



POSTER PRESENTATION

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Our experience in second line Anti Retroviral Therapy (ART) At State Aids Clinical Expert Panel (SACEP) Clinic, Centre of Excellence (CoE), Art Centre, B. J. Medical College, Civil Hospital, Ahmedabad

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Background

To share our experience in second line Anti Retroviral Therapy (ART) at State AIDS Clinical Expert Panel (SACEP) Clinic, Centre of Excellence (CoE), ART Centre, B. J. Medical College, Civil Hospital, Ahmedabad, Gujarat, India.

Methods

First line treatment failure Patients (as per Indian National ART Guidelines) were referred to SACEP Clinic for further evaluation and if eligible as per Indian National 2nd Line ART Guidelines; enrolled and followed up for initiation of 2nd Line ART at our institute.

Table 1

Parameter		Outcome	
Total Patients referred to SACEP		127	
Patients Eligible and referred for Plasma Viral Load (PVL) (n = 127)		122(96.06%)	
Patients recommended 2 nd Line ART after PVL (n = 122)		75(61.47%)	
Patients initiated Free 2 nd Line ART (n = 75)		69(92.0%)	
Patients under follow up TB Treatment/Counseling to initiate 2 nd Line ART		6	
Adherence Counseling for 2 nd Line ART Patients (n = 69)		69(100%)	
Undetectable PVL (<400 copies/ml) after 6 months of 2 nd Line ART (n = 28)		24	
Therapeutic Success according to Undetectable PVL (24/28)		85.74%	
No. of Death after initiation of 2 nd Line ART (n = 69)		8(11.59%)	
Death Analysis	Cause of Death	WHO Stage/PVL/CD4 n = 8	
	Accidental	T3/560459/17	1
	Renal Failure	T3/208048/230	1
	Malignancy	T4/384469/38	1
	Opportunistic Infections (OIs)	T3/46453/67	4
		T4/507495/26	
		T4/1166325/32	
		T4/289375/21	
Unknown Reason	T3/4095718/29	1	

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Results

Provision of Free 2nd Line ART to People Living with HIV/AIDS (PLHA) Program by National AIDS Control Organization (NACO), India was started in November, 2008 under SACEP Clinic for Gujarat and Rajasthan PLHAs. Till October 2009 total 127 1st Line ART Failure patients were referred to SACEP Clinic, Table 1.

Discussion

Switching to 2nd Line ART based on Immunological Failure, Clinical Failure is not recommended; as out of 122 PLHAs analyzed only 75 PLHAs have Virological Failure. Adherence Counseling for 2nd Line ART helps quite in reduction of PVL. Deaths analysis shows that late switch to 2nd Line ART at CD4 < 100 cells/mm³ may not result in desired therapeutic goals.

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