

Improving Diagnosis and Management of Advanced HIV Disease Among People Living with HIV Overtime: A Cote d'Ivoire Experience

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BACKGROUND / INTRODUCTION

Advanced HIV disease (AHD) remains a challenge, with 30% of people living with HIV presenting with AHD and the majority of HIV-related deaths attributed to AHD [1].

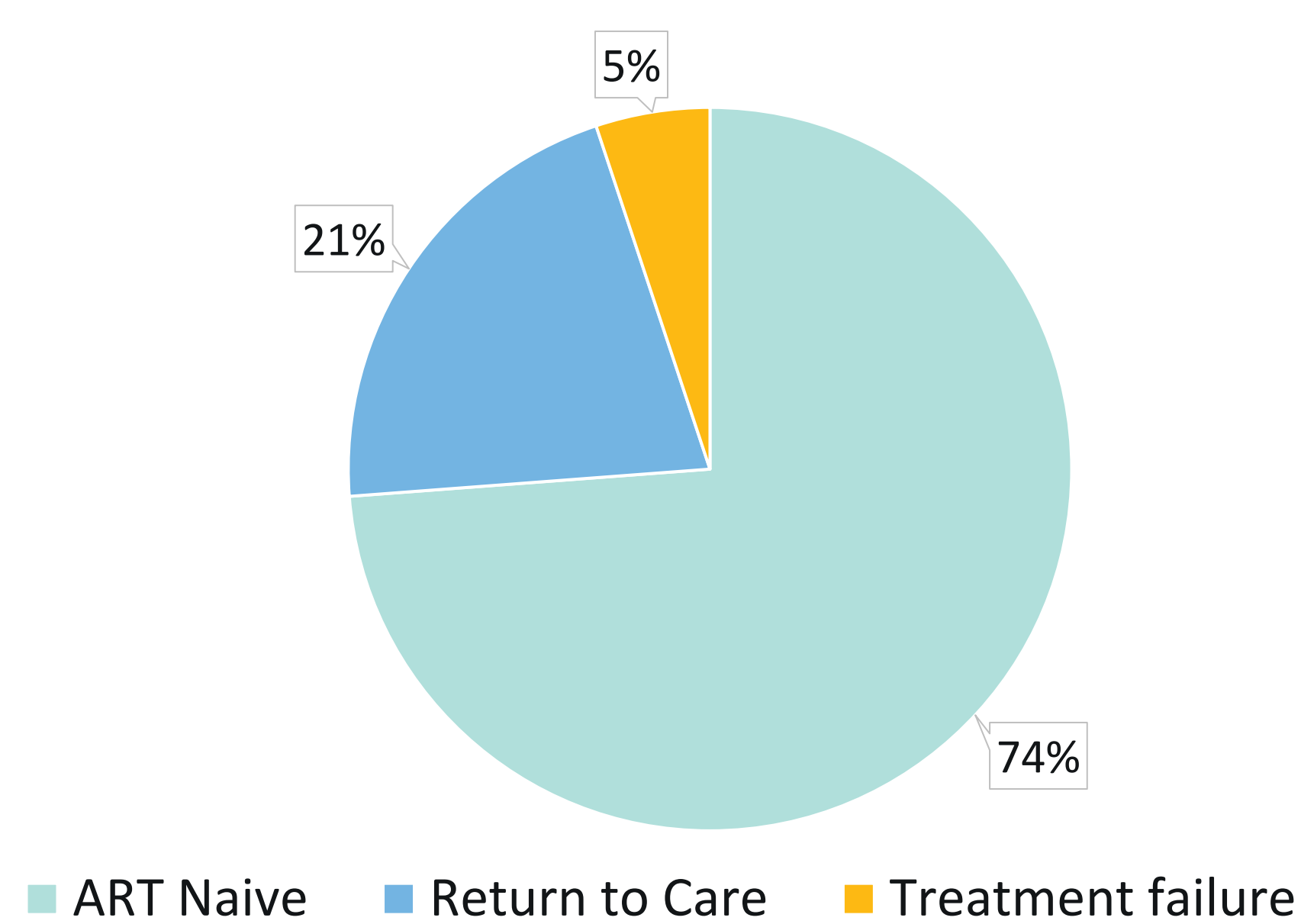
In 2017, WHO issued guidelines for management of AHD [2].

In September 2023, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) developed and started the implementation of a refined and optimized package of care and treatment for AHD clients in five health districts of Abidjan, Côte d'Ivoire.

KEY RESULTS & TAKEAWAYS

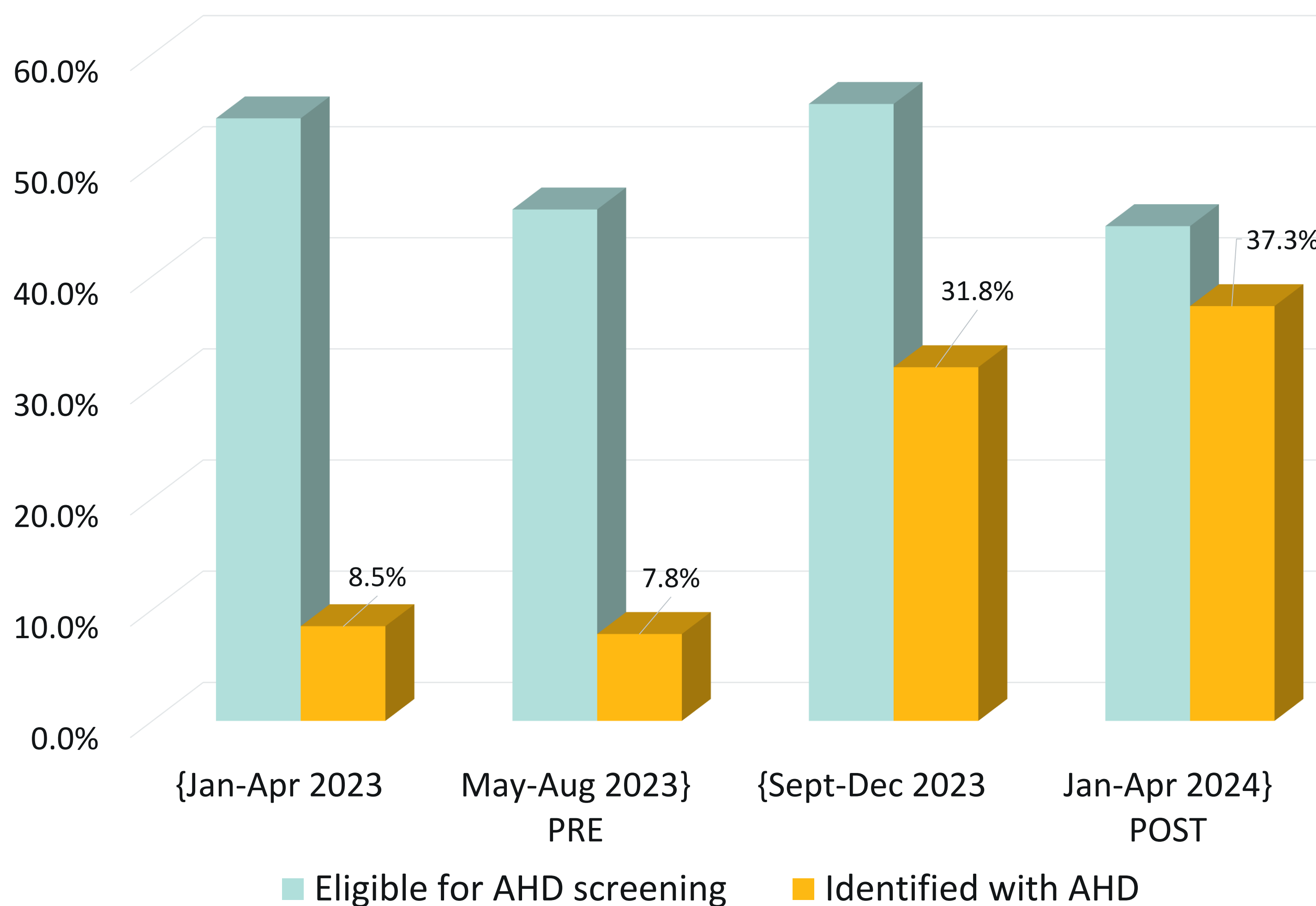
1) From September 2023 to April 2024, 3,047 PLHIV were eligible for AHD screening.

Figure 1. Patients eligible for AHD screening (N=3,047)



2) Significant Increased of AHD diagnosis among eligible patients compared to the period prior to AHD optimized package of care: from 333/4,075 (8.2%) from January to August 2023, to 1,044/3,047 (34.3%) from September 2023 to April 2024, p<0.0001

AHD diagnosis trends among eligible patients from January to August 2023 and from September 2023 to April 2024



METHODS

The optimized AHD package of care was implemented in 30 health facilities within five health districts in the Abidjan 1 health region in Côte d'Ivoire. The facilities were divided into two under a hub and spoke model. The AHD package comprised of:

- Updating national AHD guidelines
- Developing standard operating procedures, job aids and tools,
- Training, coaching and mentoring health care providers,
- Strengthening sample transportation system
- Purchasing and supplying to all AHD commodities including tests and drugs
- Capacity building of monitoring and evaluation
- Strengthening capacity of lay health workers and expert patients for referrals between hubs and spokes.
- Prevention, diagnosis, and treatment of opportunistic infections

KEY RESULTS & TAKEAWAYS

3) Improved diagnosis of opportunistic infections : From no documented diagnosis of opportunistic infections, to documentation, diagnosis, and treatment of major opportunistic infections



CD4 staging among eligible clients:

- 1041/4075 (25.5%) from January to August 2023
- 2457/3047 (80.6 %) from September 2023 to April 2024 (p<0.0001)



TB screening and diagnosis among AHD clients:

- 2/333 (0.6%) LF-LAM done from January to August 2023
- 950/1044 (91.0%) LF-LAM done from September 2023 to April 2024 (p<0.0001)
- Number of TB diagnoses was 52 before and 146 after the start of implementation



Cryptococcal disease screening and diagnosis among AHD clients:

- 0/333 (0%) sCrAg tests done from January to August 2023
- 929/1044 (89.0%) sCrAg tests done (p<0.0001)
- Number of diagnoses of cryptococcal disease was 0 before and 3 after implementation



Other opportunistic infections (OIs):

- From no reports and documentations from January to August 2023
- To 57 cases of other OI (toxoplasmosis, oral candidiasis, herpes zoster, pneumonia...) from September 2023 to April 2024

4) Improved capacity among physicians and other healthcare workers :

- 56 healthcare providers trained (physicians & nurses)
- 20 laboratory technicians trained
- 19 pharmacists or pharmacy management assistants trained; and
- 54 social workers trained

5) Improved quality of care using QI collaborative approach in all 30 sites of the project leading to better outcomes among AHD patients.

Among the 1,044 patients diagnose with AHD from September 2023 to April 2024: 86% (898/1,044) were alive, 8% (83/1,044) died, 5% (52/1,044) were transferred out and 1% (11/1,044) were lost to follow up at the end of September 2024.

CONCLUSIONS

The implementation of an optimized AHD care package including coaching, mentoring, and training of healthcare providers as well as the introductions of rapid tests and key commodities are game changers for diagnosis, treatment, and care of AHD patients

ACKNOWLEDGMENTS



BILL & MELINDA GATES foundation

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Abbreviations: sCrAg: Serum Cryptococcal Antigen; LF-LAM: Lateral Flow urine Lipoarabinomannan Assay; OI: Opportunistic Infections; AHD: Advanced HIV Disease; QI: Quality Improvement; DDAH: Developing and Scaling Delivery of Advanced HIV Disease Services Project

References:
[1]: Lawn, SD, et al., EAELY mortality among adults accessing antiretroviral treatment programs in sub-Saharan Africa. *Aids*, 2008. 22(15): p. 1897-908.; [2] World Health Organization., Guidelines for managing advanced HIV disease and rapid initiation of antiretroviral therapy, July 2017. 2017