

# Antiretroviral Therapy



You will be  
starting ARVS  
soon



# What are ARVs?



**Drugs that stop HIV from growing or multiplying**

They will help you stay healthy



**ARVs do not cure HIV**

They must be taken everyday for a lifetime

# Taking ARVs



**1 pill**

3 drugs in one pill, taken once a day

**OR**



**3 pills**

You must take all 3 or they will not stop HIV

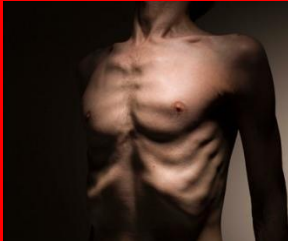
# Who needs ARV treatment?

HIV+ with an  
AIDS-defining illness



Wasting

Cryptococcal  
meningitis



PCP pneumonia



Esophageal  
thrush

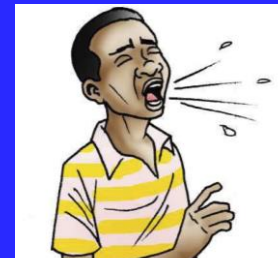


KS rash

**HIV+** even if not sick



HIV+ with active TB or  
pregnant



Active TB



Pregnant

All HIV+ babies



# New patients

## 1 pill

3 drugs in one pill,  
taken once a day



# South Africa has 2 lines of ARVs

## 1<sup>st</sup> Line



..... OR .....



or



or



## 2<sup>nd</sup> Line



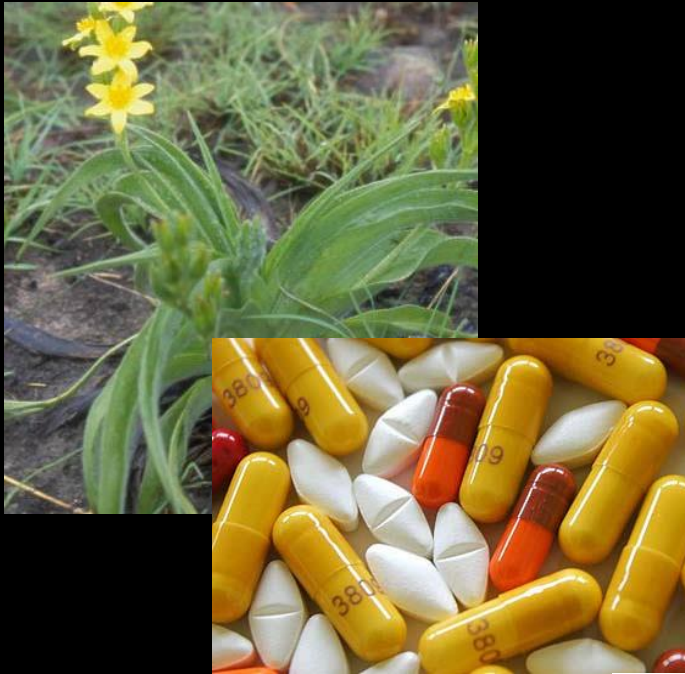
Your doctor will choose  
the best **ARV regimen** for you



# Side effects



ARVs can have side-effects. Any kind of drug can have side effects. Even some traditional & herbal medicines have side effects



- Not everyone has side effects from ARVs
- Most side-effects are mild & go away
- Some side-effects take longer to develop
- A few can be serious, but they are not common

# Side-effects Stocrin (Efavirenz)



Vivid  
dreams



Sleepy



Worsen  
depression



Take before you sleep.  
Avoid if you do shift-work

If serious depression or  
thoughts of suicide, do not  
take

# Side-effects Tenofovir (Viread)



Unless your blood tests  
show problems with  
your kidneys

Tenofovir can make  
kidney trouble worse

## Switch TDF to AZT

If your blood  
shows kidney  
problems



# Side-effects Nevirapine



Some people, but  
not all experience...



Rash



Liver toxicity

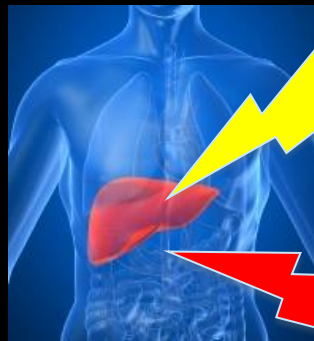
# Side-effects Nevirapine



Your doctor might stop NVP if you are a **heavy drinker** or on **TB treatment**



Rash



Liver toxicity



# 2<sup>nd</sup> line ARVs



# 'Treatment Failure'

- If you 'fail' on a 1<sup>st</sup> Line regimen, you may be switched to a 2<sup>nd</sup> line regimen
- **'Failure'** means the drugs stop working.
  - Virologic Failure: your viral load goes up and becomes 'detectable'
  - Immunologic Failure: your CD4 count falls
  - Clinical Failure: You get sick again with AIDS defining illnesses
- The most common reason for 'failure' is not taking your ARVs adherently.



# 2<sup>nd</sup> Line

## Regimen 2A

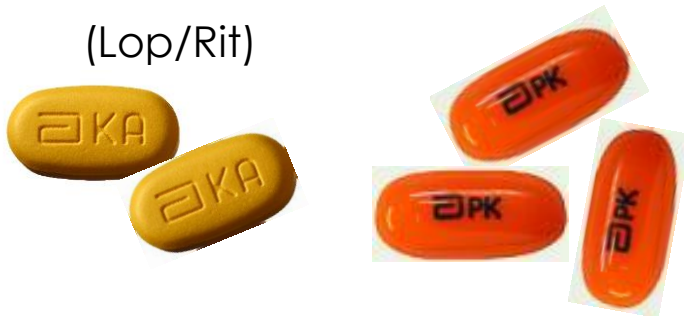
**1** **Tenofovir**  
(TDF)



**2** **3TC**  
(Lamivudine)



**3** **Aluvia = Kaletra**  
(Lop/Rit)



## Regimen 2B

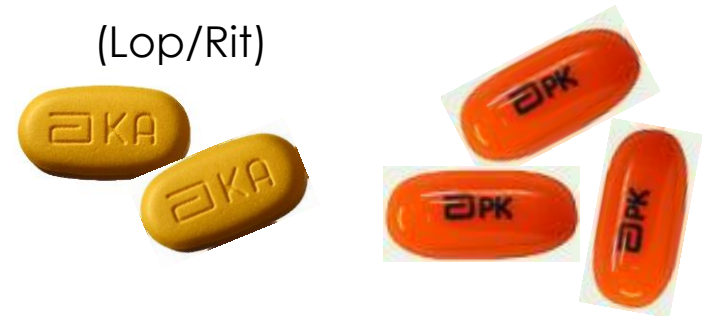
**1** **AZT**  
(Zidovudine)



**2** **3TC**  
(Lamivudine)



**3** **Aluvia = Kaletra**  
(Lop/Rit)





# Making your Treatment Plan

Choosing the time to drink  
your pills that is best for you...

Adherence Plan

**Don't** choose a time when  
you are busy...



Cooking



Going to work



Past your  
bedtime

# Adherence



# Drink every day, on time. No late or missed doses

## New patients

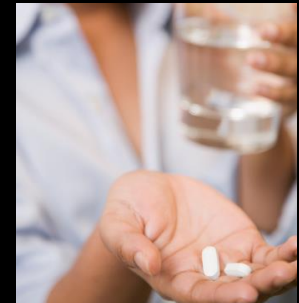
1 pill, once daily



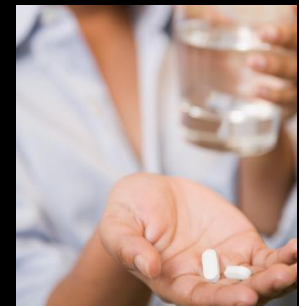
## Second Line patients

3 pills, twice daily

Every morning



Every evening



# Adherence tools or reminders...





# Best adherence support is loved ones



Someone who helps you to adhere to your ARVs:

‘Treatment Buddy’

# What must you do to *adhere?*

- Give yourself time to get used the ARVs
- Prepare mentally for the side effects
- Develop a routine...work ARVs into your routine
  - Near toothbrush
  - Near bed-stand
  - In work bag
- Develop good practices
  - Take meds with you on day outings
  - Take meds with you for weekends
  - Never run out of supply at home
- Seek & accept support

# Making your Treatment Plan Adherence plan







What times  
will you take  
your pills?

Where will  
you keep  
your ARVs at  
home?

What tools  
& reminders  
will you  
use?

**Who will  
be your  
buddy?**

Who do you  
still need to  
disclose to?

How will  
you carry  
your  
ARVs?

Join a support group



Disclose to  
your family  
& friends to  
gain support



Avoid  
excess  
alcohol



Carry several  
condoms to be  
sure you are  
prepared & use  
one every time

ALWAYS carry extra  
ARVs with you!



Get a pap  
smear now &  
yearly to  
check for  
cervical  
cancer



Females on  
Stocrin, get  
Dep-provera  
injections

Take care of  
yourself



# ARV Resistance



# What is *resistance*?

When drugs stop working against HIV

- ARVs block replication of HIV
- Drinking ARVs adherently makes replication so little the virus becomes 'undetectable'
- If you miss pills, some replication occurs and new virus gets created that ARVs cannot stop
- These are called resistant virus

# What happens if you have resistant virus in your body?

- There are 2 standard regimens of ARVs in SA (**regimen 3**)
- If you resist 1<sup>st</sup> Reg, the doctor can try the 2<sup>nd</sup> Reg
- But the same challenges that causes you to default on regimen 1, could happen with regimen 2
- It is critical to adhere to regimen 1 with good habits

# Infection with drug-resistant HIV



- If you or your partner default on ARVs, you can develop resistant HIV in your body
- Even if you never miss drinking your pills, someone can infect with you their resistant HIV
- You can pass resistant HIV to someone else
- Once you have resistant HIV in your body, your treatment options become limited



Another reason for condoms,  
even if you are HIV+



**Avoid a new resistant HIV**



# Avoiding resistance



- Never miss taking your treatment
- Never stop treatment on your own
- If you have side-effects or feel sick, go to the doctor right away
- If you are having trouble adhering for ANY reason, you must talk to the clinic staff!
- Your clinic should help you – **but taking ARVs is your own commitment for your life**

What can you  
say about these  
stories?

# *“But I have no food at home”*



- Thandi stopped ARVs
- The pills made her empty stomach upset
- What should she do?

# *“I never said I wanted these pills”*



- Bruno never started drinking his ARVs
- He collects them and puts them under his bed at home

Why do you have to  
return to the clinic  
regularly?



# To see the doctor or nurse



- Check for ARV side effects
- Check for OI's
- Check for TB

# To take your blood



- Check if ARVs are causing toxicity in your body (liver, anemia, kidneys)
- Check Viral Load to be sure it is undetectable.



# Collect your pills from pharmacy



- You must not run out of pills
- Come before you run out
- Come on your scheduled date



# Conclusion

- ARV treatment is lifelong
- ARVs have side-effects which are tolerable
- ARV treatment requires a commitment from you
- ARVs require you are knowledgeable & committed
- ARVs requires a support network – **family, community**
- Disclosure is very important to adherence
- Adherence is mandatory for treatment to work
- ***There are some risks, but the benefit is life !***

# Questions

