

## MONITORING TREATMENT GAP OF HIV IN BRAZIL: A NATIONAL PUBLIC SYSTEM TO SURVEILLANCE HEALTH CARE FOR PLHIV

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### BACKGROUND

Brazil has been implementing the Clinical Monitoring System of People Living with HIV (SIMC) since 2013, the same year the country adopted test and treat strategy as a free of charge public policy. Nowadays, SIMC monitors people living with HIV (PLHIV): 1) without antiretroviral therapy (ART), 2) lost to follow-up (>100 days without antiretroviral delivery) and 3) who have detectable viral load despite ART. It remains an important tool to manage the process of continuous care of PLHIV and develop national efforts to scale up early treatment of HIV patients in partnership with municipalities and states.

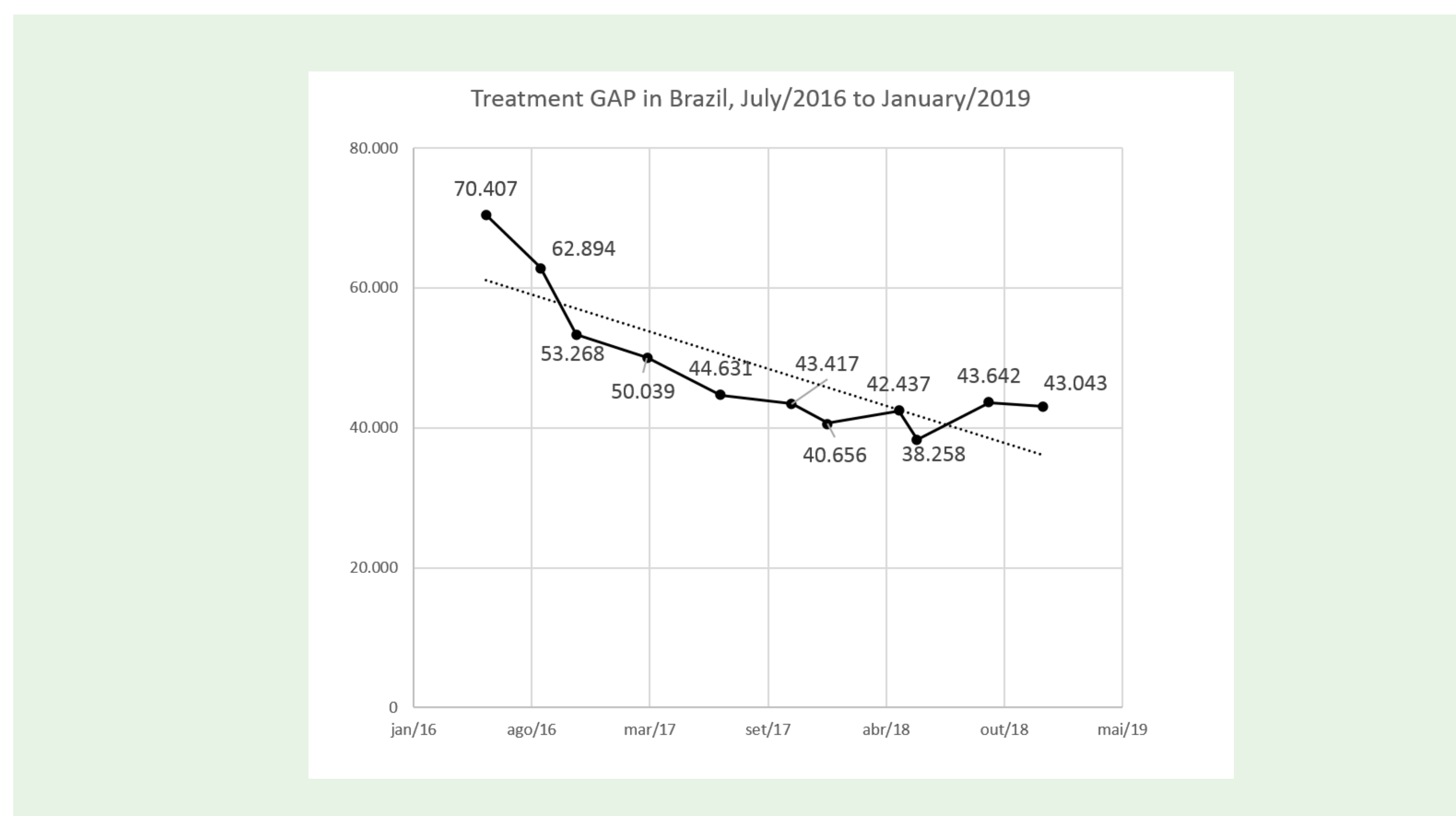
### MATERIALS AND METHODS

A cross-sectional study was carried out to observe the tendency of the number of PLHIV without ART (treatment gap). The study population was PLHIV with viral load results (>50 copies/ml), and without antiretroviral delivery. The database was the SIMC; it realises data crossing from National Laboratory Test Control System (SISCEL) and National Antiretroviral Delivery Control System (SICLOM).

### RESULTS

Between January 2014 and January 2019, 193,654 PLHIV who had not started ART were identified by SIMC. Most of them, 159,191 cases, were analysed, 141,961 patients were located and started treatment over the period, and 43,043 were not found out yet by health teams and hadn't started ART. Between July 2016 and January 2019, 27,364 PLHIV left treatment gap and started ART (Figure 1).

**Figure 1 - PLHIV in treatment GAP, Brazil, July/2016 to January/2019.**



### CONCLUSIONS

Despite Brazil's intensified HIV testing and treatment efforts, PLHIV remain diagnosed without treatment. Maintaining HIV surveillance is recommended to strengthen tools such as SIMC to improve healthcare for PLHIV, creating conditions to move toward 90-90-90 targets for HIV and eliminate AIDS epidemic until 2030.

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