

TLALETSO

UPDATES FOR YOUR PRACTICE

Efavirenz good for women

Improved virological outcomes for women starting efavirenz first line regimens in South Africa

Women receiving efavirenz (EFV) as part of first line therapy experienced better virological outcomes than those receiving nevirapine (NVP) in a multicenter cohort study in South Africa, according to data presented at the 4th International Workshop on HIV and Women 2014.

A total of 53,447 women were included in the study, of these 33,946 (63.5%) initiated treatment with EFV and 19,531 (36.5%) with NVP. At 60 months women receiving EFV had a 40% reduced risk of unsuppressed viral load (>400 copies/mL) compared to those receiving NVP: (95% CI 0.58 to 0.63), $p < 0.0001$. Pregnant women receiving EFV had a 28% reduced risk of virological failure compared to those on NVP. (95% CI 0.58 to 0.91), $p = 0.005$.

In this study, virological outcomes of women who received EFV were significantly better than those who received NVP for first-line ART despite having more advanced HIV at baseline. Pregnant women also had improved virological outcomes with EFV.

Take Home Message: It can still be confusing for health workers and HIV positive people in many settings that the efavirenz label does not recommend its use in pregnancy, despite ever increasing reports of favorable outcomes with this WHO recommended regimen. This study shows that not only is EFV safe for women, outcomes are much better than with NVP based regimens.

Reference: Fatti G et al. Improved virological outcomes amongst women starting efavirenz for first-line antiretroviral treatment in South Africa. 4th International Workshop on HIV and Women 2014. Oral Abstract_18

Tlaleletso is a monthly publication produced by the Botswana UPenn Partnership, in response to your expressed need for accessible, digestible clinical information. In this issue we focus on new and important research that has been recently published and is relevant to clinical practice in Botswana.....

Functional Cure?

Update on two patients that underwent stem cell transplants and were 'cured' of HIV.

Page 2

Hand-washing saves lives!

Results of a large meta-analysis provide strong evidence of the value of hand-washing on the wards.

Page 2

Steroids for COPD

5 days of steroids for acute COPD exacerbation is as good as 14 days of steroids.

Page 4

HIV CURE: To good to be true? Updates on 2 'cured' patients.....



Quit Smoking: Anxiety drops!

The commonly held belief that smoking is a stress reliever – and therefore, quitting smoking increases anxiety – was not demonstrated in a recent study, published in the British Journal of Psychiatry. Smokers who were able to quit had a significant reduction in average anxiety scores, whereas smokers who relapsed had increased scores. Perhaps those who are successful in quitting are able to develop skills for managing anxiety. The study provides evidence for clinicians to better counsel patients about the misconceptions around smoking cessation.

Ref: McDermott MS et al. Change in anxiety following successful and unsuccessful attempts at smoking cessation. Br J Psychiatry 2013; 202 (1): 62-67

In December 2013, scientists in the US shared the disappointing news that HIV viral loads had rebounded to detectable levels in 2 individuals who had previously undergone stem cell transplantation and later stopped HIV treatment. While this is concerning for the two patients involved, it is also sobering for scientists committed to finding a cure for HIV. The results emphasize that a short-term absence of HIV rebound after stopping ART must be viewed cautiously and cannot be interpreted as evidence of a cure. The results also highlight the challenge of identifying trace amounts of

HIV in the body that can fly beneath the radar of current technologies. Nevertheless there is considerable ongoing cure research, not least because of the exciting case of an infant from the US who was 'cured' of HIV after doctors started ART within 48 hours of delivery. A large and important study, undertaken by Dr Roger Shapiro and colleagues from the Botswana Harvard Partnership is about to start. This study will investigate whether very early ART initiation in HIV infected infants can replicate this earlier finding. For more information: <http://www.bhp.org.bw/research/>

IMPORTANT RESEARCH: Hand washing prevents Infections!

The authors of this study searched multiple databases to identify studies of hand washing programs. They ultimately looked at 30 studies. Across all of these studies they found that hand washing programs reduced gastrointestinal infections by 31% (Relative Risk 0.69, 95% CI, 0.58-0.81) and respiratory infections by 21% (RR 0.79,

CI, 0.66-0.95). Notably they also found that nonbacterial soaps worked just as well as antibacterial soaps. This large meta-analysis provides incontrovertible evidence of the value of hand-washing. Please remind your colleagues that washing hands saves lives!
Ref: Aiello AE, Am J Public Health, 2008; 98 (8): 1372-1381

5-day steroid treatment effective for acute COPD exacerbation

Steroid therapy reduces the length of hospital stay in adults with acute COPD exacerbations, but the optimal dose is unknown. This study involved 314 adults admitted to A&E departments in Switzerland with acute COPD exacerbation, who were randomized to either 5 days or two weeks of oral steroids

All patients got antibiotics and inhaled bronchodilators. The authors found that there was no benefit to 14 days of steroids compared to 5 days, in terms of recurrent exacerbations, quality of life assessments or HTN or hyperglycemia outcomes. Ref: Leuppi JD. JAMA 2013; 309(21): 2223-2231

Bell's Palsy: What improves outcomes?

Bells Palsy is a relatively common presentation to outpatient departments across Botswana. It is characterized by a peripheral facial nerve weakness and may be partial or complete. Evidence suggests that the highest incidence is in adults between 15-45 years. While it may be idiopathic in etiology, herpes simplex virus may be responsible in many cases.

In this study, researchers sought to determine if prednisolone or acyclovir improved outcomes. They randomized 551 patients to receiving either (1) 25mg prednisolone BD for 10 days, (2) acyclovir 500mg 5 times a day for 10 days, (3) both for 10 days or (4) placebo for 10 days. The primary outcome was the degree of facial paralysis.

They found that patients who received prednisolone were more likely to have less weakness at 9 months. They found no benefit to prescribing acyclovir. The combination of prednisolone and acyclovir was no better than prednisolone alone.

Ref: Sullivan, FM et al. N Engl J Med 2007; 357(16): 1598-1607.

Exposure to dogs may reduce eczema in children

The hygiene hypothesis proposes that a reduced exposure to infectious agents in early life can affect the developing immune system and increase susceptibility to allergic and auto-immune disorders. While allergic dermatitis is far less common in Botswana than in other parts of the world, clinicians often manage cases of eczema in the outpatient department.

In this study researchers looked at 21 publications to determine whether exposure to dogs, cats or other pets during pregnancy, infancy and/or childhood was associated with an increased likelihood of atopic dermatitis during childhood (12 years or younger).

They found that exposure to dogs compared to no pet exposure was significantly associated with a reduced risk of developing atopic dermatitis (RR=0.72, CI, 0.61-0.85). Exposure to pets in general (including both cats and dogs, as well as other pets) was also associated with a reduced risk (RR=0.75, CI, 0.67-0.85), but cats alone were not protective against eczema.

Ref: Pelucchi, C. J. Allergy Clin Immunol 2013; 132(3):616-622

TB increases the risk of DVT/PE

TB should be considered as an important risk factor for venous thromboembolism

Infections are risk factors for venous thromboembolism especially if severe and acute. However, the role of chronic infections such as active tuberculosis has not been well defined. Investigators in France reviewed a huge number of patient records (>27 000 patients) to determine if TB was an important risk factor for DVT or PE. They found that adults with active TB had a greater risk of venous thromboembolism than those without TB (Odds ratio, 1.55, CI, 1.23-1.97, P<0.001). No particular link was found between pulmonary TB and PE or between extra-pulmonary TB and DVT. This may suggest that TB increases the risk by promoting a hypercoagulable state rather than by causing intrathoracic venous compression.

This study was performed in a low-HIV prevalent setting. Established data has clearly demonstrated that HIV also increases the risk of DVT/PE. It is very likely that patients with both TB and HIV have an even greater risk of venous thromboembolism. Clinicians in Botswana, frequently managing patients co-infected with both TB and HIV should be aware of this risk. In order to reduce the risk of DVT/PE it is strongly advised that such patients should be started on heparin or low molecular weight heparins when admitted to hospital.

Ref: Clin Infect Dis, 2014; 58(4): 495-501

OUTREACH IN THE COMING MONTHS

Tsabong
(1st Tues of
Month)
Feb 4th
Mar 4th
Apr 8th

Hukunsti
(2nd Tues of
Month)
Feb 11th
Mar 11th
Apr 15th

Ghanzi
(3rd Tues of
the month)
Feb 18th
Mar 18th
Apr 22th

***BLH**
(1/2 Thurs of
the month)
Feb 13th
Mar 6th
Apr 3rd

***Mochudi**
(2/3 Weds of
the month)
Feb 12th
Mar 26th
Apr 23rd

***Thamaga**
(3/4)Thurs of
the month)
Feb 20th
Mar 27th
Apr 24th

Kanye 1 (1st
Fri of the
month)
Feb 14th
Mar 7th
Apr 4th

***Kanye 2** (3/4
Fri of the
month)
Feb 21th
Mar 28th
Apr 25th

***Good Hope**
(1st Wed of
the month)
Feb 5th
Mar 5th
Apr 2nd

***Mahalapye**
Feb 18th
Mar 19th
Apr TBC

Got a clinical question about a complicated medical patient or a patient with HIV?

Mike Reid: 267 724 78 777 OR Miriam Haverkamp: 267 76516520