Treatment as Prevention Is Cost-Effective in Poorer Nations

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Treating the HIV-positive member of a serodiscordant couple with antiretrovirals (ARVs) in order to prevent transmission of the virus, also known as treatment as prevention, or TasP, is cost-effective in resource-limited settings. Publishing their findings in The New England Journal of Medicine, researchers conducted a computer simulation based on data from the HIV Prevention Trials Network 052 study, projecting the cost-effectiveness of early versus delayed treatment with ARVs among those in serodiscordant relationships living in South Africa or India.

The researchers found that in South Africa early treatment prevented opportunistic diseases, saved money and increased overall life years, when compared with delayed treatment; across an entire life span it was very cost-effective. Early treatment in India was cost-effective over a five-year period, and over a lifetime it was also very cost-effective.

Early treatment prevented HIV transmission in the short term, although this effect was lessened by the fact that the drugs extended people's lives (thus increasing the amount of time during which they might pass on the virus, notwithsanding the fact that maintaining an undetectable viral load vastly reduces this risk).

The study's authors concluded, "With individual, public health, and economic benefits, there is a compelling case for early [treatment] for serodiscordant couples in resource-limited settings."

To read the study abstract, click here.

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