

Part II: Reviewing the 2020 HIVMA Primary Care Guidance

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Updated 2020 HIVMA Primary Care Guidance

Clinical Infectious Diseases

MAJOR ARTICLE



Primary Care Guidance for Persons With Human Immunodeficiency Virus: 2020 Update by the HIV Medicine Association of the Infectious Diseases Society of America

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Outline

Last Week:

- I. Optimizing Care Engagement, Medication Adherence, and Viral Suppression
- II. Initial Evaluation and Immediate Follow-Up for PWH

Today:

- III. Routine Healthcare Maintenance Considerations for PWH
- IV. Metabolic and Other Noncommunicable Comorbidities Associated with HIV, Antiretroviral Therapy, and Aging

III. Routine Healthcare Maintenance Considerations for PWH

Section III: HCM for PWH

ROUTINE	ONLY IN CERTAIN SCENARIOS	AREAS FOR DISCUSSION
HIV RNA level Mental health screen Substance use screen Blood pressure screen Weight check Syphilis screen Trichomonas screen GC/CT screen Viral hepatitis screen	TB testing Smoking cessation Lung cancer screen CRC screen Breast cancer screen Cervical cancer screen HCC screen Contraceptive management	CD4 cell count Lipid profile Hemoglobin A1c Chemistry panel CBC Urinalysis Anal cancer screen Prostate cancer screen

Section III: HCM for PWH

ROUTINE	ONLY IN CERTAIN SCENARIOS	AREAS FOR DISCUSSION
<p>HIV RNA level</p> <p>Mental health screen</p> <p>Substance use screen</p> <p>Blood pressure screen</p> <p>Weight check</p> <p>Syphilis screen</p> <p>Trichomonas screen</p> <p>GC/CT screen</p> <p>Viral hepatitis screen</p>	<p>TB testing</p> <p>Smoking cessation</p> <p>Lung cancer screen</p> <p>CRC screen</p> <p>Breast cancer screen</p> <p>Cervical cancer screen</p> <p>HCC screen</p> <p>Contraceptive management</p>	<p>CD4 cell count</p> <p>Lipid profile</p> <p>Hemoglobin A1c</p> <p>Chemistry panel</p> <p>CBC</p> <p>Urinalysis</p> <p>Anal cancer screen</p> <p>Prostate cancer screen</p>

Section III: Reminders

46. HIV RNA Level

- After ART start, “HIV RNA should be rechecked after 2-4 weeks but no later than 8 weeks and then every 4-8 weeks until suppression is achieved.”
- Then, HIV RNA should be monitored every 3-4 months.
- HIV RNA may be prolonged to every 6 months for “adherent patients whose VL has been suppressed for more than 2 years and whose clinical and immunologic status is stable.”
- HIV RNA should be monitored more frequently after ART start or switch, “preferably within 2-4 weeks, with repeat testing every 4-8 weeks until VL becomes undetectable.”

Section III: Reminders

72. CBC & Chemistry Panel

- Complete blood count and chemistry panels should be monitored on a regular basis as needed to assess medication toxicity and to monitor potential or existing comorbid conditions (eg. chronic kidney disease, hepatitis).

Section III: HCM for PWH

ROUTINE	ONLY IN CERTAIN SCENARIOS	AREAS FOR DISCUSSION
HIV RNA level Mental health screen Substance use screen Blood pressure screen Weight check Syphilis screen Trichomonas screen GC/CT screen Viral hepatitis screen Oral health	TB testing Smoking cessation Lung cancer screen CRC screen Breast cancer screen Cervical cancer screen HCC screen Contraceptive management	CD4 cell count Lipid profile Hemoglobin A1c Chemistry panel CBC Urinalysis Anal cancer screen Prostate cancer screen

CD4 Cell Count: Audience Poll

In PWH with a CD4 cell count > 500 cells/mm³, how often do you check the CD4 cell count?

- A. Every year
- B. Every 2 years
- C. Every 5 years
- D. Never or almost never

CD4 Cell Count Recommendation #47

- CD4 cell counts should generally be monitored every 3 to 6 months for the first 2 years or if the virus is not suppressed.
- For patients on suppressive ART regimens with CD4 cell counts 300-500 cells/mm³, CD4 cell count can be monitored every 12 months unless there are changes in the patient's clinical or virologic status.
- If the CD4 cell count rises above 500 cells/mm³, CD4 monitoring is optional.

Urinalysis: Audience Poll

In which asymptomatic PWH do you check a urinalysis?

- A. Every PWH q 6 months
- B. Every PWH q 12 months
- C. In PWH taking TDF, q 12 months
- D. In PWH taking any tenofovir-containing regimen, q 12 months

Urinalysis Recommendation

71. Urinalysis should be monitored annually among those at risk for kidney disease.

IV. Metabolic and Other Noncommunicable Comorbidities Associated with HIV, Antiretroviral Therapy, and Aging

Section IV: Reminders

- 77. Lipid levels should be obtained prior to and within 1-3 months after starting ART....

- 78. Random or fasting blood glucose and hemoglobin A1c (HbA1c) should be obtained prior to starting ART....

DXA Screening: Audience Poll

In which PWH do you order a screening DXA?

- A. Asymptomatic men > 50 years
- B. Asymptomatic men > 60 years
- C. Asymptomatic men > 50 years with a FRAX score > 10%
- D. I do not routinely order a screening DXA

DXA Screening Recommendation

79. Baseline bone densitometry (DXA) screening for osteoporosis should be performed in postmenopausal women and men aged ≥ 50 years.

Section III & IV: Conclusions

- HIV RNA monitoring can be spaced out to every 6 months in a specific subset of individuals, the criteria for which is clearly outlined.
- Practices regarding CD4 cell count, CBC, chemistry panels, lipid levels, diabetes, and DXA screening are variable.

How will your practice change?

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