

4th Southern African HIV Clinicians Society Conference Gallagher Convention Centre 24-27 October 2018

Cases: Primary Health and Rural Doctors



CASE: Virological Failure

Switching to Regimen 2, Regimen 2 Failure and Applying for Third Line Regimen



Virological Failure

Applying for Third Line Therapy

A CASE OF A PATIENT WITH VIROLOGICAL FAILURE IN SECOND LINE THERAPY



HIV TREATMENT HISTORY:

She was initiated on HAART in 2006

Regimen: AZT/3TC/EFV

SWITCHED TO FDC in 2012 (VL undetectable)

SWITCHED TO REG 2 in 2014 (Virological failure): REG= KALETRA/AZT/3TC

Failed Regimen 2 (December 2017)

Application for Third Line in January 2018

Treatment initiated in February 2018



Switching to Regimen 2:

Consider switching patients on the first-line drug regimen if there is virological failure (VL>1000 copies/ml) on at least two occasions two months apart despite good adherence.

Viral Load Results:

2014 February= 65201 copies

2014 April= 66023 copies



Diagnosis of second line treatment failure

- 1. VL > 1000 copies/ml on second line ART for longer than one year
- Check for adherence, compliance, tolerability
 & drug reactions and assess psychological issues
- 3. Repeat VL after 6 months
- 4. If VL < 1000 continue second line
- 5. If VL > 1000, do Genotypic resistance testing
- 6. Apply for third line drugs



Viral Load Results in Regimen 2

October 2014= Virally Suppressed November 2015 = Virally Suppressed October 2016= Viral load 251498 Copies April 2017= Viral load of 88201 Copies December 2017= 11 0000 Copies Genotyping Done in December 2017 Results = Resistance to PI (January 2018) Third Line Regimen Application in January 2018



- Access to third-line regimen is limited to patients who have documented resistance Protease Inhibitors (PIs).
- If PI resistance mutations are present then Darunavir-Ritonavir is authorised by expert committee, together with Raltegravir & Etravirine and possibly other ARVs depending on the resistance profile and patient ART history.



APPLYING FOR THIRD LINE REGIMEN

- Download the form from the website of Southern African HIV Clinicians society or send an Email to: <u>tlart@health.gov.za</u>
- Tel: 012 395 9756
- Recent results: CD4 count, Viral Load, Hb, ALT, Creatinine, Creatinine clearance, WCC, Hepatitis B status
- Thorough history on past ART regimens
- Response is within 2 weeks
- Communicate with the pharmacist



Patient clinical status:

Prior Third line initiation:

Severe weight loss, fatigue, skin rashes, Oesophageal Candida, Weight= 55 kg, CD4=106 VL=110 000

7 Months on third Line:

Asymptomatic, Weight= 66kg, CD4=234, VL<detectable



Thank you for your attention