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Contact: Sindhu Ravishankar, MPhil
sravishankar@iapac.org

IAPAC Guidelines on Optimizing the HIV Care Continuum Recommend ‘Test and Start’ Irrespective of CD4 Count

PARIS (September 30, 2015) – The International Association of Providers of AIDS Care (IAPAC) today announced its *Guidelines for Optimizing the HIV Care Continuum for Adults and Adolescents*, among whose 36 evidence-based recommendations is the immediate offer of antiretroviral therapy (ART) to people who are diagnosed as HIV positive, irrespective of CD4 count.

IAPAC President/CEO José M. Zuniga, PhD, MPH, stressed the urgency of demanding rapid uptake of the “test and start” recommendation in order to ensure that millions of people living with HIV (PLHIV) previously denied ART can finally benefit from ART’s therapeutic and preventive benefits. According to HIVPolicyWatch.org, only nine countries around the world currently recommend “test and start.” In fact, 42 countries currently recommend ART at the 2013 World Health Organization (WHO) initiation CD4 count threshold of <math><500\text{ cells/mm}^3</math>, and 47 other countries recommend pre-2013 thresholds of <math><350</math>, <math><300</math>, <math><250</math>, or <math><200\text{ cells/mm}^3</math>.

“Ending AIDS as a public health threat by 2030 – a goal contained in the Sustainable Development Goals (SDGs) announced last week at the United Nations General Assembly – requires that we use every tool at our disposal, including life-saving and -enhancing ART, without further delay,” said Zuniga. “With the science and evidence-based normative guidance firmly behind us, we have a moral obligation to achieving the end of AIDS by leveraging the therapeutic and preventive effects of ART to make AIDS-related deaths and new HIV infections exceedingly rare.”

Michel Sidibé, MEcon, Executive Director of the Joint United Nations Programme on HIV/AIDS (UNAIDS) applauded the new IAPAC guidelines for recommending immediate access to ART irrespective of CD4 count upon an HIV-positive diagnosis, as well for offering guidance about optimizing the delivery of a full range of services across the HIV care continuum.

“UNAIDS applauds the initiative of IAPAC to develop and release their new *Guidelines for Optimizing the HIV Care Continuum for Adults and Adolescents* in their effort to provide guidance to service providers,” said Sidibé. “The scientific evidence is clear – ensuring people diagnosed with HIV have immediate access to antiretroviral medicines gives people the opportunity to lead healthier lives and achieve viral suppression. Immediate access to ART will also help us reach our prevention and treatment goals, putting us on the fast-track to ending the AIDS epidemic by 2030.”

The IAPAC guidelines offer recommendations for increasing testing, linkage to care, ART coverage, retention in care, and viral suppression. Moreover, key populations are covered through guidance related to their care, and a new metric is proposed to monitor the continuum in a way that could harmonize its measurement across geographies and jurisdictions. The guidelines will be formally presented later this week at IAPAC’s [Controlling the HIV Epidemic with Antiretrovirals Summit](#) in Paris.

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Ambassador Deborah L. Birx, U.S. Global AIDS Coordinator, who leads implementation of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), praised the IAPAC guidelines, saying that they reflect a balanced approach to attaining meaningful increases in the numbers of people who are tested for HIV, linked to care, started on ART if diagnosed to be HIV positive, and assisted to achieve and maintain long-term viral suppression.

“PEPFAR is pleased with the release by IAPAC of its new guidelines, the *IAPAC Guidelines for Optimizing the HIV Care Continuum for Adults and Adolescents*. Guidelines like these can be very helpful in the fight against HIV and AIDS. We support recommendations such as the immediate offer of ART to people who are diagnosed as HIV positive, called ‘Test and START.’ There is no time to lose. PEPFAR is already moving forward quickly with Test and START programs to help reach our newly announced treatment targets for 2016 and 2017. We must accelerate all momentum and capture the opportunity to end AIDS as a public health threat.”

The IAPAC guidelines were developed by an International Panel of HIV Care Continuum Optimization, which was co-chaired by Linda-Gail Bekker, MBChB, FCP, PhD (University of Cape Town, South Africa); Julio Montaner, MD (British Columbia Centre for Excellence in HIV/AIDS, Vancouver, BC, Canada); Celso Ramos, MD, MSc (Federal University of Rio de Janeiro, Brazil); and Renslow Sherer, MD (University of Chicago, IL, USA). The guidelines have been accepted for publication in the [Journal of the International Association of Providers of AIDS Care \(JIAPAC\)](#).

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The International Association of Providers of AIDS Care (IAPAC) represents more than 20,000 clinicians and lay providers worldwide. IAPAC advances advocacy, educational, research, and technical assistance activities in more than 100 countries. Please visit www.iapac.org for more information about IAPAC's global activities.