## **Integrated Management of Childhood Illness (IMCI)**

# Manual on Paediatric HIV Care and Treatment for District Hospitals



Departments of Child and Adolescent Health and Development (CAH) and HIV/AIDS

# Manual on Paediatric HIV Care and Treatment for District Hospitals



WHO Library Cataloguing-in-Publication Data:

Manual on paediatric HIV care and treatment for district hospitals: addendum to the Pocket book of hospital care of children.

1.HIV infections - therapy. 2.Acquired immunodeficiency syndrome - therapy. 3.Disease management. 4.Antiretroviral therapy, Highly active 5.Child, Hospitalised. 6.Practice guidelines. 7.Manuals. 8.Developing countries. I.World Health Organization. II.Title: Pocket book of hospital care of children.

(NLM classification: WC 503.6)

ISBN 978 92 4 150102 6

### © World Health Organization 2011

All rights reserved. Publications of the World Health Organization can be obtained from WHO Press, World Health Organization, 20 Avenue Appia, 1211 Geneva 27, Switzerland (tel: +41 22 791 3264; fax: +41 22 791 4857; email: bookorders@who.int). Requests for permission to reproduce or translate WHO publications — whether for sale or for noncommercial distribution — should be addressed to WHO Press, at the above address (fax: +41 22 791 4806; email: permissions@who.int).

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either express or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use.

Printed in Geneva

## **Table of Contents**

De	velop	oment process	1	
Ac	know	/ledgements	2	
Int	rodu	ction to manual	3	
PΑ	RT I:	Common childhood illnesses and opportunistic infections		
in	HIV-e	exposed and infected children	5	
	0	ale and PCC and by how at the con-		
1.		gh or difficulty breathing	6	
	1.1	Approach to cough and difficulty breathing for HIV infected	6	
	1.2	Differential diagnosis table	7	
	1.3	Pneumonia	8	
	1.4	PCP	8	
	1.5	Lymphoid Interstitial Pneumonitis (LIP)	10	
	1.6	Pulmonary TB infection	11	
	1.7	Bronchiectasis	14	
	1.8	Cytomegalovirus (CMV) Infection CMV	15	
2.	Diar	Diarrhoea and other gastrointestinal problems in HIV-infected children		
	2.1	Diarrhoea	18	
		2.1.1 Persistent diarrhoea in HIV-infected children	18	
		2.1.1.1 Empiric Management	20	
	2.2	Hepatitis in HIV infected children	22	
		2.2.1 ARV related hepatitis	23	
		2.2.2 HIV and Hepatitis B and C co-infections	24	
3.	Feve	er in HIV-infected children	28	
	3.1	Approach to fever in an HIV-infected child	28	
	3.2	Sepsis	33	
4.	Malı	nutrition, anaemia and other haematologic conditions	36	
	4.1	Malnutrition		
		4.1.1 Nutrition assessment and support	36	
		4.1.2 ART in severely malnourished children	37	
_	4 2	Anaemia and other haematological manifestations??	37	

PA	RT II:	Paedia	atric HIV care and treatment with ART	43
5.	Intro	oductio	n	44
	5.1	Key di	ifferences between adults and children	44
	5.2	Epide	miology	44
	5.3	Mode	of transmission	44
	5.4	lmmur	nology	45
	5.4	Natura	al history and progression	45
6.	Diag	gnosis	of HIV infection in infants and children	46
	6.1	Early identification of HIV infected infant or child		46
		6.1.1	Infants (<12 months of age)	46
		6.1.2	Children (>12 months of age)	46
	6.2	Diagnosing HIV infection in breastfeeding infants		47
		6.2.1	Signs or conditions that may indicate possible HIV infection	47
		6.2.2	WHO Paediatric Clinical Staging for HIV	48
		6.2.3	Antibody test (ELISA or Rapid Test)	49
		6.2.4	Virological Test (WHO 2010 recommendation)	50
	6.3	Counselling		52
		6.3.1	Provider Initiated Testing and Counselling	53
	6.4	Diagnosing HIV infection in breastfeeding infants		53
		6.4.1	Presumptive diagnosis of severe HIV disease in infants and children aged under 18 months where viral testing is not available	53
		6.4.2	Diagnosing HIV infection in breastfeeding infants	54
		6.4.3	Diagnosing HIV infections when mother or infant has received ARVs for PMTCT	54
7.	Routine care for HIV-exposed and infected infants and children			59
	7.1	Immur	nizations	59
	7.2	Proph	ylaxis	60
		7.2.1	Co-trimoxazole preventive therapy starting at 4-6 weeks of age	60
		7.2.2	Isoniazid (INH)	62
		7.2.3	Other prophylaxis	64
	7.3	Nutriti	on	64
		7.3.1	Infant feeding counselling and support	64
8.	Antiretroviral Therapy (ART)			66
	8.1	When	to start for infants and children	66
	8.2	When to initiate ART in HIV-infected infants		66
	8.3	When to initiate ART in HIV-infected children		66
		8.3.1	Clinicalic criteria for eligibility for ART	67
		8.3.2	Clinicalic criteria for eligibility for ART	67

		10.1.1	Assessment of pain in children	99
	10.1		nition and assessment of pain	99
10.			gement in HIV-infected children	99
	9.5	Manag	gement of a severely malnourished child with HIV infection	98
	9.4	Steps	for assessing child feeding and counselling the caregiver	96
	9.3	Increa	sed energy requirements of HIV-infected children	94
		9.2.1	Stopping breastfeeding	93
	9.2	Prever	ntion of mother-to-child-transmission of HIV via breastfeeding	91
	9.1	Specia	al considerations for HIV infection	91
9.	Nutr	itional	support	91
	8.10	Choice	e of second-line regimens in the event of treatment failure	90
			8.9.2.2 Immunological definition of treatment failure	86
			8.9.2.1 clinical definintion of treatment failure	85
		8.9.2	Defining treatment failure	85
		8.9.1	First-line regimen treatment failure; when to switch regimens	85
	8.9	Substi	tuting grugs because of toxicity in infants and children	83
	8.8	IRIS: ir	nflammatory immune reconstitution syndrome	83
	8.7	ARV d	rugs toxicity	80
	8.6	Adhere	ence	77
		8.5.2	Routine laboratory monitoring of children on ART	76
		8.5.1	Routine clinical monitoring of children on ART	76
	8.5	Clinica	l and laboratory monitoring	76
		8.4.4	Second-line regimens	76
		8.4.3	Alternative regimen restricted to special circumstances	73
			8.4.2.3 Choice of a first-line regimen for children	72
			8.4.2.2 Infants exposed to nevirapine	72
			8.4.2.1 Infants with no exposure to NNRTIs	72
-		8.4.2	Choice of a first-line regimen for infants	72
		8.4.1	Paediatric ART regimens	72
	8.4	ART d		71
		8.3.7	Drug formulations and doses for infants and children	71
		8.3.6	Recommended first-line ART regimens for infants and children	71
		8.3.5	Routine clinical assessment of children who are not yet eligible for ART	69
		8.3.4	Assessing the family's psychosocial readiness for ART	69
			presumptive diagnosis of severe HIV disease	68
		8.3.3	Criteria for starting ART in infants and children with	

10.2 Management of pain in children	99
10.2.1 Levels of analgesia	100
11. Disclosure and psychosocial support for children	102
11.1 Disclosure	102
11.1.1 Issues to be considered	103
11.1.2 Disclosure of HIV status to a child according to his/her age	103
11.2 Adherence for treatment	104
11.3 Psychosocial support for HIV-infected children	105
11.3.1 Support for development in HIV-infected children	106
11.3.2 Support for special circumstances	107
11.3.2.1 For children with HIV-infected parents and/or siblings	107
11.3.2.2 Support when an HIV-infected parent or sibling	
is sick or dying	108
11.3.2.3 Additional assistance when a parent or sibling has died	108
Annexes	109

预览已结束,完整报告链接和二维码如下:

https://www.yunbaogao.cn/report/index/report?reportId=5\_28800



