



FMOH

**Expanding Access to Pediatric HIV/AIDS
Care and Treatment in Ethiopia:
*Challenges and Prospects***



ICAP

**Linking pMTCT Services with
HIV/AIDS Treatment**

Dr. Miriam Rabkin
Director, ICAP Clinical Unit

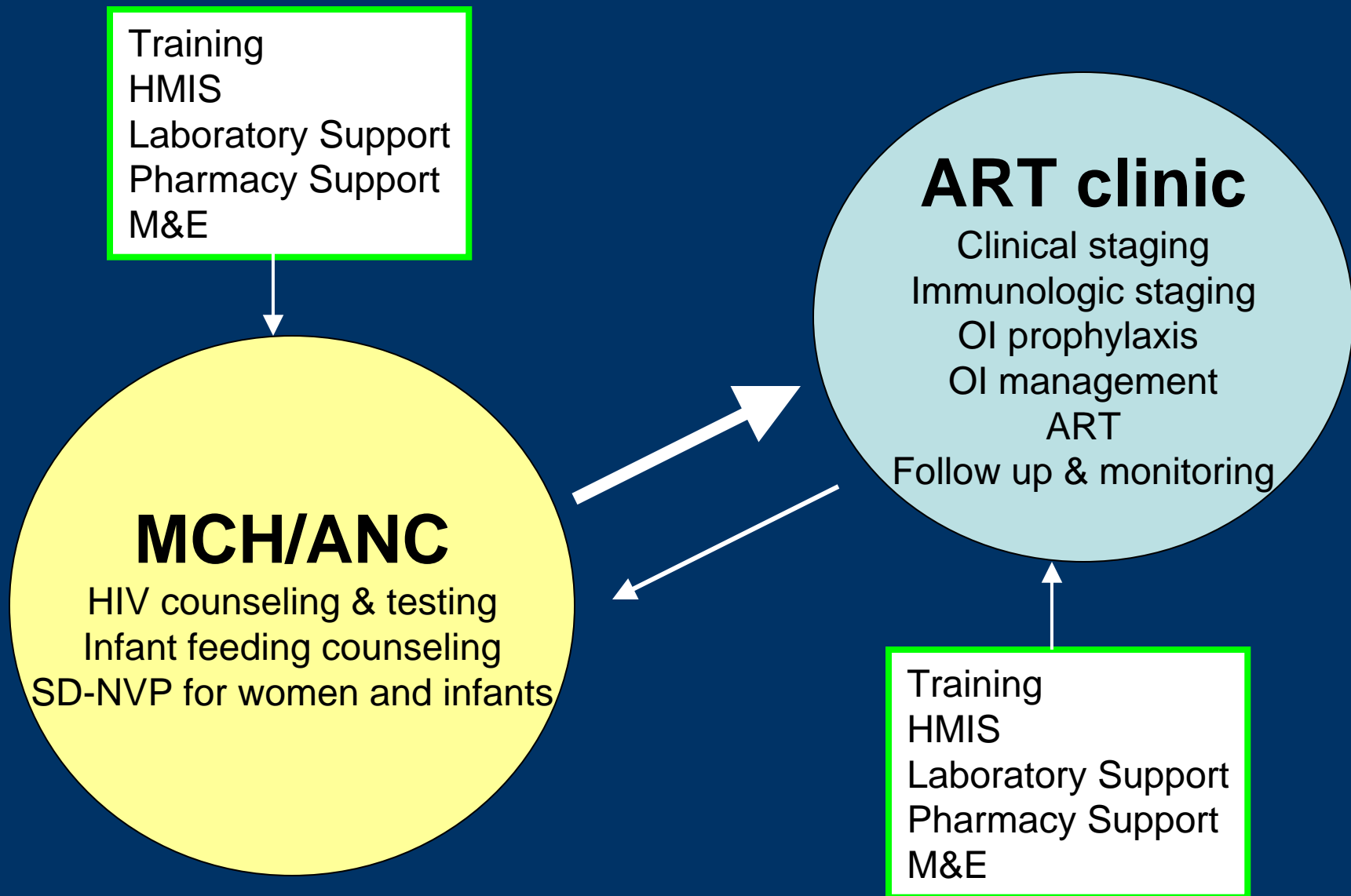
&

Dr. Elaine Abrams
Director, MTCT-Plus

**Addis Ababa, Ethiopia
25-27 January, 2006**

Background

- Notable advances in **pMTCT** are reducing the number of children born with HIV
- Expansion of HIV **care and treatment** services has greatly increased accessibility
- These activities, however, are often parallel programs with little operational overlap or linkages at the site level



**Expanding Access to Pediatric HIV/AIDS Care and Treatment in Ethiopia:
*Challenges and Prospects***

Rationale for Linking pMTCT with Care & Treatment

Effective linkages enhance:

- **Prevention of mother-to-child transmission**
- Women's health
- Infant and child health

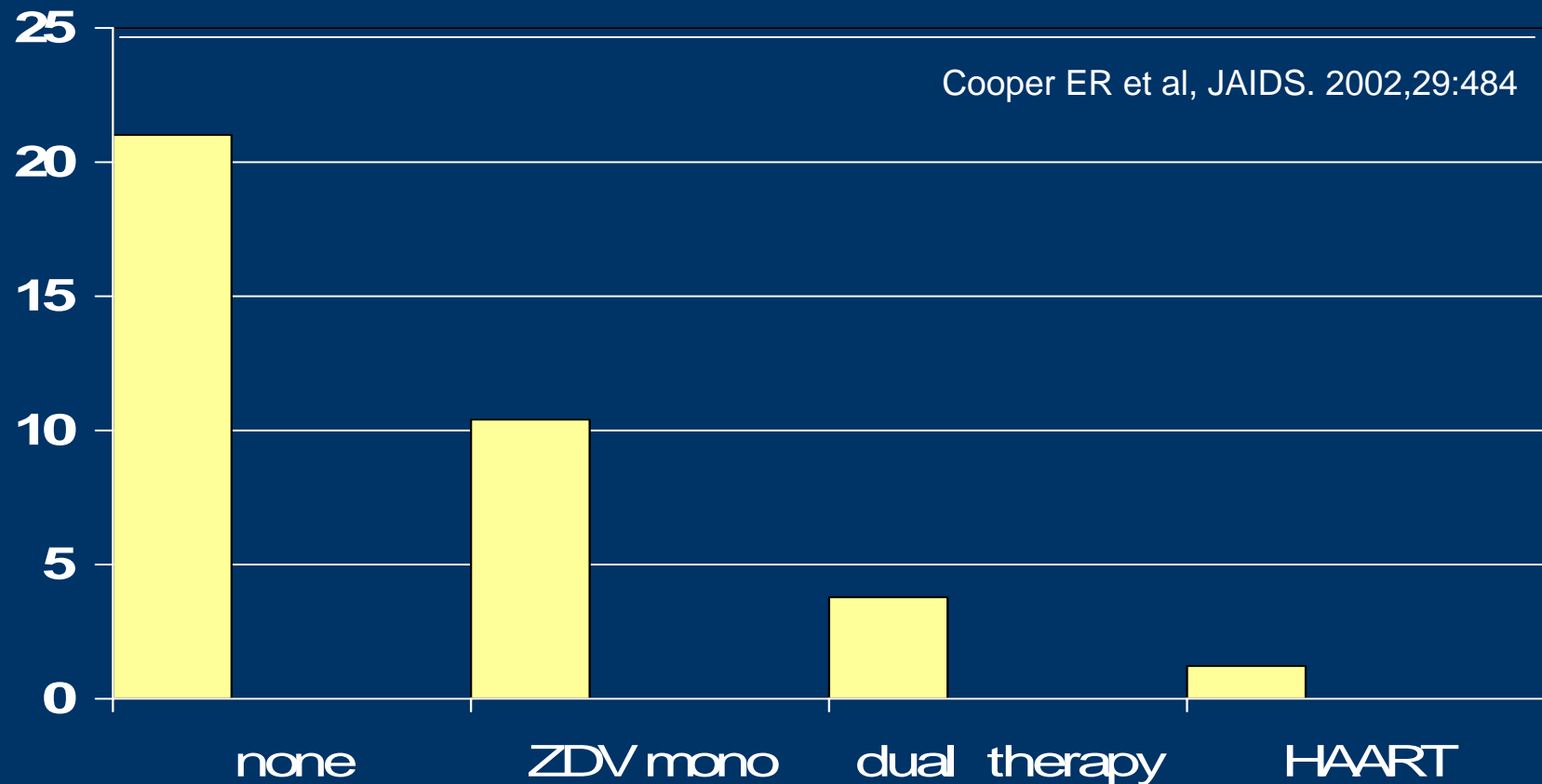
Strengthening pMTCT Interventions

- Women with advanced HIV disease are at highest risk of transmitting HIV to their children during pregnancy, delivery, and postpartum via breast feeding
- The same women are at the highest risk of HIV-related morbidity and mortality, and gain significant benefits from rapid initiation of HAART during pregnancy

Strengthening pMTCT Interventions

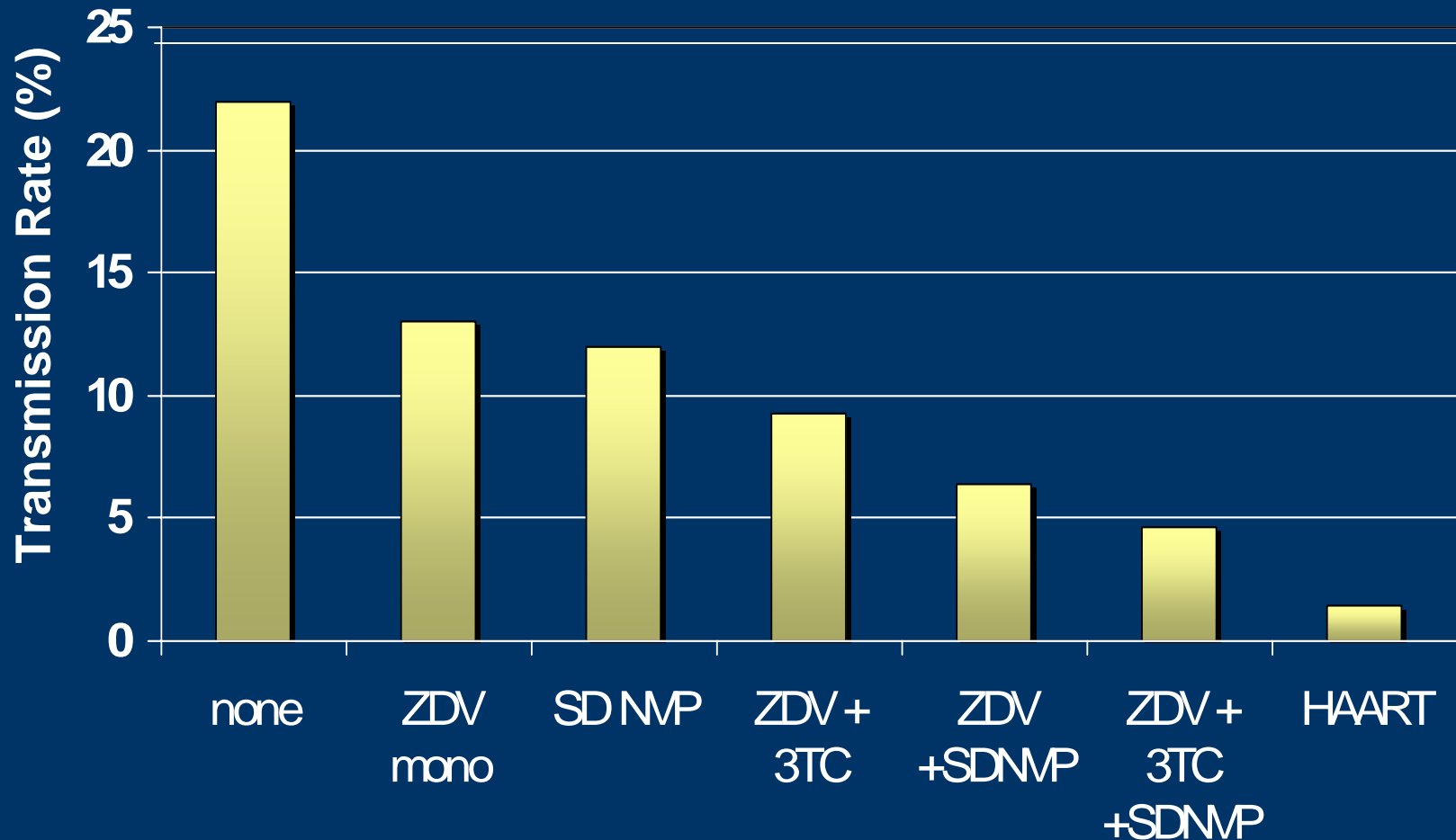
- pMTCT effectiveness can be enhanced by
 - Increasing regimen complexity (>1 drug)
 - Increasing treatment duration
- Approx. 15% of pregnant HIV-infected women are eligible for ART (CD4 \leq 200, or stage IV)
- Putting these women on ART (as opposed to SD-NVP) will decrease their morbidity and mortality, while also decreasing the risk that their infants will be born with HIV.

Antenatal Antiretroviral Treatment and Perinatal Transmission, U.S. 1990-1999



**Expanding Access to Pediatric HIV/AIDS Care and Treatment in Ethiopia:
*Challenges and Prospects***

ARV and Perinatal Transmission Africa, 1995-2004



**Expanding Access to Pediatric HIV/AIDS Care and Treatment in Ethiopia:
*Challenges and Prospects***

Direct Impact on MTCT

Linking pMTCT and HIV care & treatment services, enabling women to access more highly potent ART regimens during pregnancy and postpartum, is a highly effective way to protect large numbers of children from HIV infection

Indirect Impact on MTCT

- In addition to providing ART for women with advanced disease, long-term HIV care services are well positioned to provide
 - Counseling on reproductive health and contraception
 - Help to prevent unintentional pregnancies
- Expanded access to effective HIV treatment services may contribute towards increases in the uptake of counseling and testing services in pMTCT programs.

Challenges:

- Early identification of HIV among pregnant women
 - Community education, mobilization, IEC
 - Routine opt-out testing in ANC
- Rapid clinical and immunologic staging and initiation of ART when eligible
 - Ex: same-day CD4 testing
- Active linkages, not just referrals
 - co-located services, mobile teams

Rationale for Linking pMTCT with Care & Treatment

Effective linkages enhance:

- Prevention of mother-to-child transmission
- **Women's health**
- Infant and child health

Reducing Morbidity and Mortality Among Women

- ANC is among the most widely available primary care services
- pMTCT programs provide a critical venue for the identification of HIV-infected women
 - 10,000 HIV+ women could be identified annually in PMTCT venues in Lusaka, Zambia (Chi et al, 2005)

Reducing Morbidity and Mortality Among Women

- pMTCT programs represent a unique opportunity to engage HIV-infected women in long-term HIV care & treatment
- *Shift in conceptual framework from a single intervention associated with pregnancy to the management of pregnancy within the context of a chronic disease*

Care & Treatment Services

- HAART *when eligible*
- Cotrimoxazole prophylaxis *when eligible*
- Screening and treatment for tuberculosis & STI
- Nutritional counseling and supplementation
- Malaria prophylaxis
- Family planning / reproductive health services
- Secondary prevention
- Counseling and psychosocial support

Rationale for Linking pMTCT with Care & Treatment

Effective linkages enhance:

- Prevention of mother-to-child transmission
- Women's health
- **Infant and child health**

Reducing Morbidity and Mortality Among Infants & Children

- Enhancing pMTCT will have a direct impact on child health
- Preventing maternal mortality will keep families healthy
- Stronger pMTCT programs provide the opportunity to:
 - Identify & engage HIV-exposed infants in care
 - Identify and engage siblings with HIV in care & treatment services

Identification of HIV-exposed Infants

Linkage to care:

- Where child's HIV exposure status is recognized
- Where basic interventions can be provided
 - Cotrimoxazole prophylaxis
 - Growth and disease monitoring
 - Support for infant feeding and nutrition
- Where early diagnosis can be made

Linkage to Comprehensive Services for Children with HIV

- Cotrimoxazole prophylaxis
- HAART
- Monitoring of growth and development
- TB screening & treatment
- MVI, albendazole, immunizations etc.
- Psychosocial support

Summary: Benefits of Linkages

- Further decrease rates of MTCT with use of more potent ART regimens
- Decrease morbidity and mortality in women and children identified through pMTCT programs by engaging them in ongoing HIV-specific care services

Optimizing pMTCT Services

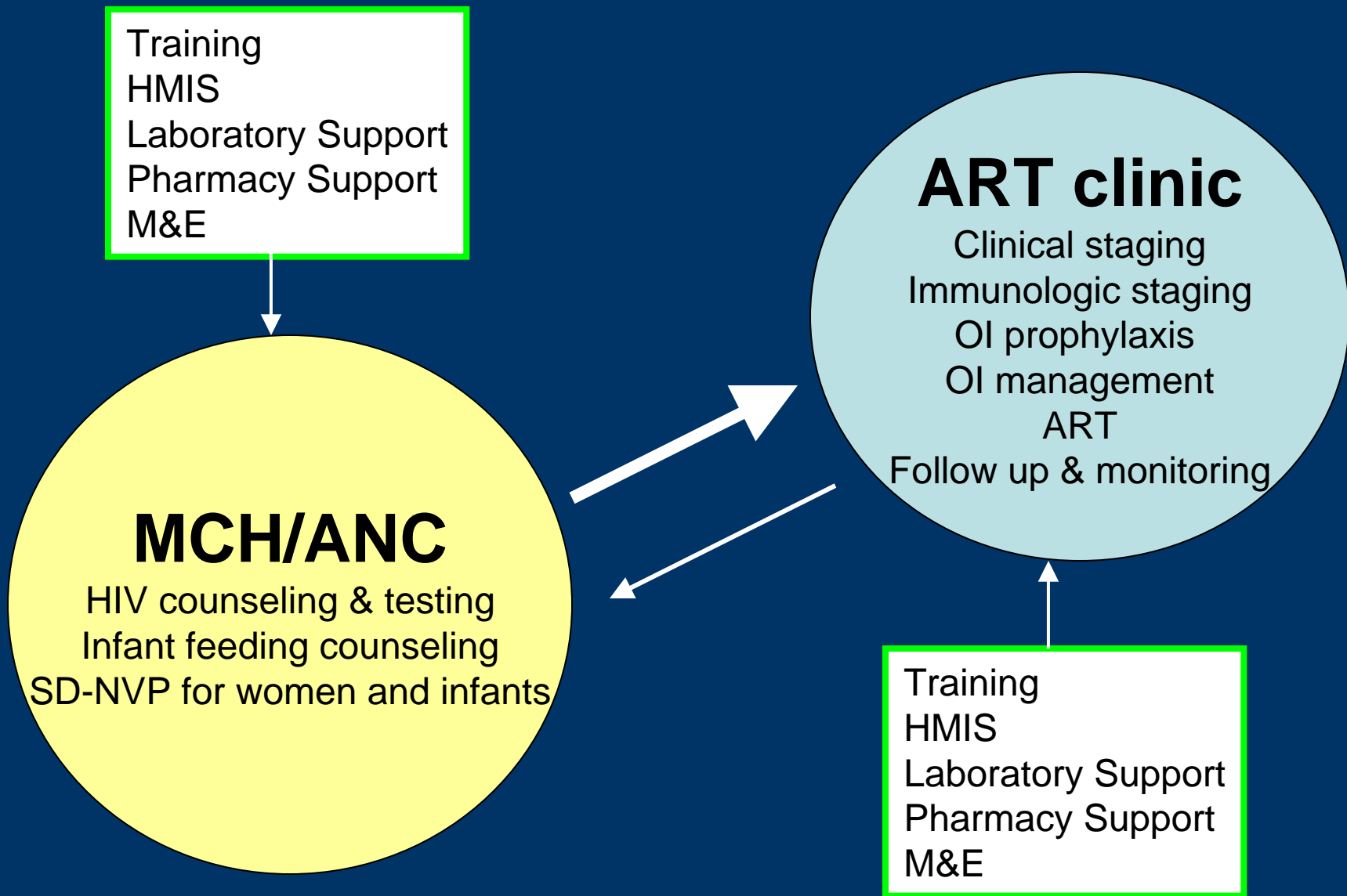
Standard pMTCT Interventions:

- HIV C&T within ANC
- Infant feeding counseling
- SD-NVP for mother and infant
- HMIS: unique identifiers for pMTCT use only



Optimal Interventions:

- Opt-out counseling and testing
- Rapid testing within L&D to all women of unknown status
- CD4 testing in conjunction with routine ANC blood tests
- Early infant diagnostics
- Systematic follow up of mother and infant
- Linked medical records and unique IDs
- Multidisciplinary team of providers
- Linkages to community resources



**Expanding Access to Pediatric HIV/AIDS Care and Treatment in Ethiopia:
*Challenges and Prospects***

HIV Care and Treatment

Services at ANC/MCH

Strengthening of pMTCT programs
Staging of HIV disease (immunologic & clinical)
On-site provision of or linkage to care &
treatment services
(e.g. CTX, ART)

Specialized Services Needed at Care and Treatment Sites:

Follow-up for all the women and exposed infants
Family-focused care (mother, children, partners)
Prioritization of eligible pregnant women for ART
Psychosocial support