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## HIV CLINICAL MONITORING IN THE SOUTHERN REGION OF BRAZIL

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### INTRODUCTION

In Brazil, clinical care cascade monitoring has become an essential tool to verify and evaluate the policies of HIV (human immunodeficiency virus) care and treatment. The cascade is also an important instrument to assess the achievement of the 90-90-90 targets (90% of people living with HIV/AIDS (PLHIV) diagnosed; 90% of diagnosed people on antiretroviral therapy (ART); and 90% of people on ART with suppressed viral load (VL) adopted in the country. In 2013, the Ministry of Health recommended dispensing ART for all diagnosed HIV+ individuals in order to reach fully suppressed viral loads and epidemic reduction. However, important hotspots can still be found, mainly in the southern region of the country. This study evaluates the care cascade in the most epidemic region in Brazil in order to identify the main gaps negatively affecting viral suppression among PLHIV.

### MATERIAL AND METHODS

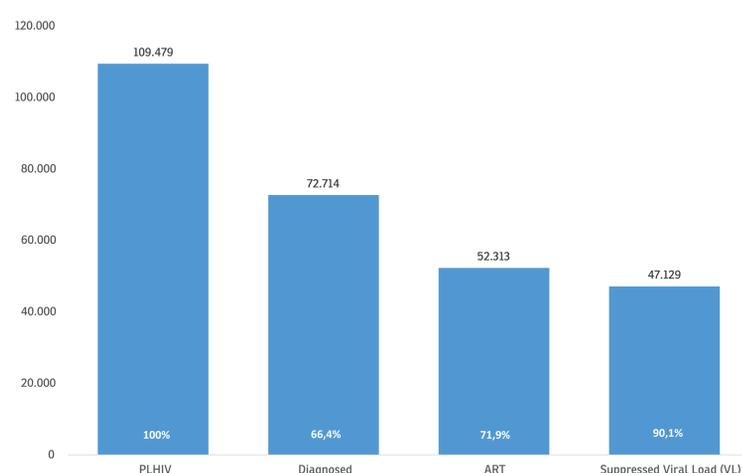
Individual case data were obtained from crossing the two official databases related to ART dispensation and laboratory results of CD4, CD8 and VL counts, conducted by the public health system. The data for PLHIV who had at least one VL or CD4 counts or ART dispensation in 2016 were analyzed. The cascade phases were estimated: 1. Linked patients (those who had at least one VL or CD4 counts, or ART dispensation); 2. Retention in care (defined as those who had at least two VL or CD4 counts, or had an ART dispensation in the last 100 days of 2016); 3. On ART (defined as having at least one ART dispensation in the last 100 days of 2016); and 4. VL suppression (VL <1,000 copies/mL).

### RESULTS

It is estimated that there are approximately 110,000 people living with HIV in the state of Rio Grande do Sul. Of these, only 73,000 (66.4%) have been diagnosed; out of this diagnosed population, 52,000 (71.9%) are on antiretroviral therapy; and 47,000 (90.1%) of these already have suppressed viral loads. In order to achieve the 90-90-90 goals, Rio Grande do Sul needs to diagnose over 23.6% of PLHIV and ensure that over 18.1% of the diagnosed patients start antiretroviral therapy.

### CONCLUSION

Findings show that the low number of diagnosed cases is a frailty in the state of Rio Grande do Sul, and indicate that HIV testing is not being widely offered to the population. This means missing an important opportunity to obtain the early diagnosis of HIV+ people in the state. The levels of ART coverage are also low, considering that only 60% of estimated cases have been diagnosed and, out of these, only 71% are on ARV therapy.



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