



Rapid antiretroviral therapy initiation and acute HIV infection: current situation in a Latinamerican referral center

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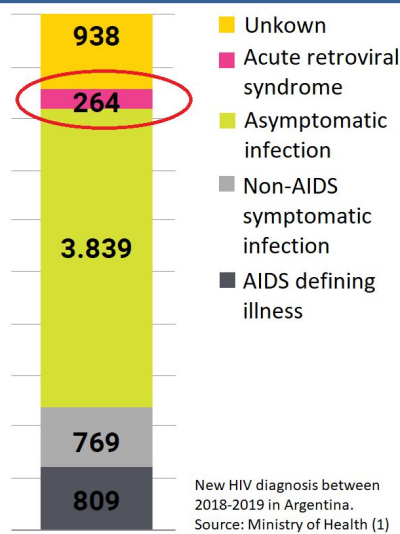
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BACKGROUND

Only 4% of new HIV diagnoses in Argentina are occur in the setting of an acute retroviral syndrome (1).

Rapid antiretroviral (ART) initiation during acute HIV infection could be relevant in both long term prognosis and in reduction of community transmission (2,3).



OBJECTIVES

To describe **clinical characteristics**, **viro-immunological status** and **time to ART initiation** within the first six months after diagnosis in a cohort with AHI in a public general hospital in Buenos Aires, Argentina.

MATERIALS AND METHODS

This is an observational retrospective cohort study

Subjects were included if they had a diagnosis of AHI* between Jan-2016 and Dec-2021.

* (defined as: positive p24, acute retroviral syndrome with baseline viral load log7 and/or negative serologic test in the last 6 months.)

RESULTS

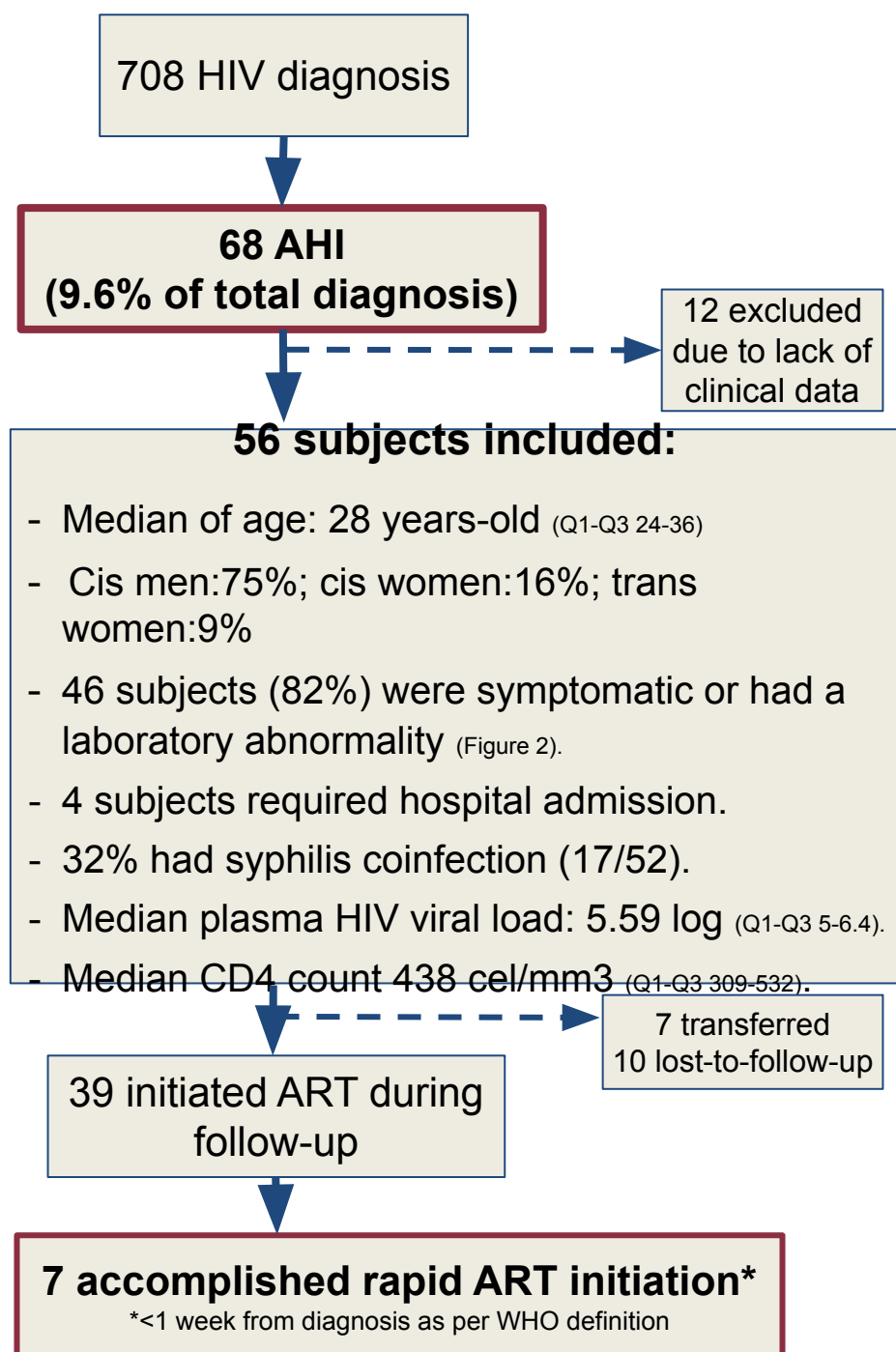


FIGURE 2. CLINICAL CHARACTERISTICS (%)

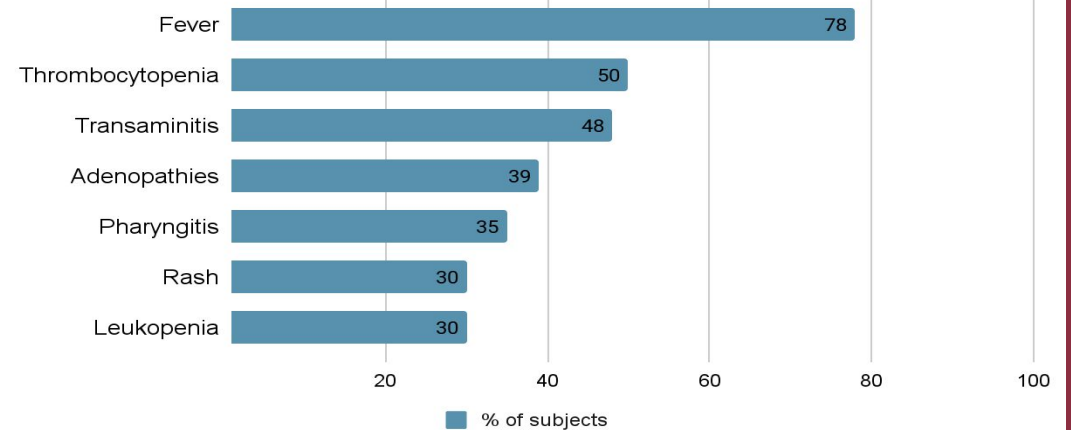
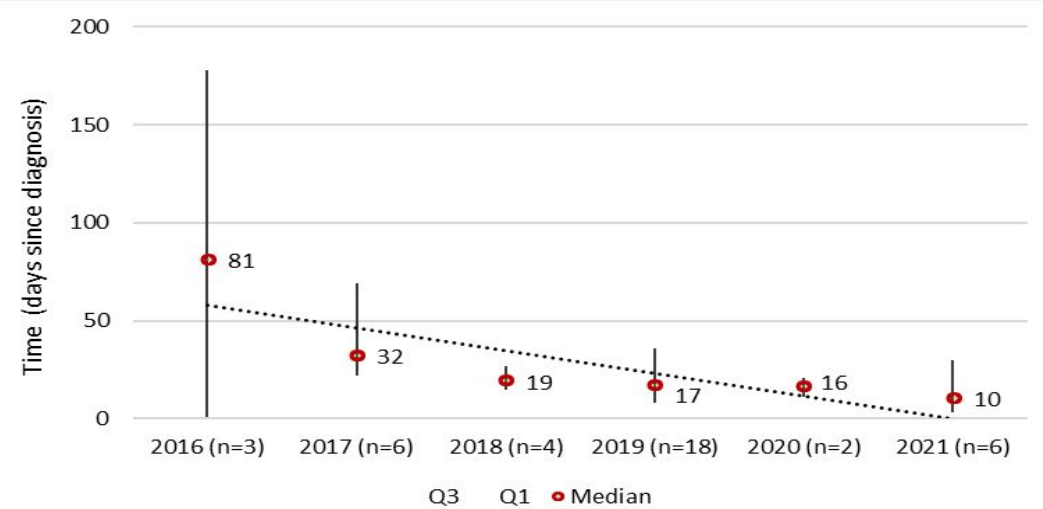


FIGURE 3. TIME TO ART INITIATION



CONCLUSIONS

Clinical characteristics of our cohort were similar to those previously described in the literature. The proportion of AHI diagnosis in our center was over two times higher than the national average. Although a trend towards reduction in time until ART initiation is observed throughout the study period, significant efforts are still required towards WHO rapid ART initiation goal.

REFERENCES

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- (3). Oxenius A, Price DA. Early highly active antiretroviral therapy for acute HIV-1 infection preserves immune function of CD8+ and CD4+ T lymphocytes. Proc Natl Acad Sci U S A. 2000.