



FACT SHEET AUGUST 2006

NEW WHO GUIDELINES ON CLINICAL AND IMMUNOLOGICAL STAGING FOR HIV DISEASE

All WHO fact sheets, press releases, features and other information on HIV/AIDS can be found on <http://www.who.int/hiv/toronto2006>

HIV CASE DEFINITIONS FOR SURVEILLANCE

Expanded access to antiretroviral therapy (ART) in resource-limited settings has called for a re-examination and standardization of surveillance and reporting definitions for HIV infection. Estimation of treatment burden depends largely on HIV surveillance, and is necessary to enable governments in their health care planning. To date, most countries have focused their attention on AIDS case surveillance; however, it alone does not provide a comprehensive picture of disease burden.

In order to better facilitate accurate planning and programming, simplified and standardized definitions of HIV infection applicable in resource-limited settings are necessary. As no such WHO definition previously existed, WHO has now revised the guidelines on HIV case surveillance to include a definition of HIV infection, and provided a definition of advanced HIV (including AIDS) to reflect symptomatic HIV-related disease. In addition, efforts have been made to harmonise the surveil-

lance definitions with the classification of HIV-related disease discussed below.

CLASSIFICATION OF HIV-RELATED DISEASES

In order to improve clinical management, a simple standardized means of classifying HIV is necessary. To that end, WHO's revised clinical staging and immunological classifications have been revised, with the intention of being usable in resource-constrained settings where there is limited laboratory capacity.

The revised guidelines highlight the following aspects of clinical and immunological classification of HIV infection in adults and children:

- clinical assessment prior to and during treatment
- immunological assessment in children and adults
- standard definitions of presumptive diagnosis and definitive diagnosis for each condition

These guidelines will be of use to governments and policymakers seeking to improve ART access in resource-limited settings, and for programme planners and managers designing and implementing services for HIV infection therapy in resource-limited settings.
