Treatment as prevention

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 What potential impact will TasP have on adherence, virological failure and resisatnce?

HPTN 052 Trial

	CD4 T cell at ART initiation (median)	Adherence (>95%)	Virological failure
Early Therapy	442 (373-522)	79%	5% (45/886)
Delayed therapy	<250	74%	3% (5/184) p:0.23

Cohen M et al NEJM 2011, 365: 493-505

Factors impacting on adherence:

- Perception of personal need for ART (necessity beliefs)
- Concerns about ART including side effects
- Confidence in ability to adhere
- Psychological issues (depression)
- Socioeconomic issues (poverty, housing, immigration status)

BHIVA Adult treatment guidelines 2012: Treatment to reduce transmission

- The decision to start ART is the patient's choice and must not be due to the pressure from partners or others.
- For a patient with a CD4 count above 350 cells/μL, it is uncertain whether any benefits of immediate treatment to their own health will be outweighed by any harm.
- There are risks associated to interrupting ART, once started, should generally continued indefinitely.
- High and consistent adherence to ART is required to maintain viral suppression and minimise transmission risk.

Bhiva.org/guidelines