

Final recommendations

**WHO Paediatric Guideline Group meeting
Geneva, SWITZERLAND
Salle D
10 - 11 April 2008**

When to Test

Population	HIV-exposed infants	HIV exposure unknown well infant	Well infant UNK EXP Specified settings	Any signs/symptoms
Reco	Virological testing at 4-6 weeks of age	Ask all about Infant HIV exposure	Ensure Infant/maternal testing in first 6 weeks at first contact with health system	Age appropriate test for all as in WHO PITC
Strength	STRONG	STRONG	CONDITIONAL (ANC prevalence 1% >and other select settings) (Describe in text)	STRONG

Recommendations - When to Start ART

POPULATION	< 12 mo Confirmed HIV	≤ 12 mo Presumptive *	1- 4 yrs	≥ 5yrs
START ART	All with confirmed HIV regardless of clinical/CD4	All	clinical or immunological criteria	clinical or immunological criteria
Strength of Recommendation	Strong	Strong (Time limited based on performance of algorithms)	Strong	Strong

*If lack ability for viral test, use WHO presumptive diagnosis of HIV – with clinical sx or low CD4 – allows initiation ART based on presumptive dx and stop if found uninfected.

TEXT ONLY - Well infant diagnose late may defer initiation base don CD4/VL

Recommendations – What to start ART

POPULATION	<u>Up to 12 months</u>	1- 4 yrs	≥ 5
START ART	<ul style="list-style-type: none"> •PMTCT/NVP exposure : PI-regimen * •No PMTCT exposure : NVP-regimen 	NVP/EFV+ 2NRTI	NVP/EFV+ 2NRTI
Strength of recommendation	Strong	Strong	Strong

TEXT

- *3NRTI +NVP, other approaches need research before can be recommended, what to do where NO PI or no cold chain, i.e., no choice use standard NVP
- Need for research on new strategies in MTCT exposed
- Risks of NVP resistance from any NVP containing ART or MTCT regimens, esp in BF mothers

Dosing

- Approve the work tables and tools and recommendations to date
- Request group to urgently review dosing for < 6 months < 5kg esp for Lop/r and NVP
- EFV data forthcoming

New formulations

- Lop/r sprinkles
- see group C powerpoint

Research/key issues

- See ppt summaries
- Treatment approaches PMTCT failure
- Lop/r PK
- Rifabutin
- Early cotrim
- Care package for infants initiating
- EID operational components
- Retesting strategies

Format and figures of revised recommendations

- short recommendation summaries with evidence tables /summaries and figures made available ASAP

(asked to take to IMPLEMENTERS/MEXICO)

- Short meeting report (first draft circulated by 25th April)
- Explore/Use new WHO ready to print service
- Would like the summary guideline updated

Dissemination

- WHO Web site -notice of meeting and decision
- Request presentations at upcoming- Implementers and Mexico
- Note to all country WR/CO to update them on changes
- Note to GFTAM- ensure TRP considers in Round 8
- Establish small standing committee to communicate regularly and determine need for other review

Other WHO ART/Care recommendations for review

- TB/ART in babies
- EFV for <3
- Switch/failure
- BCG
- INH prophylaxis
- Early cotrim
- Hepatitis in children

Tools/actions required

POC diagnostics,

Dosing charts updated & modified

RNA price negotiations

Clarification of uncertainty relating to RNA
DBS

TB diagnostics/drugs for children

lower pricing 2nd line

Thank You

- Chair-Dr. Agnes Mahomva
- All Presenters
- Meeting participants
- TRG members preparing evidence summaries (Mofenson, Abrams, Gibb and others)
- CHER study team for preparatory discussions
- Martina Penazzato & Sally Girvin
- Victoria Anagbo
- ATC and HIV dept staff
- Regional offices
- AFRO RO RPA admin team

Docs all at

<ftp://ftp.who.int/pub/Outgoing/Ped%20ART%20Meeting%20docs/>

HIV web site