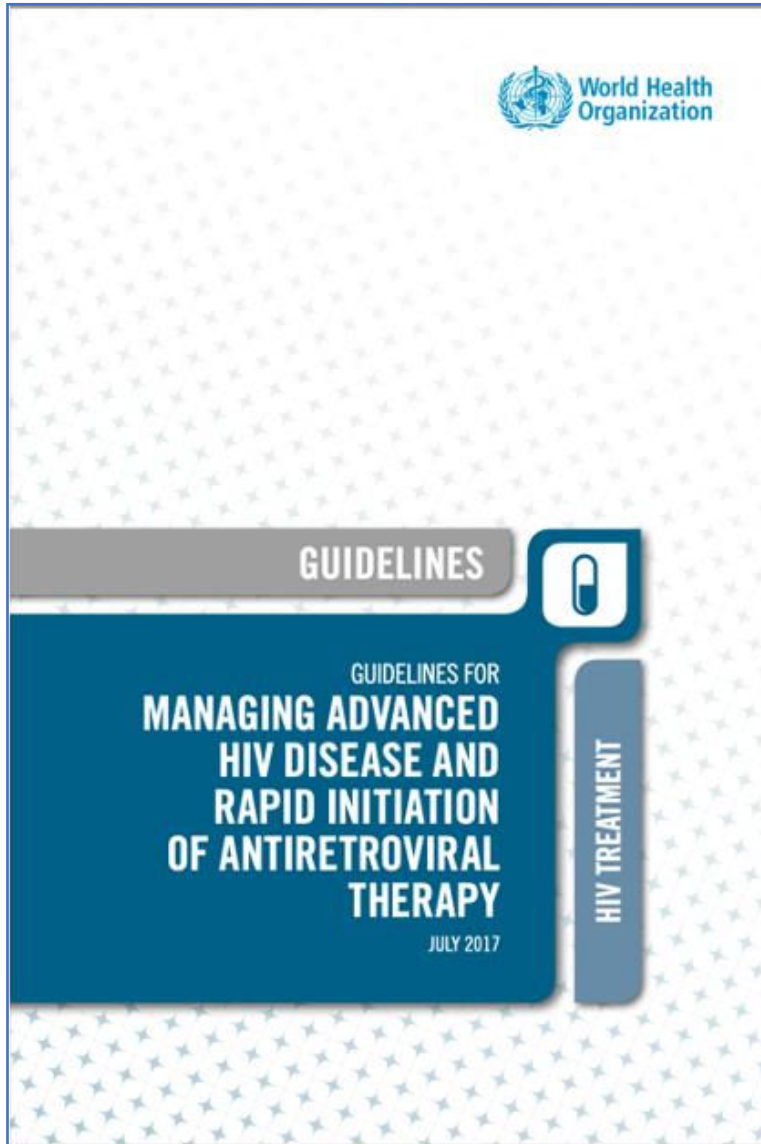


Advanced HIV disease WHO Perspective

Nathan Ford
Treatment and Care
Dept HIV, Viral Hepatitis and STIs

A Package of Interventions



Recommendation

A package of interventions including screening, treatment and/or prophylaxis for major opportunistic infections, rapid ART initiation and intensified adherence support interventions should be offered to everyone presenting with advanced HIV disease
(Strong recommendation, moderate-quality evidence)

Don't forget: other tests are necessary for advanced HIV disease

Management of advanced HIV disease

A package of interventions including screening, treatment and/or prophylaxis for major opportunistic infections, rapid ART initiation and intensified adherence support interventions should be offered to everyone presenting with advanced HIV disease.

(Strong recommendation, moderate-quality evidence)

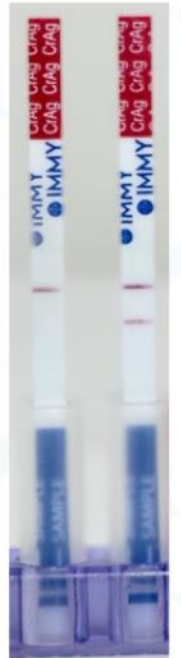


Person living with advanced HIV disease identified by CD4 count < 200 cells/mm³ or WHO clinical stage 3 or 4

TB testing: LF-LAM, Xpert, if available

Other regional co-morbidities (ie. histo)

Crypto screening: CrAg LFA

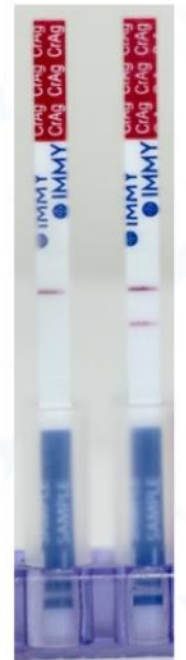


Don't forget: other tests are necessary for advanced HIV disease

Management of advanced HIV disease

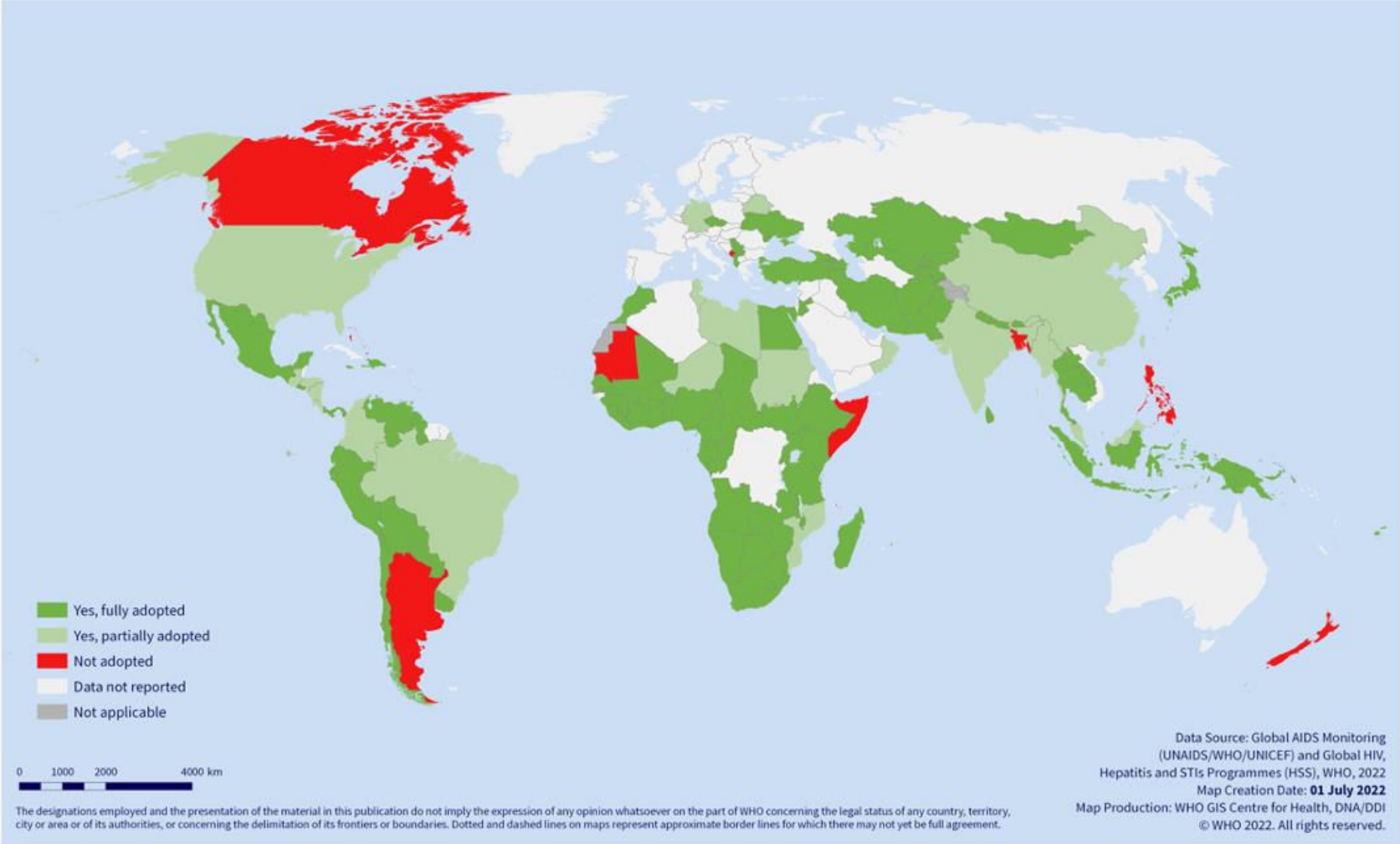
A package of interventions including screening, treatment and/or prophylaxis

Policy brief AHD Diagnostics 2023



Uptake of AHD guidelines, 2021

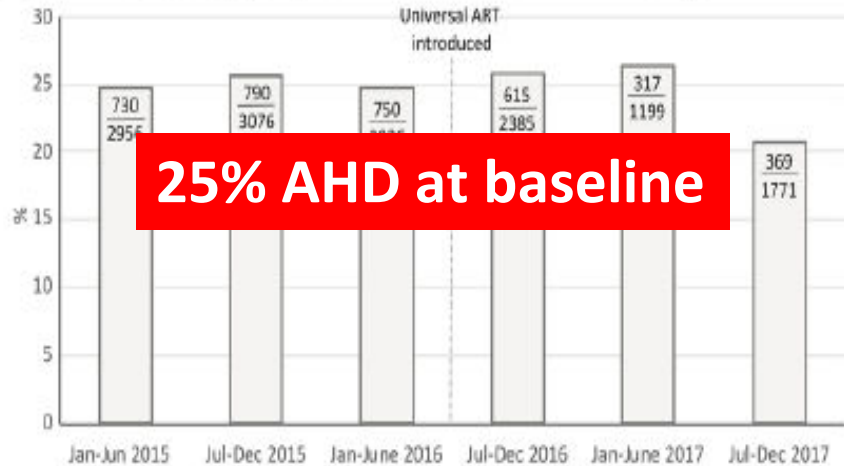
Adoption of WHO 2017 Recommendation to offer a package of interventions to all patients presenting with advanced HIV disease, June 2022



Persistence of advanced HIV disease

Botswana 2015-2018

(c) Percentage of patients with baseline CD4 < 200 cells/μL



25% AHD at baseline

SA & Kenya 2017-2018

Table 4. Baseline CD4 cell counts and stratified by self-reported symptoms and prior treatment status^a

Baseline CD4 count	Kenya (SLATE I) (N = 221)			South Africa (SLATE II) (N = 273)		
	Total	0 symptom	≥1 symptoms	Total	0 symptom	≥1 symptoms
Median (IQR)	272 (124, 522)			294 (135, 464)		
<100 cells/mm ³	21%	6%	14%	18%	4%	14%
≥100 cells/mm ³	46	14	22	48	10	38
≥200 cells/mm ³	60%	16%	20%	67%	12%	23%
Number treatment naïve	139	95	44	174	111	63
Median (IQR) if treatment naïve	278 (133,525)			291 (136,464)		
Number prior default	15			31		
Median (IQR) if prior default	195 (64, 408)			346 (128, 449)		

36-37% AHD at baseline

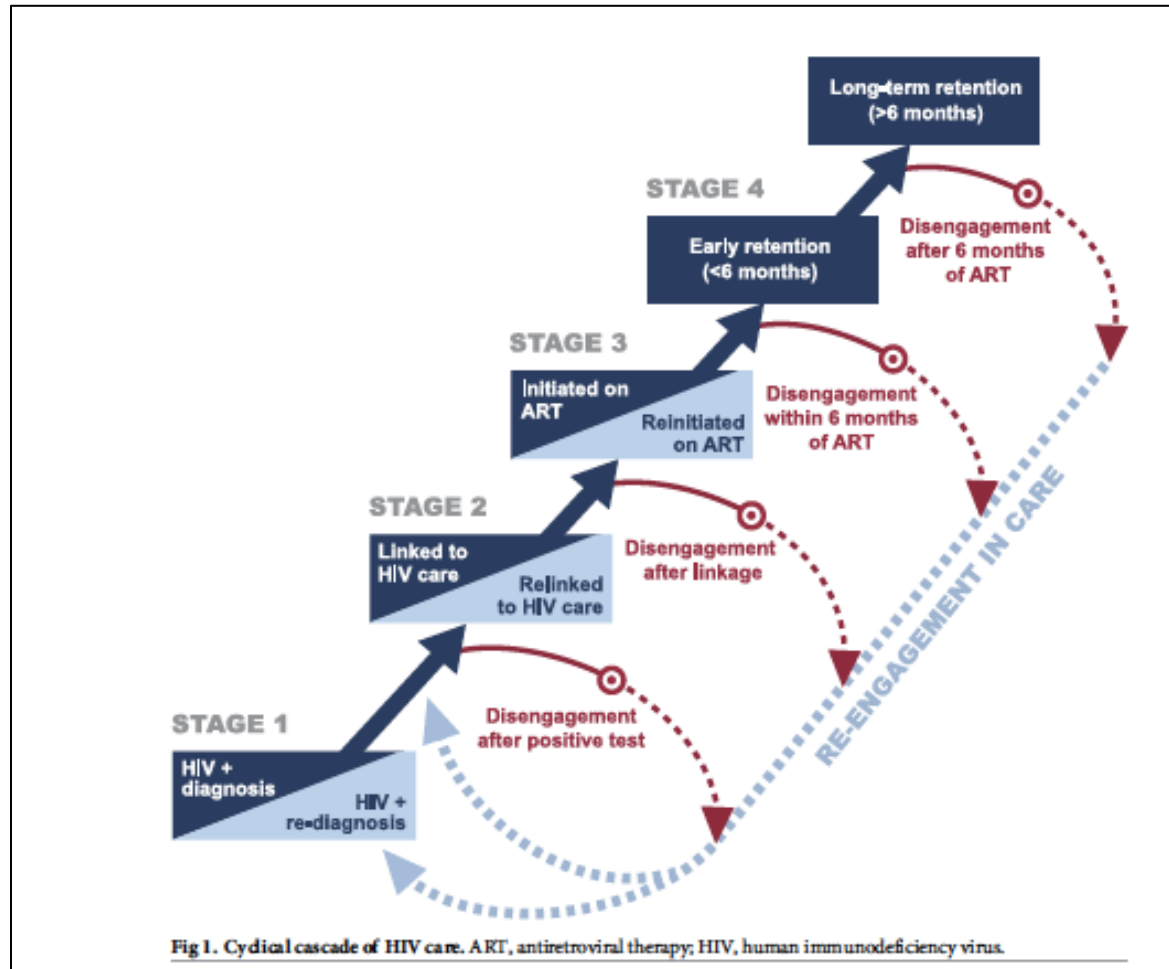
Malawi 2017 (Hospital)

Table 1. Demographic and Clinical Characteristics at Admission of 387 Hospitalized HIV Patients, Malawi, 2017

	Patients, No. (%)
Female	216 (55.8)
Age, median (IQR), y	38 (32-45)
BMI, median (IQR), kg/m ²	18.4 [16.6-20.7]
CD4, median (IQR), cells/μL	170 (51-270)
CD4	
<100 cells/μL	54 (14.0)
100-199 cells/μL	63 (16.0)
200-349 cells/μL	74 (19.5)
≥350 cells/μL	102 (26.8)
Missing	7
On ART at admission	305 (81.1)

**54% AHD at admission
81% on ART**

Disengagement and AHD



Ehrenkranz, Plos Med 2021

Table 1. Demographic and Clinical Characteristics at Admission of 387 Hospitalized HIV Patients, Malawi, 2017

	Patients, No. (%)
Female	216 (55.8)
Age, median [IQR], y	38 [32–45]
BMI, median [IQR] kg/m ²	18.4 [16.6–20.7]
CD4, median [IQR] cells/μL	513 [51–370]
CD4	
<100 cells/μL	141 (37.1)
100–199 cells/μL	63 (16.6)
200–349 cells/μL	74 (19.5)
≥350 cells/μL	102 (26.8)
Missing	7
On ART at admission	305 (81.1)

54% AHD at admission
81% on ART

Huerga, OFID 2021

Disengagement and AHD

WHO Recommendation (2021)

HIV programmes should implement interventions to trace people who have disengaged from care and provide support for re-engagement

Support for re-engagement

Interventions

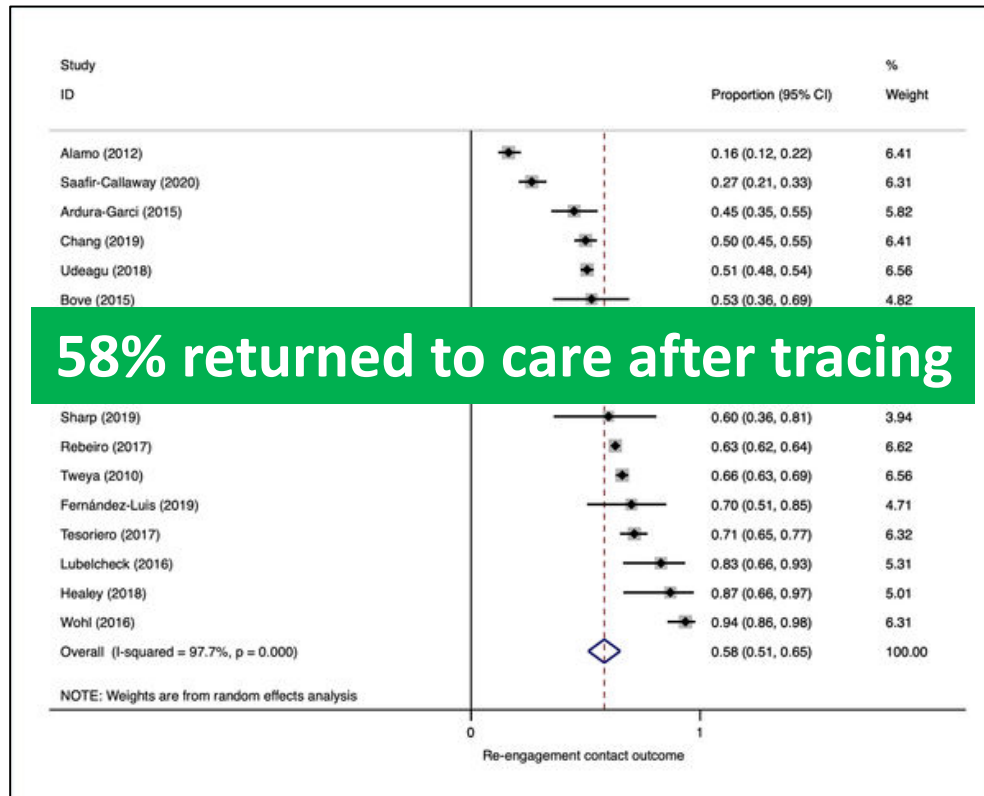
Reminders, economic incentives, case management

Recipient focused

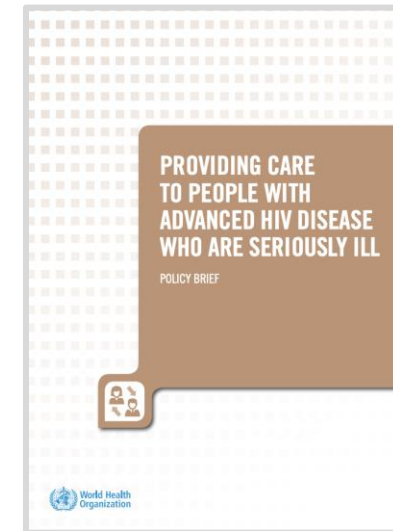
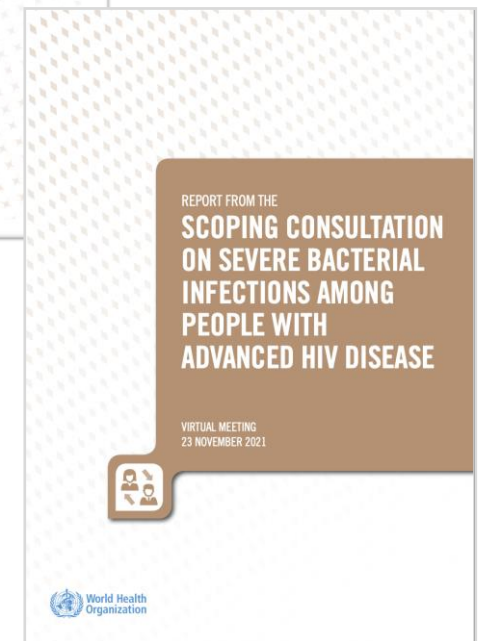
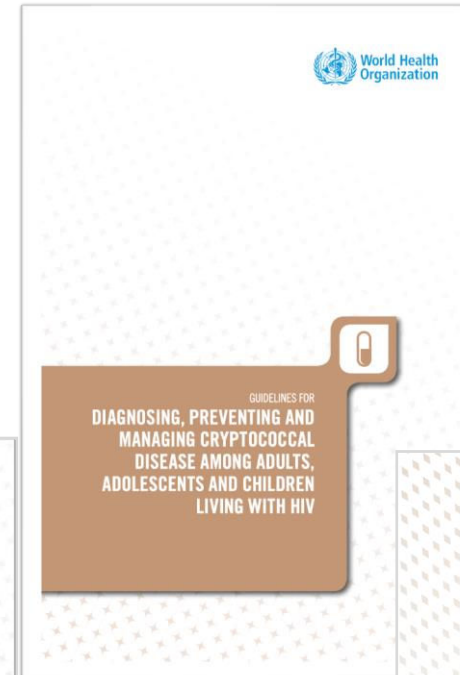
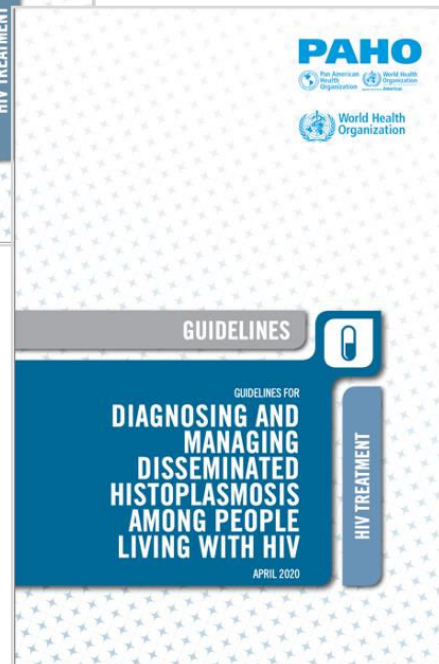
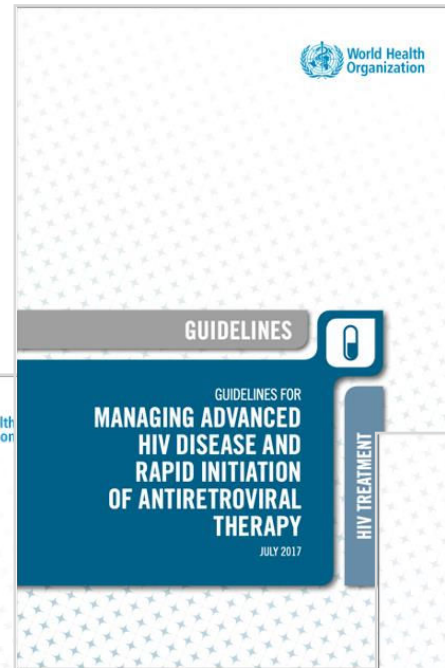
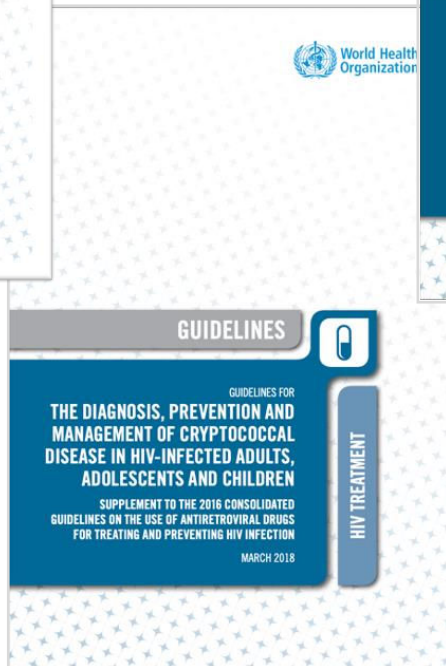
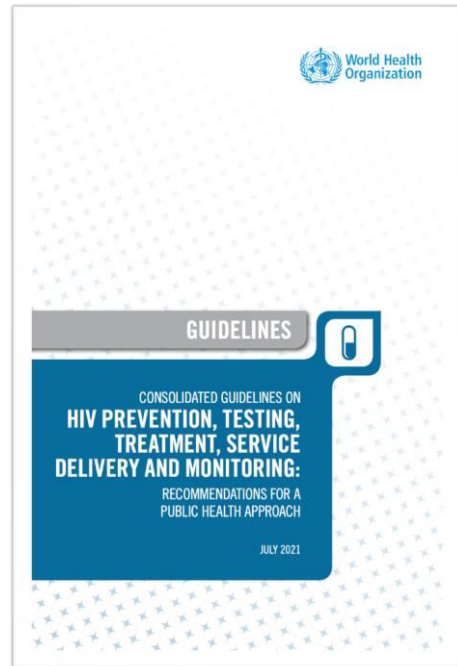
peer- or provider outreach and navigation back to care

Health system focused

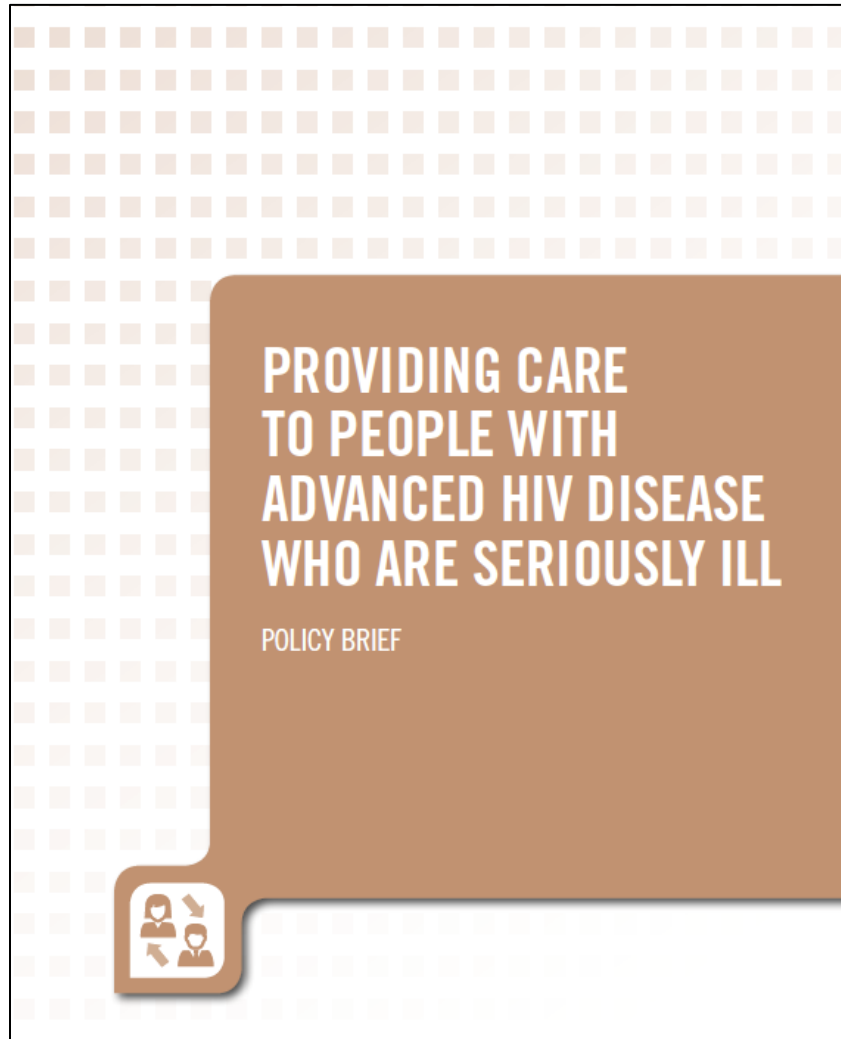
systems to alert health-care providers that patients have disengaged



Other normative documents



AHD differentiation: high risk and seriously ill



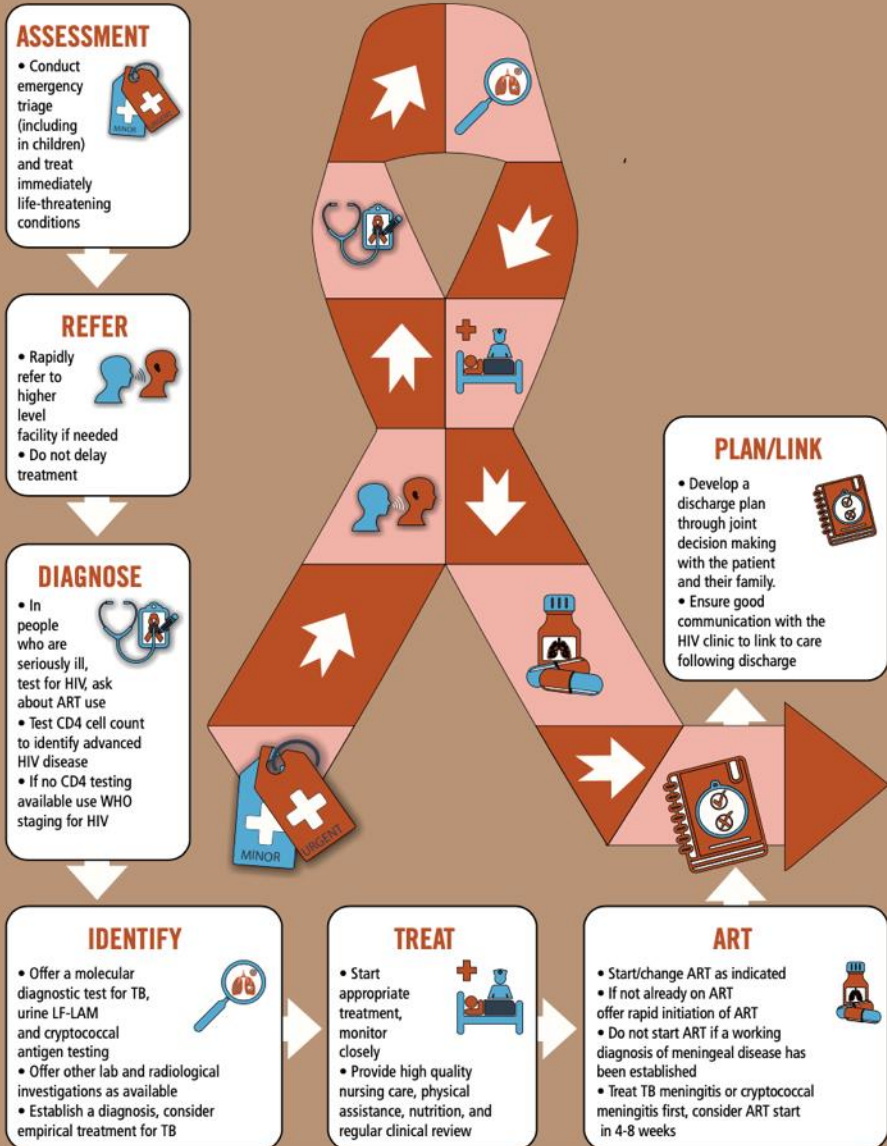
1) High risk

- Few symptoms
- Can be supported at PHC
- AHD package

2) Seriously ill

- Focused diagnostic and clinical care
- Hospitalization?

MANAGEMENT OF HOSPITALISED INDIVIDUALS WITH ADVANCED HIV DISEASE



Providing hospitalized care

- Assessment
- Referral (if needed)
- Diagnose HIV and AHD
- Identify cause severe illness
- Treat
- Start / manage ART
- Make a plan with client / link.



WHO TRACK series

(Technical resources for advanced HIV)

Is a **new digital learning series** for capacity building and knowledge sharing

WHO Global Health Sector Strategy (2022- 2030) represents a **strategic shift** towards ending these epidemics through joint action with disease focus.

Will include webinars and **virtual communities of practice** (vCOPs)

- strengthening of networks
- providing a platform for learning, experience sharing and collaborative problem solving

Encourage attendees to share their knowledge, ask questions, or propose new ideas.

Regularly evaluate the community's sentiment on its members and its ability to achieve an impact in the community.

Register here: <https://www.who.int/teams/global-hiv-hepatitis-and-stis-programmes/hiv/treatment/advanced-hiv-disease>



Thank you!

