

July 18, 2000

**UPDATED GUIDELINES FOR THE USE OF ANTIRETROVIRAL AGENTS AND
PREVENTION OF OPPORTUNISTIC INFECTIONS IN HIV-INFECTED ADULTS
AND ADOLESCENTS**

1. PURPOSE: This Veterans Health Administration (VHA) Directive provides recommendations for the use of Viral Load Assays, Immunologic Tests, Resistance Assays Antiretroviral Agents, and Prevention of Opportunistic Infections in the management of Human Immunodeficiency Virus (HIV) disease.

2. BACKGROUND

a. Options for the clinical management of HIV-infected individuals based on virologic and immunologic factors are rapidly changing with the advent of new antiretroviral agents or new formulations of existing ones. Since 1996, national guidelines have been published by the Panel on Clinical Practices for Treatment of HIV Infection. This Panel is composed of a group of experts from around the nation and is convened by the Department of Health and Human Services (HHS) and the Henry J. Kaiser Family Foundation (KFF). The Director of the Department of Veterans Affairs (VA) Acquired Immune Deficiency Syndrome (AIDS) Service is a member of this panel.

b. Opportunistic infection prevention guidelines have been published since 1995 by a panel convened by United States Public Health Service (USPHS) and the Infectious Diseases Society of America (IDSA). The Director of VA AIDS Service and the Chair of the VA AIDS Service Technical Advisory Group are members of this panel.

c. Based on the recommendations of the HHS - KFF Panel on Clinical Practices for Treatment of HIV Infection and the USPHS - IDSA Prevention of Opportunistic Infections Working Group, the Under Secretary for Health previously distributed Information Letters to the field on June 20, 1996, March 24, 1997, August 21, 1997, and September 9, 1998. Each of these Information Letters outlined new issues or updated previous recommendations related to the assessment and treatment of HIV and AIDS, and the prevention and treatment of opportunistic infections in HIV and AIDS patients.

d. As indicated in the previous Information Letters, the management of HIV patients is a constantly changing area requiring periodic updates. Since those Information Letters were published, the HHS - KFF Panel on Clinical Practices for Treatment of HIV infection released a report on January 28, 2000, entitled "Guidelines for the Use of Antiretroviral Agents in HIV-Infected Adults and Adolescents." This report recommends that care of HIV-infected patients be supervised by an expert or that the care provider have access to expertise through consultation. The report makes recommendations for laboratory monitoring including plasma HIV Ribonucleic Acid (RNA), CD4+ T cell counts, and HIV drug resistance testing. The report also provides guidelines for antiretroviral therapy, including

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when to initiate treatment, what drugs to use, and when to change therapy. It lists options for changing therapy. On August 20, 1999, the "USPHS - IDSA Guidelines for the Prevention of Opportunistic Infections in Persons Infected with Human Immunodeficiency Virus" were published. These guidelines include recommendations to prevent major opportunistic infections in the era of highly active antiretroviral therapy (HAART). Two new pathogens not previously considered, human herpesvirus type 8 and hepatitis C virus, are addressed. Both sets of guidelines are updated on an ongoing basis and are made available through public access web sites.

e. The recommendations contained in these guidelines are not intended to substitute for the judgment of a clinician who is an expert in the care of HIV-infected individuals. They are, however, based on the current understanding of the pathogenesis of HIV and intend to translate scientific principles and data obtained from clinical experience into recommendations that can be used by the clinician and patient to make therapeutic and prophylaxis decisions. Other groups also publish guidelines that clinicians may wish to consult.

f. As with treatment of any chronic condition, therapeutic decisions require a mutual understanding between the patient and health care provider regarding the benefits and risks of treatment.

3. POLICY: It is VA policy that VA medical facilities provide state-of-the-art, high-quality care to eligible veterans infected with HIV.

4. ACTION: VA has adopted the January 28, 2000, version and subsequent versions and updates of the HHS-KFF "Guidelines for the Use of Antiretroviral Agents in HIV-Infected Adults and Adolescents" as its guidelines. VA has also adopted the August 20, 1999, version and subsequent versions and updates of the "1999 USPHS-IDSA Guidelines for the Prevention of Opportunistic Infections in Persons with Human Immunodeficiency Virus" as its guidelines.

NOTE: These documents are accessible on the VA AIDS Information Center web sites at <http://vhaaidsinfo.cio.med.va.gov/aidsctr> (Internet) and <http://vhacoweb1.cio.med.va.gov/aidsinfo> (VA Intranet) and on the HIV-AIDS Treatment Information Service (ATIS) Web site <http://www.hivatis.org/trtgdlns.html>. Print copies of these documents are available by calling 1-800-HIV-0440; TTY 1-888-480-3739; Fax 301-5199-6616.

5. REFERENCES

a. Department of Health and Human Services - Henry J. Kaiser Family Foundation Panel on Clinical Practices for Treatment of HIV Infection. "Guidelines for the Use of Antiretroviral Agents in HIV-Infected Adults and Adolescents," January 28, 2000. <http://www.hivatis.org/trtgdlns.html>

b. United States Public Health Service (USPHS) and Infectious Diseases Society of America (IDSA). "1999 USPHS-IDSA Guidelines for the Prevention of Opportunistic Infections in Persons Infected with Human Immunodeficiency Virus," August 20, 1999. <http://www.hivatis.org/trtgdlns.html>

6. FOLLOW-UP RESPONSIBILITY: Director, AIDS Service (132) is responsible for the contents of this directive.

7. RESCISSION: This Directive will expire July 31, 2005.

S/ Melinda Murphy for
Thomas L. Garthwaite, M.D.
Acting Under Secretary for Health

Attachment

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