



Republic of Botswana

Frequently Asked Questions for

TREAT ALL



MINISTRY of HEALTH
REPUBLIC OF BOTSWANA



QUESTION 1: WHY HAS THE GOVERNMENT OF BOTSWANA ENDORSED “TREAT ALL”?

ANSWER: In July 2015, the results of two international research studies – The START Trial and The Temprano Trial, were released. These studies showed that by adopting a “Treat All” approach to HIV Care (placing everyone on ART regardless of their CD4 counts) there would be significant decreases in HIV related morbidity and mortality.

Botswana specific data showed that by adopting “Treat All,” more than 110,000 people will be prevented from acquiring HIV infection and more than 54,000 deaths will be prevented by 2030.

Furthermore, because of the large amount of HIV infections prevented, the costs of adopting a “Treat All” approach, is the most cost effective intervention.

QUESTION 2: WHAT ARE SOME OF THE ADVANTAGES OF “TREAT ALL”?

ANSWER: People infected with HIV are now eligible for treatment before they become ill. Therefore, there is no reason to become at higher risk for developing many opportunistic infections, such as TB, pneumonia and meningitis

- *The medications that are being used will suppress the virus more quickly and decrease the likelihood of HIV positive people transmitting the virus to their partners. Botswana based research has also shown that by decreasing the amount of HIV virus in the community by suppressing viral loads, transmission of HIV decreases.*
- *Many young people, who are not at the highest risk of acquiring HIV will be prevented from infection.*
- *Discordant couples will be safer from transmitting the virus to each other and this should lead to a reduction of HIV associated stigma.*

QUESTION 3: WHY IS THE NEW DRUG DOLUTEGRAVIR BEING INTRODUCED FOR FIRST LINE TREATMENT?

ANSWER: New scientific evidence has shown that newer drug formulations have more favorable side effects profiles, have less drug-drug interactions, and are less likely to promote the development of HIV drug resistance. Newer drugs known as integrase inhibitors, such as Dolutegravir (DTG), have been shown to be superior to other ART treatment combinations.

Introducing drugs with better side effects profile is important with a “Treat All” approach because now healthy people with high CD4 counts will not want to experience side effects that make them feel sick. To ensure the good adherence with healthy patients, drugs with less side effects make sense.

Also, as more HIV patients who are currently on ART get older, they will need to take more medications as they develop more co-morbidities such as hypertension and diabetes. Introducing medications with more favorable drug-drug interactions will help prevent drug toxicities and improve adherence.

QUESTION 4: IF SOMEONE IS ON ATRIPLA, SHOULD THEY CONTINUE ON THIS REGIMEN?

ANSWER: Fortunately, most people who take Atripla do not experience serious side effects. Recently, there have been many improvements in ART medications and Botswana will continue to optimize ART regimens in the future. However, for now anyone who is stable on Atripla, without any serious side effects, should remain on it.

QUESTION 5: IS STRICT ADHERENCE STILL REQUIRED WITH THE NEW TREATMENT REGIMENS?

ANSWER: Life-Long and strict adherence to all ART regimens is still required.

QUESTION 6: ARE THERE ENOUGH HEALTHCARE WORKERS IN PLACE TO LAUNCH “TREAT ALL”?

ANSWER: The Ministry of Health expects that the “Treat All” approach will require all healthcare workers to embrace a new direction in HIV care - knowing that by doing so thousands will be prevented from becoming HIV positive. With successful implementation Epidemic Control of HIV will take place as soon as 2020, relieving the pressures that healthcare workers now experience all around the country.

QUESTION 6: WHAT IS THE DIFFERENCE BETWEEN PARALLEL HIV AND SERIAL HIV TESTING?

ANSWER: Previously the Ministry of Health endorsed Parallel HIV Rapid Testing: When someone came for HIV rapid testing, two rapid tests were completed at the same time. Now the Ministry of health is introducing Serial HIV Rapid Testing: When someone comes for rapid testing now, one rapid test will be completed. Anyone testing negative will be sent for HIV combination prevention options. Anyone testing positive will receive confirmation and verification HIV rapid tests - to make sure that anyone diagnosed with HIV infection is properly diagnosed and started on ART as soon as possible.

QUESTION 8: WHAT ARE THE ADVANTAGES OF COUPLES TESTING?

ANSWER: By testing together couples can reduce the likelihood of acquiring HIV from their sexual partners. If one partner is identified as positive, this person can begin ART immediately and reduce the risk of transmission by 96%. If both partners are identified as positive, they can start ART together, support each other with adherence and live together with normal life expectancy. If both partners are found to be HIV negative, they can commit themselves to regular HIV testing and do everything they can to reduce the risk of HIV infection. It is important to remind discordant couples and couples with dual infection, that they can still live healthy and happy lives together, have children and enjoy normal life expectancy.

QUESTION 9: ARE CD4 TESTS STILL IMPORTANT?

ANSWER: CD4 counts are still important to report on the status of one's immune system. However, the level of CD4 counts is no longer necessary to become eligible for ART.

QUESTION 10: ARE VIRAL LOAD TESTS STILL IMPORTANT?

ANSWER: Viral load tests measure amount of HIV virus in the blood and let us know whether the ART medications are working. Completing viral load tests after the first three months and then every six months thereafter, is still very important for patients to know that HIV virus is well controlled within their bodies.

QUESTION 11: WHAT IS PREP AND WHERE IS IT AVAILABLE?

ANSWER: PrEP is Post Exposure Prophylaxis. PrEP allows HIV negative persons at high risk for HIV infection such as sex workers, people who have multiple sexual partners or those who engage in risky sexual behaviors and Men who have sex with Men (MSM), to protect themselves from being infected with HIV.

It requires strict adherence and still requires condom use to be effective.

For now, PrEP will only be available in the private sector. Anyone interested in PrEP should consult their private healthcare providers.

QUESTION 12: WHAT DOES COMBINATION HIV PREVENTION MEAN?

ANSWER: Combination HIV Prevention means that the best way to prevent HIV infection is for HIV negative people to utilize a combination of HIV prevention measures such as: Safe Male Circumcision, Consistent and Correct Condom use, Early ART Treatment, PrEP, and PMTCT.

QUESTION 13: WHAT IS MEANT BY SEXUAL REPRODUCTIVE HEALTH?

ANSWER: Sexual Reproductive Health means that all sexually active men and women should make responsible decisions regarding their sexual lives with their healthcare providers, plan their pregnancies and discuss their contraceptive options.

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