HIV TREATMENT

MEETING REPORT

WHO THINK-TANK MEETING ON OPTIMIZING ANTIRETROVIRAL THERAPY

12 MARCH 2020

World Health Organization

MEETING REPORT

WHO THINK-TANK MEETING ON OPTIMIZING ANTIRETROVIRAL THERAPY

12 MARCH 2020

World Health Organization

WHO Think-tank Meeting on Optimizing AntiRetroviral Therapy: meeting report, 12 March 2020

ISBN 978-92-4-001637-8 (electronic version)
ISBN 978-92-4-001638-5 (print version)

Suggested citation. WHO Think-tank Meeting on Optimizing AntiRetroviral Therapy: meeting report, 12 March 2020. Geneva: World Health Organization; 2020. Licence: CC BY-NC-SA 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at http://apps.who.int/iris.

Sales, rights and licensing. To purchase WHO publications, see http://apps.who.int/bookorders. To submit requests for commercial use and queries on rights and licensing, see http://www.who.int/about/licensing.

CONTENTS

INTRODUCTION

The WHO Think-tank Meeting on Optimizing Antiretroviral Therapy was held on 12 March 2020 virtually via teleconference because of the ongoing COVID-19 pandemic. Since 2019, WHO has recommended a fixed-dose combination of tenofovir disoproxil fumarate (TDF), lamivudine and dolutegravir (DTG) (TLD) as the preferred first-line regimen for people initiating antiretroviral therapy. As a preferred alternative option, low-dose efavirenz (EFV 400 mg) is being offered as an alternative to dolutegravir. DTG is also recommended in second-line antiretroviral therapy for treating individuals for whom a non-nucleoside reverse-transcriptase inhibitor (NNRTI) or a protease inhibitor–based first-line regimen has failed *(1)*.

As of 2019, more than 100 countries had begun the process of scaling up antiretroviral therapy with DTG *(2)*. Following the 2018 WHO interim recommendations and the 2019 update on guidance for use of DTG-based regimens in first- and second-line treatment, progress has been made in understanding the safety and efficacy of its use in all populations, including pregnant women *(3)*. There are also additional data on newer agents such as tenofovir alafenamide (TAF). However, with increased scale-up and longer exposure to DTG, countries reported several clinical and implementation challenges to WHO that ongoing studies also described. WHO organized a think-tank meeting to help to define and identify the most important questions that need answering to ensure the safety of new antiretroviral drugs, prevent interruption of treatment during the scale-up of HIV treatment programmes, and identify critical gaps in knowledge.

APPROACH

The key considerations for this think-tank meeting included emerging cardiometabolic effects that have been associated with newer antiretroviral drugs, new data on safety and efficacy in pregnancy and community perspectives on newer antiretroviral drugs – such as weight gain, cardiovascular risk and tolerability of regimens. Another important consideration was the transition of people who are stable from TLE (TDF + lamivudine + efavirenz (400 or 600 mg) to TLD in countries that are beginning to scale up DTG use. This is especially important in countries that have experienced increased population-level pretreatment NNRTI resistance *(4)*.

Updates on ongoing and planned clinical trials and observational studies were provided to inform the discussions. Representatives of the community of people living with HIV shared their experiences and perspectives with new HIV treatments. The overall approach was to support the public health approach *(5)*, intended for use in HIV programmes in low- and middle-income countries.

OVERVIEW OF SESSIONS

The virtual meeting was divided into four thematic sessions:

- update on new antiretroviral drug–related toxicity
- update on the safety of new antiretroviral drugs in pregnancy
- community perspectives on the safety of new antiretroviral drugs
- update on TLE to TLD transition approaches for stable people living with HIV.

Participants

The meeting brought together more than 70 experts, including academic experts, clinicians, civil society representatives, nongovernmental organizations, national AIDS programme managers, regulatory agencies, implementation partners and donor agencies including the Clinton Health Access Initiative, United States President's Emergency Plan for AIDS Relief, Global Fund to Fight AIDS, Tuberculosis and Malaria, Bill & Melinda Gates Foundation, United States Agency for International development and Unitaid.

WHO was represented by staff members from the Department of Global HIV, Hepatitis and STI Programmes and from regional and country offices.

Expected output

The key expected outputs of the meeting were:

- priority questions for research on the safety and efficacy of new antiretroviral drugs and transitioning to new regimens;
- ongoing trials and studies that are addressing priority questions and timeline for new evidence; and
- current gaps and priority areas for new research.

An online survey was also conducted with the experts to ensure that the meeting report reflects their opinions. A synopsis of the results of the poll are part of this meeting report.