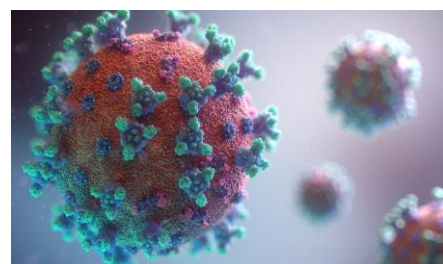


ADVISORY ON HIV SERVICES DURING TIMES OF COVID-19 PANDEMIC

People Living with HIV (PLHIV), especially those with low CD4 cell counts and advanced HIV disease, are more prone to get different protozoal, fungal, bacterial and viral infections as compared to rest of the general population. We are passing through a pandemic phase of novel coronavirus disease (COVID19). There is currently no data to suggest that PLHIV that are stable on ART are at a higher risk of acquiring this new coronavirus (SARS-CoV 2) or develop severe COVID19 if they do acquire it. However, it is important to be prepared to prevent this new infection among PLHIV as the mortality due to this new coronavirus is higher among those with old age and certain co-morbidities, as cancers, diabetes and cardiovascular diseases, which are common in PLHIV.

PLHIV can get the infection from a SARS-CoV 2 infected person through droplets produced on coughing or sneezing that can enter through nose, mouth and eyes; other close contact with infected persons and indirect contact with contaminated surfaces, objects, or items of personal use.

HIV infected persons should remain vigilant for signs and symptoms of COVID19 which generally are the similar as for seasonal flu viz: *moderate to high grade fever, dry cough, sore throat, running or stuffy nose and fatigue*. Some people may have *diarrhea and vomiting* associated with COVID19. Severe forms of COVID19 are associated with pneumonia that can request mechanical ventilation support.

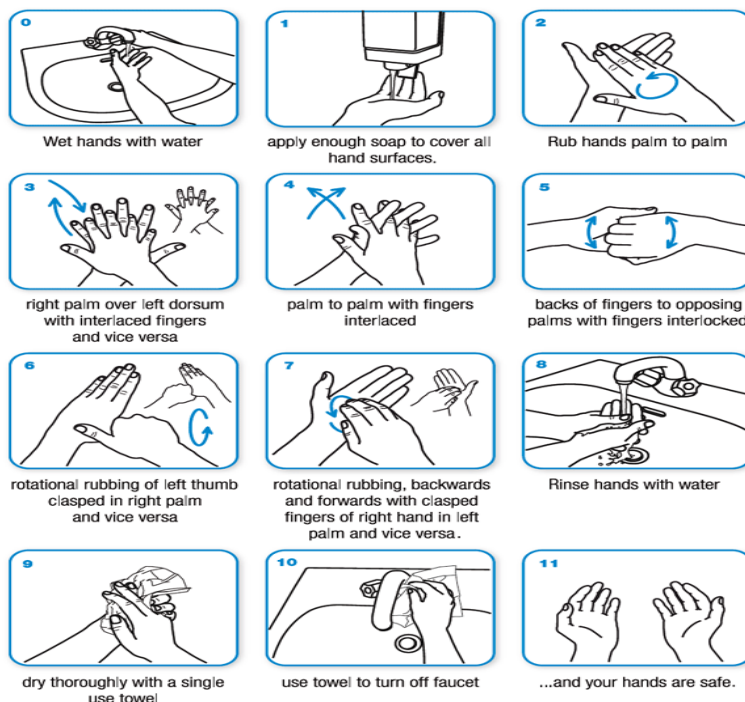


This note provides guidance on prevention of COVID19 among PLHIV and access to ART services

Guidance for PLHIV

HIV-infected persons are routinely counselled to follow practices to prevent infection control. The guidance below is to reinforce these practices

- I. Ensuring hand hygiene is most important. Frequent hand washing is useful, especially after direct contact those who are ill or their environment. Washing with soap and water for 40-60 seconds is the best way to prevent infection. An alcohol-based hand rub can also be used, if hands are not visibly soiled, rub it on hands for 20-30 seconds.
- II. Do not touch your eyes, mouth or nose with unclean hands. Follow no-touch social greetings by preferring “namaste” or salaam or hand waving over handshake and hugs.
- III. Keep a distance of at least 1 meter from anyone coughing or sneezing to prevent droplet infection.
- IV. Avoid close contact with people suffering from acute respiratory infections. People with symptoms of acute respiratory infection should practice respiratory hygiene and wear a medical mask and seek medical care.



- V. Practice respiratory hygiene which includes following:
- Turn head away from others when coughing/sneezing • Cover the nose and mouth with a tissue or bend elbow. • If tissues are used, discard immediately into the trash • Clean your hands with soap and water or alcohol-based sanitizers/rub after coughing/sneezing. Do not spit in the open.
- VI. HIV-infected persons should maintain a healthy lifestyle, eat right, get enough sleep, and reduce stress as much as possible. Staying healthy reduces risk of getting infected. Staying healthy also helps immune system fight off infection should it occur.
- VII. If you feel unwell, seek medical attention. If you have a fever, cough, or difficulty breathing, stay indoors. Call healthcare professionals and follow their advice. Do not rely on rumors or hearsay and avoid self-medication.
- VIII. DO NOT panic. Continue ART along with all these precautions and maintain good nutritious diet with locally available food options.

Guidance for ART Centers

- Fast tracking of patients with cough, fever and other flu like symptoms to be ensured
- ART centers to ensure universal work precautions are in place and provide sanitizers at entrance of ART centers, provide masks for patients with cough (others do not need a mask).
- ART centers to space out patients over the day and not call very one in morning hours, prioritize those with cough, dispense multi month drugs as far as possible.
- Follow national guidelines for infection prevention and control in healthcare facilities including thorough cleaning of environmental surfaces with water and detergent and applying commonly used hospital level disinfectants (such as sodium hypochlorite, 0.5%, or ethanol, 70%) should be carried out daily at all centers.
- Display posters/play videos on respiratory hygiene and proper hand washing.
- Any person with symptoms suggestive of infection should be referred to a designated facility for further evaluation and management.
- Ensure that vaccinations are up to date (influenza and pneumococcal vaccines).



Guidance for Service delivery

- Provide multi month dispensing (MMD) (3 months) of ARVs for all stable patients. Adequate supplies of medicines to treat coinfections and comorbidities should also be ensured.
- Provide ARVs to one family member in case spouse/children are also on ART.
- For patients doing well (but not fitting in stable patient definition) provide 2 months drugs followed by a call by counsellor every month.
- Consider community dispensation through Care and Support Centers/ ORW/volunteer/PLHIV networks.
- For patients with any OI, advanced disease or fresh initiators, they need to be followed up monthly as per practice.
- Ensure enough ARV stocks are available/procured while doing MMD.
- An orientation on prevention activities be reinforced among the ART centre staff. It is crucial to take care of ART staff as well.
- There have been some trials with LPV/r and other ARVs but there is no evidence that it is effective for COVID 19 treatment or prevention of SARS-COV 2 infection.

For more information visit

- <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
- <https://www.who.int/news-room/q-a-detail/q-a-on-covid-19-hiv-and-antiretrovirals>