Low Rates of Viral Suppression Seen in South Africans With HIV

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South Africa's HIV-positive population has relatively low rates of engagement in health care and viral suppression, paralleling similarly low figures in the United States, aidsmap reports. Researchers presented their estimates of South Africa's "treatment cascade" at the 2015 Conference on Retroviruses and Opportunistic Infections (CROI) in Seattle.

The treatment cascade refers to the descending percentage of people living with HIV in a particular country who are: diagnosed; linked into medical care; engaged in regular care; prescribed antiretrovirals (ARVs); and virally suppressed. The last step in the cascade is of particular importance for HIV prevention, as research has shown that having full viral suppression vastly reduces the likelihood of transmitting the virus.

Researchers analyzed population from the National Household Survey and Vital Registration Data to estimate the number of South Africans living with HIV in 2012. In addition, they looked at data from the National Health Laboratory Services, using CD4 counts as a proxy to estimate the number of people engaged in care, and viral load measurements as a proxy to estimate the number of people who were virally suppressed.

They estimated that there were 6.42 million people living with HIV, 3.3 million of whom were linked to care (51 percent), 2.2 million of whom were on ARVs (34 percent) and 1.6 million of whom were virally suppressed (25 percent). About the same percentage of Americans with HIV are believed to be virally suppressed, a figure which is far below that of several other Western nations examined in a recent analysis.

South African women fared much better than men in that country's treatment cascade, according to this study. Twenty-eight percent of the women with HIV were estimated to be virally suppressed, compared with 19 percent of the men. People between 15 and 24 years old were 24 percent less likely to have a fully suppressed viral load than those 25 and older.

To read the aidsmap story, click here.

To read the conference abstract, click here.

To watch the webcast of the presentation, click here.

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