BRAZILIAN CHALLENGE: REDUCTION OF THE TIME BETWEEN FIRST CD4+ AND EARLY ART

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BACKGROUND

In 2017, 42,420 new cases of HIV and 37,791 cases of AIDS were diagnosed in Brazil. Despite the adoption of treatment for all in 2013, early diagnosis and treatment of HIV remain as challenges in the country. In order to evaluate the access and quality of the PLWHIV care, it is proposed to evaluate the time between the first CD4+ test and the initiation of ART.

MATERIALS AND METHODS

Included in this study are all the PLWHIV who had at least one CD4 test within the criteria for eligibility of ART defined for each year: 2009-2012, ≤350 cells/mm³; 2013, ≤500 cells/mm³, and 2014-2018, was adopted ‘treatment for all’. The measurement used: (data of first dispensation) - (data of first request for CD4+). Period of analysis is 01/2009 to 09/2018.

RESULTS

Analyzing the time between the first CD4+ and the beginning ART, over the years (2009-2018), there are periods of falling with oscillations. In 2009, when Brazilian protocol recommended the initiation of therapy by individuals with CD4 ≤350 cells/mm³, 38% diagnosed PLWHIV started ART after 6 months since first CD4+. In this period there was a significant increase number of PLWHIV who started treatment less than one month, 29% in 2009 and 51% in 2018 (1) (Figure 1).

CONCLUSIONS

Despite the gradual improvement of the indicators analyzed in PLHIV aged 18-24, it is essential to strengthen actions directed to this age group, to increase access to health services and to ensure linkage and retention of young people, directly impacting on quality of life.

REFERENCE: