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All people with HIV with CD4 counts below 350 are now eligible for antiretroviral treatment

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The Treatment Action Campaign (TAC) welcomes the announcement today by Deputy President Kgalema Motlanthe that all people with HIV with CD4 counts below 350 cells/mm3 will be offered antiretroviral treatment.

Civil society has been calling for this policy change since the antiretroviral treatment guidelines were last updated. It is a measure that will improve the quality of life of many people with HIV, reduce mortality and reduce new infections. Until today, the guidelines only provided for treatment for people with CD4 counts below 350 cells/mm3 if they were pregnant or had active TB. All other patients had to wait until their CD4 counts fell below 200 cells/mm3.

The evidence for the policy change is very strong:

- A randomised controlled clinical trial in Haiti showed that a CD4 count threshold of 350 reduces deaths compared to a threshold of 200. [1]
- A study by Medecins Sans Frontieres in Lesotho found that patients who started treatment above 200 were 68% less likely to die and 39% less likely to be lost to follow-up compared to patients who initiated below 200 cells/mm3. Only a small proportion of these patients were pregnant or had active TB and would therefore have been eligible for treatment in the South African public sector until today. [2]
- A study in Masiphumelele township in Cape Town found that as more people were placed on antiretroviral treatment, the number of new TB cases dropped. [3]
- The recently published HPTN 052 trial showed that starting people on treatment earlier reduces their risk of transmitting HIV. [4]

Government has until now been concerned about the increase in the cost of the programme. An analysis by The Health Economics and Epidemiology Research Office of the University of Witwatersrand Health Consortium (HERO) presented in 2010 at the Budget and Expenditure Monitoring Forum showed that purchasing drugs at prices higher than necessary and insufficient task-shifting to nurses and counsellors are much more serious drivers of the cost of the programme than the CD4 threshold. [5] The policy change will reduce opportunistic infections, saving both patients and the health system time and money.

What next?
The World Health Organisation recommends that all HIV-positive patients with TB should start treatment irrespective of their CD4 count. Government should give serious consideration to implementing this measure.

For further comment contact Caroline Nenguke at the TAC on +27 21 422 1700 or +27 83 8853 892

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