

FAST 15: The Status of HIV in 2020

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Disclosure

I, Casey Messer, have no relevant financial, professional or personal relationships with commercial interests to disclose.



Objectives

At the conclusion of this session, the participant will be able to:

- Discuss the current status of the HIV epidemic in the US
- Identify updated guidelines for prevention & treatment of HIV



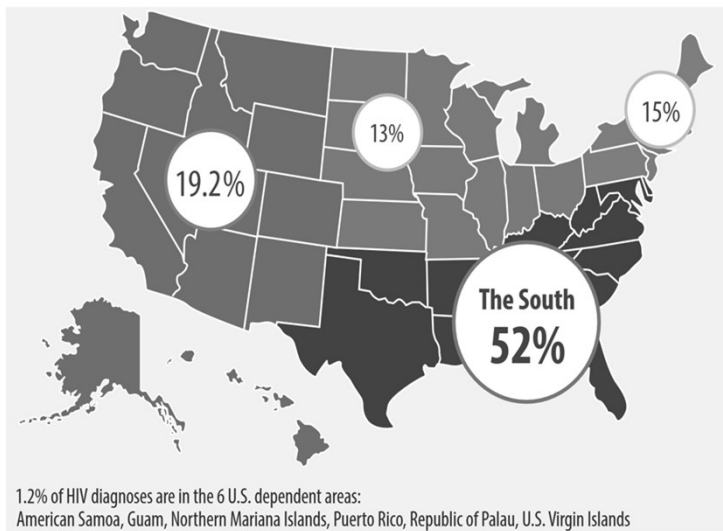
HIV Epidemiology Overview

- Approximately 1.1 million people in the U.S. are living with HIV
- New infections are steady at ~39,000 per year
- 1 in 7 (14%) persons living with HIV are unaware
- More than 50 percent of new diagnoses occur in 48 counties; Washington, DC; and San Juan, Puerto Rico

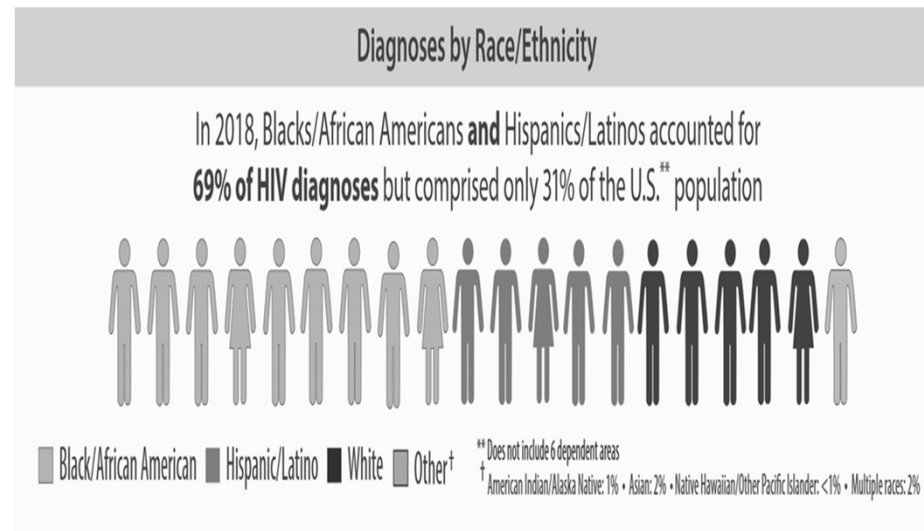


HIV Epidemiology Overview

HIV disproportionately affects certain populations

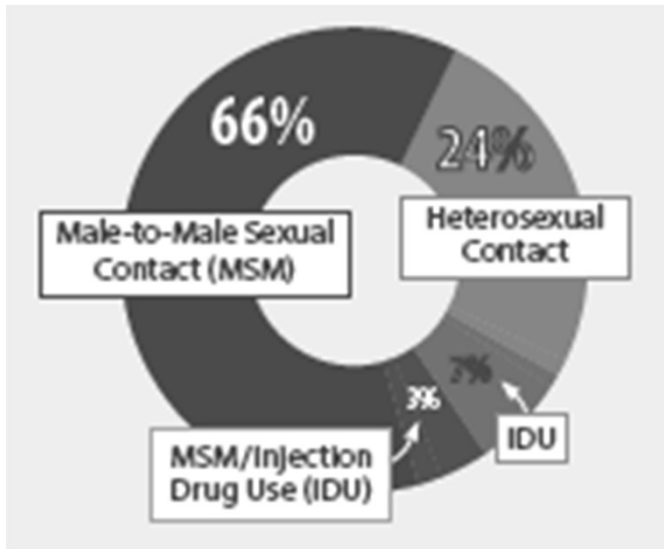


Source: CDC, 2018

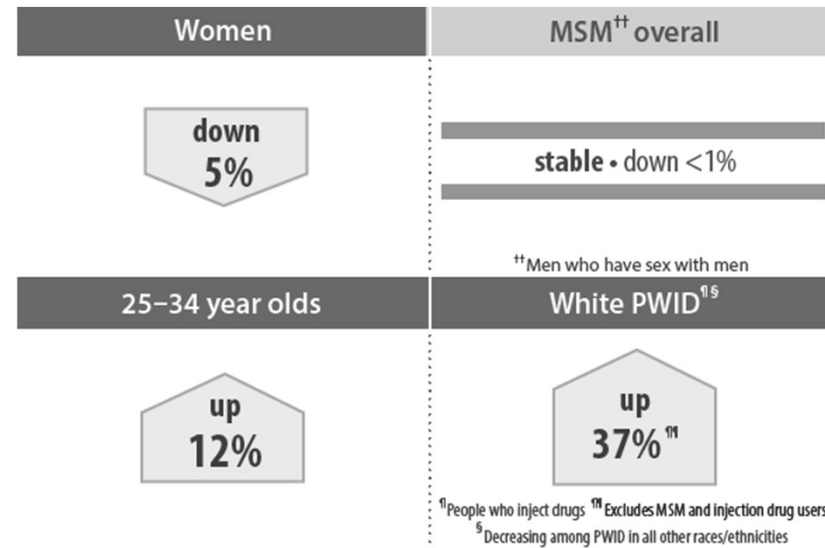


HIV Epidemiology Overview

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Source: CDC, 2018



HIV Prevention

- Harm reduction approaches are individualistic based on risk
 - Abstinence/nonpenetrative sexual contact/mutual monogamy
 - Consistent condom use
 - Durable viral suppression (U=U)
 - Biomedical interventions
 - Pre-Exposure Prophylaxis (PrEP)
 - Post-Exposure Prophylaxis (PEP)
 - Occupational vs nonoccupational exposure



HIV PrEP

- Pre-Exposure Prophylaxis (PrEP)
 - An option for anyone who injects drugs or is not in a mutually monogamous sexual relationship with an HIV negative partner
 - Daily oral administration is the only FDA-approved dosing
 - emtricitabine/tenofovir disoproxil fumarate (F/TDF)
 - emtricitabine/tenofovir alafenamide (F/TAF)
 - HIV Ag/Ab, Hep B surface ab/ag, Creatinine at baseline
 - Repeat Creatinine at 3 months after initiation, then annually
 - HIV Ag/Ab every 3 months (also other STIs, HCG)
 - PrEP Consultation Service
 - 855-448-7737



HIV PEP

- Occupational Post-Exposure Prophylaxis
 - Follow your employers guidelines and protocols
- Nonoccupational Post-Exposure Prophylaxis (nPEP)
 - Evaluate <72 hours after potential exposure
 - HIV testing, combination Ag/Ab preferred, or rapid antibody test
 - Emtricitabine/tenofovir disoproxil fumarate (200mg/300mg) once daily
 - plus*
 - dolutegravir 50mg daily OR raltegravir 400mg twice daily**
- PEP Consultation Service
 - 1-888-448-4911



HIV Testing

- The USPSTF recommends that clinicians screen for HIV infection in adolescents and adults aged 15 to 65 years. (CDC 13-64)
- Ag/Ab combination (4th generation)
- More frequent HIV screening should be provided to patients living in high HIV incidence areas and among populations disproportionately burdened:
 - Southern US
 - Black/African Americans
 - Men who have sex with men (gay, bisexual, same-gender-loving, etc.)



HIV Treatment

- DHHS Guidelines on use of Antiretroviral Agents (December 2019)
 - Antiretroviral Therapy (ART) should be started immediately or as soon as possible after diagnosis
 - Dolutegravir may be used as alternative regimen for persons of childbearing age who are not using contraception, recommended option for individuals using effective contraception
 - Increase in age-related comorbidities for long-term survivors
 - Recommended Initial Regimens
 - Multiple triple therapy combination single tablet regimens
 - dolutegravir/lamivudine
 - bictegravir/tenofovir alafenamide/emtricitabine (before drug resistance testing)



HIV Models of Care

- Test and Treat (T&T)
- Treatment as Prevention (TasP)
- Data to Care (D2C)
- Syringe Services Programs (SSPs)
- Syndemic Theory (behavioral, social, structural factors)
 - *Adverse Childhood Experiences (ACE)*
 - *Mental/Behavioral Health*
 - *Substance Use Disorder*
 - *Systemic Racism*
 - *Viral Hepatitis/STIs*
 - *Incarceration*



Frequently Asked Questions

When will there be an HIV vaccine?



Frequently Asked Questions

What's the latest on long-acting injectable HIV medications?



Frequently Asked Questions

I heard that the US wants to end the HIV Epidemic by 2030. Without a cure, how is that possible?



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