

# EACS Treatment Guidelines V10.0 An introduction to the 2019 Major Revisions

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### **Presenter Disclosure Information**

In compliance with the Conflict of Interest Policies, the European AIDS Clinical Society (EACS) requires the following disclosure from the presenters:



#### **Manuel Battegay**

- No participation in Speakers Bureau ever
- No stocks or stock options of pharmaceutical or biotech companies ever
- No participation in Satellite Meetings since 2011
- No participation in Advisory Boards since 2014

COI mandatory for everyone involved in the EACS Guidelines



# Aims of the EACS Guidelines

The scope of the EACS guidelines is to



Provide easy accessible recommendations to clinicians centrally involved with the care of PLWH

Cover a large and geographically diverse area

Not to be considered as a full overview of all aspects of HIVinfection, but rather as a continuously updated overview of the most relevant clinical issues in HIV with emphasis on co-morbidities



# Summary of Changes from v9.1. to v10.0

#### ART section

- What to start with, pages 12-13
  - New recommendation favouring unboosted INSTI with high genetic barrier (DTG or BIC) as third agent for treatment-naïve PLWH initiating treatment
  - 2 NRTIs + DOR included in recommended regimens
  - · When indicated, TDF/3TC has been added as a backbone
  - Dual therapy with DTG + 3TC has been upgraded to recommended regimens
- Primary HIV infection, page 14
- High genetic barrier INSTI or PI/b recommended for initial therapy if resistance testing is not available
- Switch strategies for virologically suppressed persons, page 15
- DTG + 3TC has been included in dual therapies supported by large clinical trials
- DRV/b + RPV has been included as dual therapy option supported by small trials
- Monotherapy with PI/b not recommended
- Treatment of pregnant women living with HIV or women considering pregnancy, page 17
- Whole section has been updated with treatment guidance regarding different scenarios (Tables 1, 2 and 3)
- ART in TB/HIV co-infection, page 20
- New tables have been included (ART in TB/HIV co-infection and DDIs)
- Post-exposure prophylaxis (PEP), page 22
- TAF/FTC, RAL qd and BIC have been included as possible drugs to include in a PEP regimen
- Pre-exposure prophylaxis (PrEP), page 23
  - TAF/FTC has been included as alternative in MSM and transgender women

#### DDI section

# DDI and other prescribing issues in PLWH - a new individual section

Two new tables: "Top 10 Drug Classes to Avoid in Elderly PLWH" and "Non-HIV Drugs Requiring Dosage Adjustment in Renal Insufficiency" have been developed to prevent inappropriate prescribing in elderly PLWH. pages 45, 47, 48



#### Co-morbidity section

- All tables have been updated with the addition of BIC and DOR and older ARVs (including older PIs, ddl and d4T) have been removed from all sections apart from that on lipoatrophy, pages 57, 67, 74-76, 78, 87, 90.01 and 94.
- A comment has been included on use of e-cigarettes in the lifestyle intervention section, page 53
- Screening for kidney disease recommends the use of albumin/creatinine ratio for glomerular disease and protein/creatinine ratio for screening for and diagnosing ARV-related tubulogathy, pages 64-66
- There are updated targets for lipids and a change in threshold for ART modification from 20% 10-year risk of CVD to 10% 10-year risk of CVD, page 54 and 60
- Blood pressure targets have been updated, pages 54-55
- The medical management of hypertension has been updated to include amended drug sequencing suggestions and recommendations on drugs to use, page 56
- There is an additional 4<sup>th</sup> step in the work-up of liver disease in PLWH to include risk stratification based on risk prediction tools and transient elastography and an updated algorithm for surveillance of varices, page 60
- There is a minor update for the screening guidance for HCC in noncirrhotic PLWH with HBV, pages 8, 52, 71 and 95
- In the sexual health section, there is a statement about U=U, including how this information affects options for conception for PLWH and their partners and screening for menopause, page 80
- In the section on depression, there is a statement on the impact of depression on overall well-being, page 84
- In the cognitive guidelines, recommendations for modification of ART are based on either CSF resistance testing or on likely ART toxicity, page 88

#### Viral Hepatitis Co-infections section

- The chapter has been renamed "Clinical Management and Treatment of Viral Hepatitis Co-infections in PLWH", page 95
- The structure of the chapter has been reorganised: General recommendations, page 95, Treatment and Monitoring of Persons with HBV/ HIV Co-infection, page 96 and Treatment and monitoring of Persons with HCV/HIV Co-infection, page 97
- HCC screening recommendations have been updated with the Co-morbidity panel, pages 8, 52, 71 and 95
- Practical points on diagnosing hepatic fibrosis have been updated and a table on cut-off values of non-invasive tests for the detection of significant fibrosis and cirrhosis have been added, pages 95 and 102
- The section on HBV reactivation has been updated, page 96
- Recommendations for persons with failure to DAA treatment have been updated, page 97
- The DAA table has been updated and split into two parts. One with preferred regimens and one with alternatives, pages 98 and 99
- The figure on management of recently acquired HCV infection has been updated, page 101
- The sections on HEV and HDV have been updated, pages 95 and 103

#### Opportunistic Infections section

- The table on when to start ART in the presence of opportunistic infections has been added, page 104
- A table on clinical presentation and management of Immune Reconstitution Inflammatory Syndrome (IRIS) has been added, page 104
- Treatment of the following Ols has been updated: CMV, HSV, VZV, histoplasmosis, cryptococcosis, pages 108-111
- Treatment details of Initial and recurrent genital/mucocutaneous HSV has been removed from the Ols section. A cross reference to the Sexual and Reproductive Health of Women and Men Living with HIV section was made instead, page 110
- Treatment of talaromycosis has been added, page 110
- Details on management of MDR-TB have been added to the TB section, page 115, as well as a table detailing doses for all TB drugs, major side effects and caution when using with ART, page 117

For more detailed summary of changes made from v9.1 to v10.0, please see http://www.eacsociety.org/guidelines/Details.from-version-9.1to10



EACS Guidelines are available online at http://www.eacsociety.org and in the EACS Guidelines App

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# **Video links**

EACS Guidelines	Video lectures	Link to video lecture
Primary HIV Infection	When to Start ART Part 1	https://vimeo.com/197164442/93941a8e75
	When to Start ART Part 2	https://vimeo.com/197167665/3f00ac2634
	What ART to Start Part 1	https://vimeo.com/197374541/32232bd037
	What ART to Start Part 2	https://vimeo.com/197378793/215317ddab
Switch Strategies for Virologically Suppressed Persons	How to Change ART	https://vimeo.com/197161843/ae0c46e0be
Virological Failure	Adherence and Prevention of HIV Drug Resistance	https://vimeo.com/197381327/d7e972c0d5
Pre-exposure Prophylaxis	PrEP Part 1	https://vimeo.com/196714648/6a196a71a4
	PrEP Part 2	https://vimeo.com/196716750/a12a32989b
Adverse Effects of ARVs and Drug Classes	Adverse Effects and Monitoring	https://vimeo.com/197275138/3df1c99e55
Cancer: Screening Methods	Clinical Management of Cancers and HIV Part 1	https://vimeo.com/197398883/6cbeebb66e
	Clinical Management of Cancers and HIV Part 2	https://vimeo.com/197748761/68cc01229a
	Epidemiology of Cancers Part 1	https://vimeo.com/197749519/afea560124
	Epidemiology of Cancers Part 2	https://vimeo.com/197749948/e7e5062f2d
Prevention of CVD	HIV and CVD, CKD, Endocrinology	https://vimeo.com/197488153/396253a733
Kidney Disease: Definition, Diagnosis and Management	HIV and CVD, CKD, Endocrinology	https://vimeo.com/197488153/396253a733
Lipodystrophy: Prevention and Management	HIV and CVD, CKD, Endocrinology	https://vimeo.com/197488153/396253a733
Algorithm for Diagnosis and Management of HIV-Associated Neurocognitive Impairment (NCI) in Persons without Obvious Confounding Conditions	CNS and HIV Part 1	https://vimeo.com/197280954/e995f1c097
	CNS and HIV Part 2	https://vimeo.com/197370416/ee3655aa09
Diagnostic Procedures for HCV in Persons with HCV/HIV Co-infection	Hepatitis C and HIV Co-infection Part 1	https://vimeo.com/197259934/bc5cac91d1
	Hepatitis C and HIV Co-infection Part 2	https://vimeo.com/197261826/0462d2df0e
	Hepatitis C and HIV Co-infection Part 3	https://vimeo.com/197262690/a323b6cd72
Introduction to OIs	HIV and the Management of IRIS Part 1	https://vimeo.com/197762901/a147257ffc
	HIV and the Management of IRIS Part 2	https://vimeo.com/197765956/9b61e5d15d
	Pulmonary Infections Part 1	https://vimeo.com/197388161/dc24235ab6
	Pulmonary Infections Part 2	https://vimeo.com/197389876/7c26fb8551
	Pulmonary Infections Part 3	https://vimeo.com/197392161/f90020ae21
	CNS and HIV-related Opportunistic Infections Part 1	https://vimeo.com/197752868/34462456dd
	CNS and HIV-related Opportunistic Infections Part 2	https://vimeo.com/197758431/6b2939c62a
Diagnosis and Treatment of TB in PLWH	Tuberculosis and HIV Co-infection Part 1	https://vimeo.com/196723861/7a067d0254
	Tuberculosis and HIV Co-infection Part 2	https://vimeo.com/197161188/4e881b687c





# The guidelines v10.0 consist of

- Summary of changes from v9.1 to 10.0
- Part I: Assessment
- Part II : ART
- Part III: DDI and other prescribing issues
- Part III: Co-morbidities
- Part IV: Viral hepatitis and Co-infections
- Part V : Opportunistic Infections
- References
- Video links





# **EACS Guidelines Management**

Each part of the guidelines is

#### Managed by panels of

- Experienced European HIV experts
- External experts

#### Reviewed by

- Community representatives, Wave and cross-panel experts

#### Governed by

A 3-person leadership group

 Panel Chair, Co-chair and Young Scientist



# The guidelines content is managed by

The EACS Medical Secretariat; guideline coordination chair and assistant working closely with the EACS Secretariat



# The working for the Guidelines

- Leadership TC's regularly and two F2F/year
- Grade versus non Grade
- GUIDELINES

- Panel TC's and F2F
- Submission and discussions of new content by Mail



## **EACS Guidelines Availabilities**









- Constant Expansion of Guidelines
- Since 2015 as a free App for IOS and Android systems
- NEW: Webversion!
  - by the Sanford Guide
- Online on the EACS website
- http://www.eacsociety.org/guidelines/eacs-guidelines/eacs-guidelines.html
- In print as a booklet

# **Acknowledgements**

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The EACS Medical Secretariat is responsible for the coordination and update of the EACS Guidelines based on the recommendations from the five EACS panels.

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We hope you will enjoy the 2019 EACS Guidelines!

