

Stronger health systems. Greater health impact.



Beyond Option B+

Erik Schouten

22 July 2012

19th International AIDS Conference, Washington

Satellite Session: Prevention of vertical transmission and beyond

This presentation



- Evolution of Option B+
- Implementation
- Positive outcomes and challenges

Development of the concept



November 2009

WHO issued 'Rapid advice' for **PMTCT** and **ART**

January 2010

Joint meetings of TWGs for PMTCT and ART

Realization that access to reliable CD4 count is critical for these PMTCT policies and that this would be a major bottleneck.

February 2010

- Can we scale up PMTCT **without CD4 count** testing?
- **Should we stop ART** (option B) after end of breastfeeding period? (Malawi: mean BF 24 months, TFR 5.6 (birth interval 2.5 years, women eligible for ART after 3-4 years)



Justification

- Availability of reliable CD4 count testing is a non-starter (all Health Centers can perform a HIV test, which is the only condition)
- Simpler than option A
- Improving health mother (20% MMR in Malawi is HIV related)
- Making breastfeeding safe
- Avoid start-stop approach
- Protection of uninfected sexual partners
- Reduce TB incidence
- The only realistic option to eMTCT

Viewpoint

Prevention of mother-to-child transmission of HIV and the health-related Millennium Development Goals: time for a public health approach

Erik J Schouten, Andreas Jahn, Dalitso Midiani, Simon D Makombe, Austin Mnthambala, Zengani Chirwa, Anthony D Harries, Joep J van Oosterhout, Tarek Meguid, Anne Ben-Smith, Rony Zachariah, Lutgarde Lynen, Maria Zolfo, Wim Van Damme, Charles F Gilks, Rifat Atun, Mary Shawa, Frank Chimbandira

Lancet 2011; 378: 282-84
See World Report page 215
Department of HIV and AIDS,
Ministry of Health, Lilongwe,
Malawi (E) Schouten MD.

Like many other countries in Africa, Malawi is preparing to revise its policies for prevention of mother-to-child transmission (PMTCT) of HIV and for antiretroviral therapy (ART) in response to WHO's 2010 guidelines.¹² This guidance is timely in view of the limited efficacy of pregnancy in Malawi, and it will be used as the first-line regimen in adolescents and adults. The logistics of delivery will be improved, the risks of running out of stocks lessened, the need for multiple guidelines and training eliminated, and the likelihood of successful implementa-

Lancet 2011; 378: 282-84

Implementation



- Policy
 - Implementation plan
 - Forecasting of number of people starting ART
 - Costing
 - Guidelines
 - Curriculum
 - M&E tools
 - Supervision
-
- Start July 2011, in 3 months 3,366 health workers trained
 - A massive exercise with up to 10 concurrent trainings going on, by end March 2012 option B+ in 528 sites

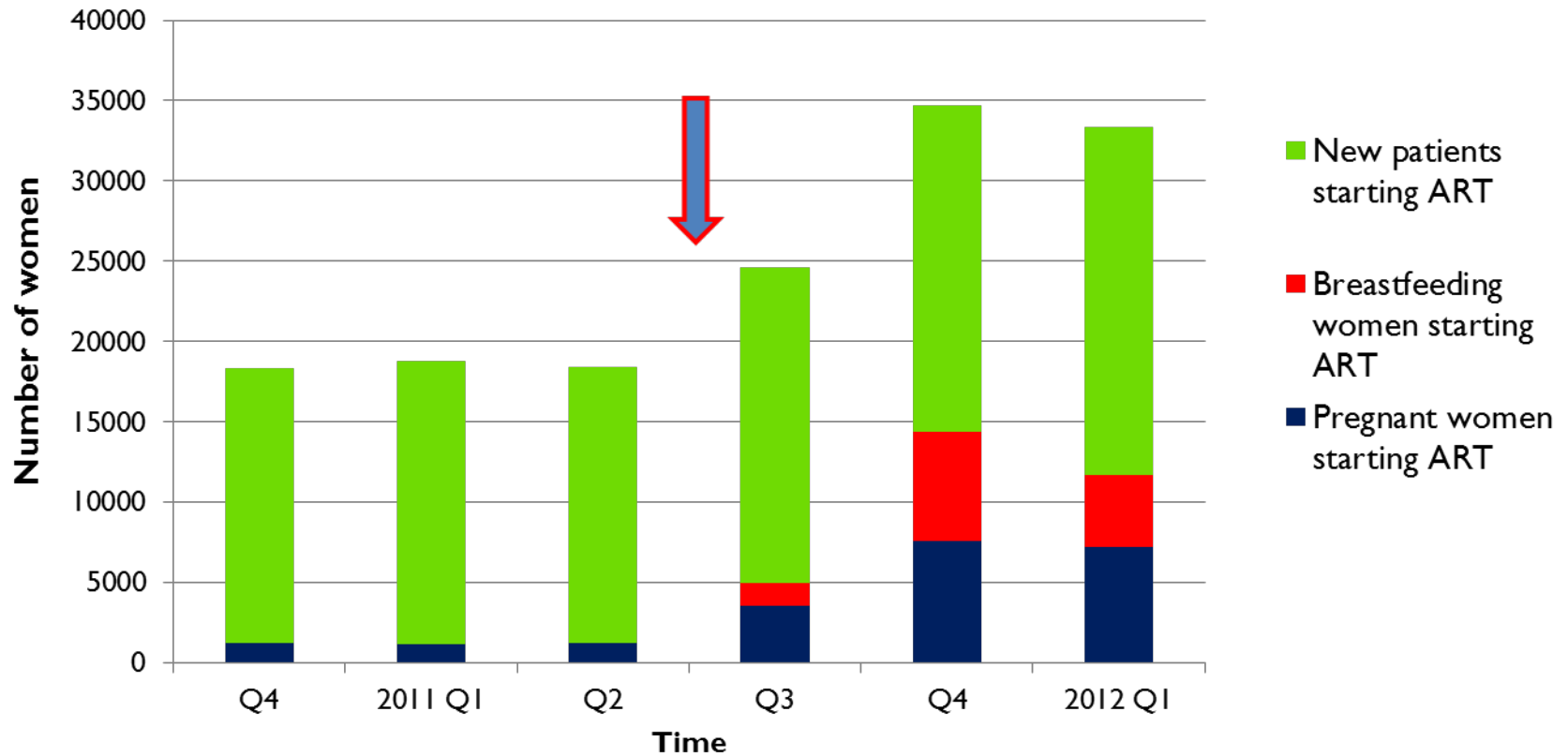
Positive outcomes - health system benefits



- Harmonization of PMTCT and ART program
 - Combined clinical guidelines
 - Combined training
 - Combined accreditation of health workers and sites
 - Combined supervision
 - Combined M&E system
 - Combined drug supply system
- Accelerated decentralization of ART services
- Option B+ is a game-changer



Number of pregnant and breastfeeding women starting ART in Malawi

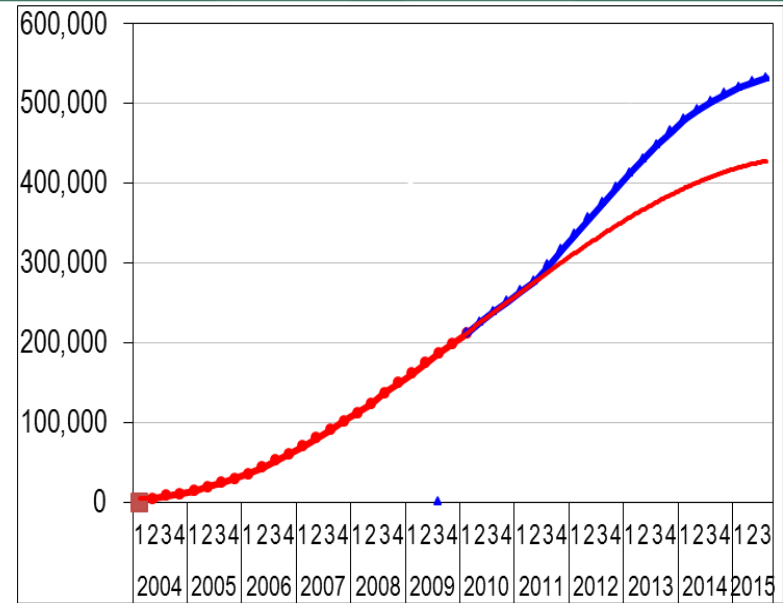




Option B+ can contribute considerable to eMTCT, but it is not the sole solution to eMTCT. Other issues are:

1. Identification of mothers
 - ANC / Maternity - not all women attend, not all are tested
 - Quality of HIV testing - false negative tests
2. Identification of (exposed and infected) infants and children
 - Children of mothers who were not identified and did not access PMTCT
 - 1% incidence in pregnancy
 - PSHD (undervalued), identification in immunization clinics, identification of infected children in CCM of childhood diseases
3. Acceptance of ART (initially, during pregnancy and breastfeeding period and for life). Public perspective.

Challenges (cont.)



4. Human resources increased speed of scale up and decentralization to small facilities.
→ Role of community systems
5. Financial resources
Initially costs will be higher, but will reduce number of infected children, reduced MM, and less infected sexual partners, etc. This may offset the initial investment
6. Toxicity, adherence in patients starting ART without symptoms, development of HIV DR

For the discussion



Option B+:

- Game changer
- Essential to eMTCT
- Not a silver bullet
- Complex technology, low impact

Stronger health systems. Greater health impact.



*Saving lives and improving the health
of the world's poorest and most vulnerable people
by closing the gap between knowledge and action in public health.*