

Early Intervention Services

Available for treatment and case management consultation for providers caring for HIV+ Alaskans

- Beth Schenck Saltonstall, MD
- Terri Bramel PA-C, Clinical Specialist
- Caren Barlowe FNP, Patient Care Manager

(907) 729-2907

1-888-855-8006



Hub Site Case Managers

- SCF
 - Thor Brendtro, RN
 - Ext 4209
- YK
- SEARHC in Sitka and Juneau
- Fairbanks

HIV/AIDS Education & Training Program

- Joe Cantil, 729-3956
 - Funded through the Northwest AIDS Education & Training Center (NWAETC)
 - Local Performance Site for NWAETC
 - Coordinates training and technical assistance
 - Information about training and preceptorships available

Time of Maternal HIV Testing among Children with Perinatally Acquired AIDS, HIV Exposure or HIV Infection Reported in 2006—United States and Dependent Areas

Time of maternal HIV test	Perinatally Acquired AIDS N=74		HIV Exposure* N=1,883		HIV Infection† N=447	
	No.	%	No.	%	No.	%
Before or at birth	28	38	1,746	93	168	38
After birth	28	38	65	3	137	31
Unknown	18	24	72	4	142	32

*From 33 areas that report perinatal exposure.

†From 50 areas with confidential name-based HIV infection reporting.



HIV Infection

Alaska 2003-2007

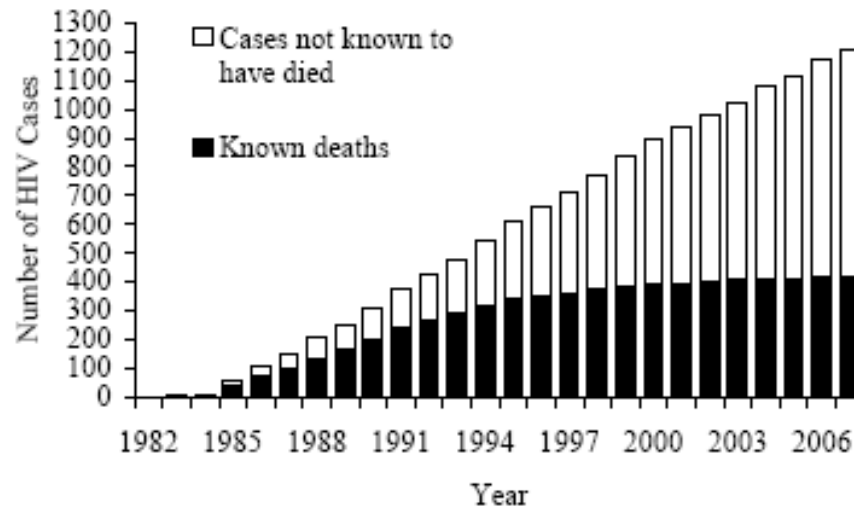
1,206 cases ever reported in AK

- **37 new dx, 24 new to state
2007**
- **190 in the years 2003-2007**
 - **71 (37%) with AIDS**
 - **13 (7%) known to have died**

Known to Have Died

- Cumulative 417 or 35%
- 2003-2007 13 or 7%

Figure 1. Cumulative Number of HIV Cases and Known Deaths by Year of First Known HIV Diagnosis through December 31, 2007 (N=1,206)



EIS Cumulative Data

- 71 new dx since 3/2002
- 62% outside of Anchorage
- Youngest: 18 months
- Oldest: 63
- 41% women
 - 20 (68% of total women), 40 yoa
 - ~85% with heterosexual transmission

Pregnancy History in EIS Patient Population

- 26 Pregnancies in 11 women
- 5 TAB
- 5 SAB
- 16 births
 - All delivered at ANMC
 - 7 children born to HIV+ mothers living in Anchorage

The Issues


- More young women of child bearing age becoming HIV positive
- More infants being born with the dx of HIV affected
- Require close follow up and management

PACTG 076

Eligibility

pregnant HIV+ women
CD4 >200
no symptoms or clinical indication for AZT
no prior AZT

Protocol



AZT 100 mg 5 X qd
2 mg/kg, 1 mg/kg/hr
2 mg/kg q 6 hr

n=180

antepartum
intrapartum
infant thru 6wks



Placebo

n=185

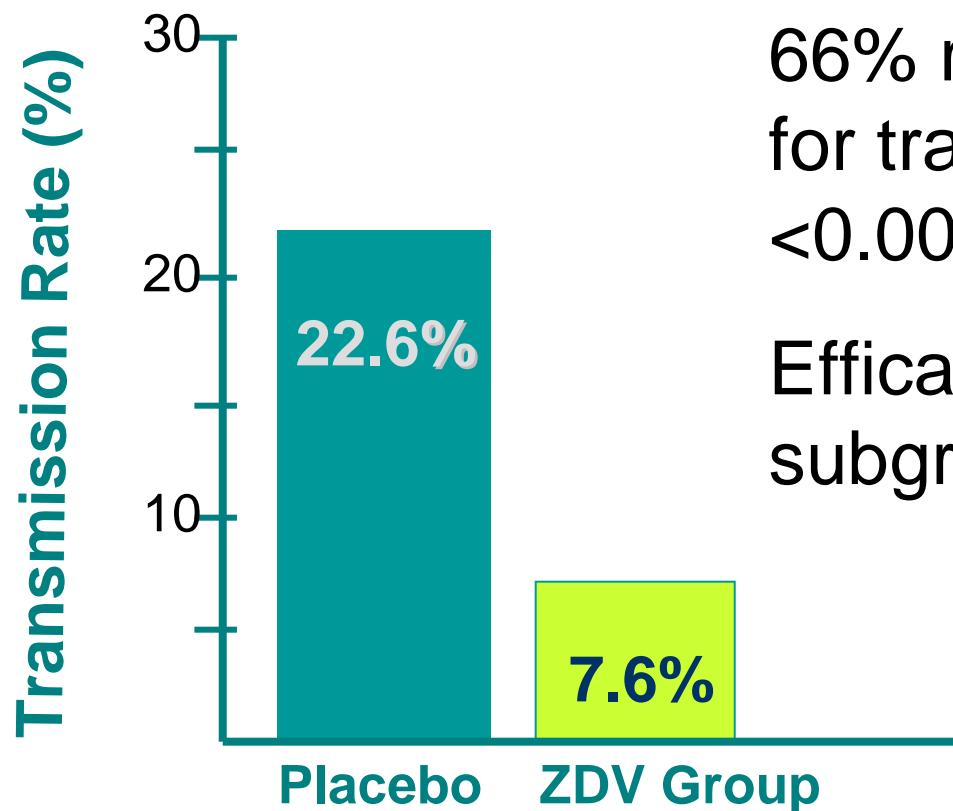
Results

n-13
(8.3%)

~70% reduction

n-40
(25.5%)

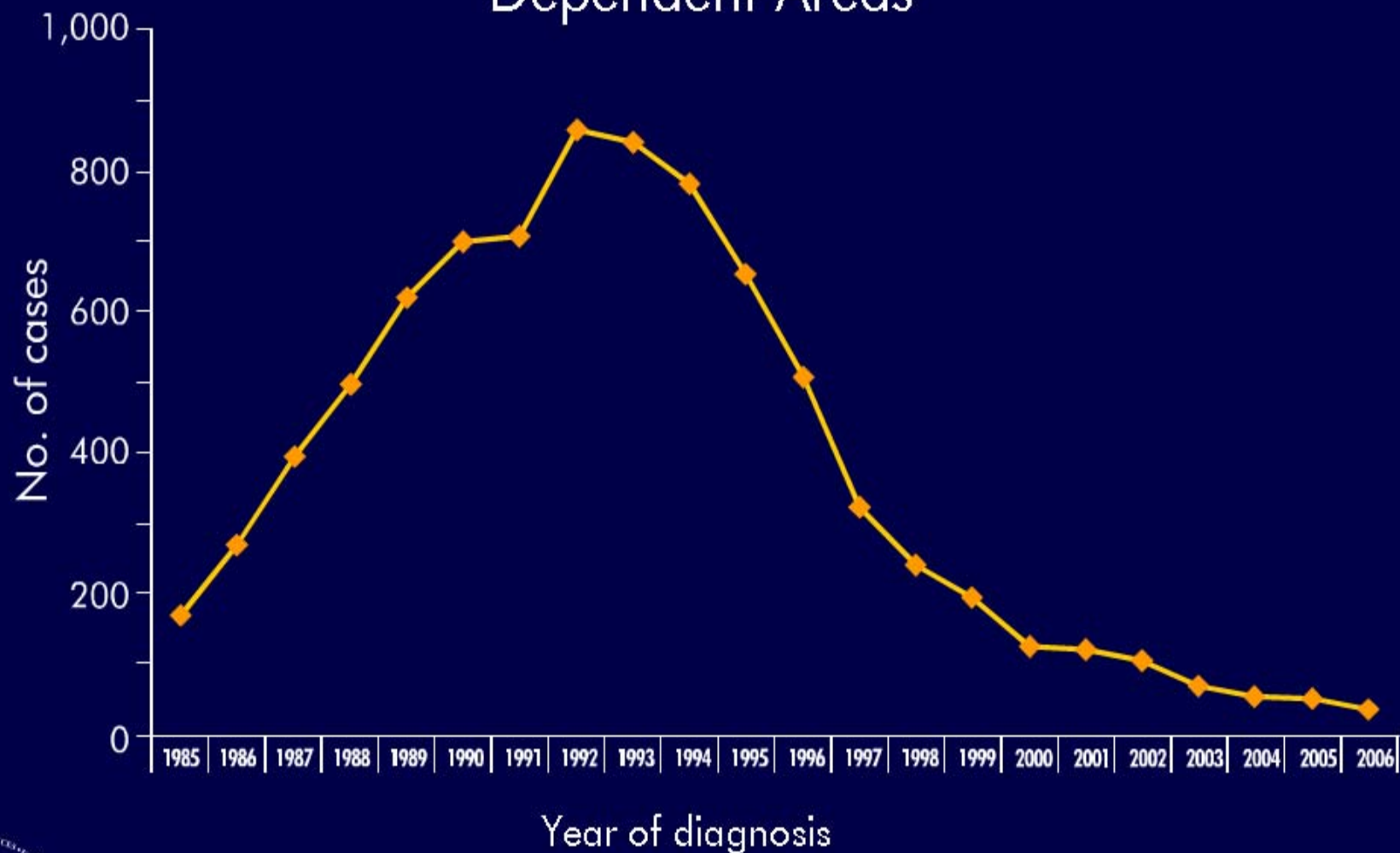
Results of ACTG 076



66% reduction in risk
for transmission ($P = <0.001$)

Efficacy observed in all
subgroups

Estimated Number of Perinatally Acquired AIDS Cases by Year of Diagnosis, 1985–2006—United States and Dependent Areas



Note. Data have been adjusted for reporting delays and cases without risk factor information were proportionally redistributed.



Current Protocol

Eligibility pregnant HIV+ women

Protocol HAART after 13 weeks gestations
2 mg/kg, 1 mg/kg/hr
2 mg/kg q 6 hr

antepartum
intrapartum
infant thru 6wks

Why does it work?

- Prenatal:
 - ZDV readily crosses the placenta
 - ZDV can be metabolized into its active form within the placenta itself
- Intrapartum
 - Systemic virucidal ZDV concentrations
- Postpartum
 - PEP

Guidelines for the Use of Antiretroviral Agents in Pediatric HIV Infection

February 28, 2008

[http://aidsinfo.nih.gov/contentfiles/
PediatricGuidelines.pdf](http://aidsinfo.nih.gov/contentfiles/PediatricGuidelines.pdf)

The Assistance

- Folders with protocols
- On line protocols available
- <http://www.anthc.org/cs/chs/hivclinic/upload/HIVAIDSPediatric.pdf>

Why use the HIV DNA PCR?

- PCR
 - At <48 hours of age sensitivity <40%
 - By 2-4 weeks of age, >90%
- HIV RNA assays
 - 25-40% sensitivity in first week
 - 90-100% by 2-3 months of age
 - Unknown whether sensitivity affected by maternal tx with HAART

Testing Schedule

- At birth
 - *In utero* infection
- 14-21 days
 - Increased sensitivity of PCR
 - Early ID/tx of infection
- 1-2 months
 - Infection during delivery
- 4-6 months
 - Definitive exclusion of HIV if other tests neg
- Ab test at 12-18 months
 - Confirm maternal ab have disappeared

Presumptive Exclusion of HIV

In non-breastfed infant:

1. Negative tests at ≥ 14 days and ≥ 1 month of age
2. One negative virologic test at ≥ 2 months of age
3. One negative HIV Antibody test at ≥ 6 months of age

Definitive Exclusion of HIV

In non-breastfed infant:

1. Two or more negative tests with 1 obtained ≥ 1 month and 1 at ≥ 4 months of age
2. Two negative tests from separate specimens at ≥ 6 months of age
3. Negative ab after 12-18 months still recommended for confirmation

The Issues

Adherence

Appointment scheduling

Fatigued mom

Adopted out babies