

Eligibility Criteria for Antiretroviral Therapy Expanded: World Health Organization Aims for a Better Future for People Living with HIV

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Dear Editor,

Globally, over the last three decades, human immunodeficiency virus (HIV) has been a major public health concern [1]. HIV has achieved this status not only because of the number of infected patients (almost 37 million people are living with HIV), but also owing to stigma attributed to the disease and associated morbidity/mortality [1,2]. In fact, since its emergence, HIV has claimed more than 34 million lives worldwide [1].

The above estimates clearly suggest that the policy makers, administrators, health professionals, and other stakeholders need to do more than the availability of rapid diagnostic kits and preventive measures including anti-retroviral treatment (ART) [1]. From the global perspective, only 40% of the people living with HIV are on ART, which indicates a major gap between the health system and those who actually need care and support [1,3].

The World Health Organization (WHO) has made two major recommendations to minimize the burden of the disease and its associated consequences in the coming years [4]. First, any person of any age who is diagnosed with HIV infection should be immediately started on ART irrespective of CD4 count [4]. This recommendation is based on the evidence summarized in systematic reviews that any untreated HIV infection is associated with dysfunction of different body organs and systems, and that early initiation of ART can significantly improve survival, and minimize the risk of transmission of the virus to their partners [3]. Second, prophylactic ART is recommended for uninfected people who are at high risk of acquiring HIV infection [5]. This recommendation is based on the efficacy of the drug tenofovir for pre-exposure prophylaxis (PrEP) in heterogeneous settings and covering different groups of population [4]. However, this PrEP should only be considered as an additional preventive measure to other existing measures (awareness, counselling, and support, access to

condoms/safe injection needles, etc.) [4,5]. We believe that these two recommendations, if fully implemented, will help in controlling the HIV epidemic.

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Conflict of Interest: None declared

This article has been peer reviewed.

Article Submitted on: 20th January 2016

Article Accepted on: 10th May 2016

Funding sources: None declared

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Cite this article: Shrivastava SRBL, Shrivastava PS, Ramasamy J. Eligibility criteria for antiretroviral therapy expanded: World Health Organization aims for a better future for people living with HIV. *J Pioneer Med Sci.* 2016; 6(3): 77