

# HIV Meds Can Still Benefit Those with Triple-Class Failure

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People with HIV who have experienced triple-class treatment failure can still reap health benefits from antiretroviral (ARV) treatment if the medications lower their viral load even somewhat, aidsmap reports. Publishing the results of their research in the *Journal of Infectious Diseases*, European scientists from the COHERE study found that there is a direct, linear correlation between lower viral loads and higher CD4 counts.

The researchers analyzed records from 2,424 HIV-positive people who had experienced failure in all three classes of ARVs since 1998. (The newer classes of ARVs made up a small fraction of the therapies utilized: Only 7 percent of the participants took fusion inhibitors, 9 percent integrase inhibitors and 1 percent CCR5 inhibitors.) After creating a mathematical model that projected changes in CD4 counts assuming a baseline of 300 cells after triple-class failure, the scientists found that those with a viral load of 100 would have a CD4 count of 386 after two years. For each additional power of 10 in viral load, the CD4 count after two years would drop steadily—so that those with a viral load of 1 million would likely have a CD4 count of 213.

“While in those with high CD4 count it may be possible to wait until new active drugs are available, for those with low CD4 count it is important to use the regimen most likely to achieve maximal viral suppression,” the researchers write, adding that for “an individual who is not fully adherent, any increase in adherence is likely to provide immediate benefits in terms of reduced risk of clinical disease.”

For the aidsmap story, [click here](#).

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