

## ARV Clinics

Antiretroviral Therapy is used to manage HIV. HOPE Cape Town was one of the first organisations to sponsor ART for children in South Africa before it was publically available. Now South Africa has an extensive ART programme through public sector clinics. HOPE Cape Town supports these clinics by providing Community Health Workers, clinical outreach by the HOPE doctors, training and resources.

### History

HOPE Cape Town was one of the first organisations in South Africa to initiate antiretroviral therapy for HIV positive children and caregivers. Families, primarily from Germany, sponsored the treatment of a child for a year. HOPE Cape Town employed a part-time doctor to treat, adapt medication and monitor the progress of the patients.

In the beginning, HOPE Cape Town wanted to help as many children as possible. However, we learnt that there had to be selection criteria for inclusion on the programme as many children were too weak to benefit from the medication available then. These were very difficult decisions to make for the people concerned with this part of the programme. However those patients who received HAART generally did very well. HOPE Cape Town provided care for them until such time as the governmental public rollout of ART was available. The last 19 patients were transferred into the care of the provincial authorities in December 2007.

From the beginning there was careful scientific documentation of the response to treatment. This data has been given to the Children's Infectious Diseases Clinical Research Unit (KID-CRU) based at Tygerberg Hospital. The results from KID-CRU research were instrumental in the development of the government antiretroviral treatment programmes.

### HAART Therapy – Current and future Hope

HAART is now widely available in the Western Cape through the public sector Community Health Clinics (CHCs). There has been an impressive uptake of HAART services and currently ART access in eligible children has increased from 17% in 2009 to 67% in 2012\*. Thus the demand on the CHC's has dramatically increased. HOPE Cape Town aims to assist the CHC's to provide good quality HIV care by employing Community Health Workers (HCHW) to assist in the clinics, and by offering Paediatric ARV outreach by the HOPE doctors. HCHW's assist in educating, counselling and encouraging patients, and by offering HIV tests and adherence advice.

*\*UNAIDS. 2013 Progress report on the Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping their Mothers Alive.*

## Clinical Outreach

The HOPE doctors are involved in the paediatric HIV clinic in the Delft community.

Together with a doctor from Tygerberg Hospital, one of the HOPE doctors will attend Delft CHC once a week. This clinic cares for approximately 150 HIV positive children younger than 15 years old. Together the 2 doctors see 20 -30 children per clinic morning.

## Doctor responsibilities include:

- Confirming the HIV diagnosis in referred children, and assessing eligibility for ARVs
- Routine follow-up of infected children, not yet on ARVs. This involves careful clinical follow-up, including WHO staging, anthropometry, developmental assessments, social circumstances assessment and CD4 testing
- Educating caregivers and children about HIV and ARVs, and ensuring caregivers are competent to manage lifelong therapy, and potential side-effects
- Starting children on ARVs
- Routine follow-up of children on ARVs, including management of ARV therapy, as well as co-morbidities and inter-current illnesses. This involves weighing, measuring, examining and taking blood from children, prescribing medicine and counselling caregivers
- Assessing children who are failing treatment, and changing regimens where necessary
- Managing the HOPE funded resistance testing, both at Delft and for doctors working at other facilities. The results of the resistance testing are used to assist doctors in choosing the appropriate treatment.
- Disclosure of HIV status to children, using picture tools and age appropriate explanations
- Training of community health workers working at the site, so that they can assist with tracking children lost to follow-up
- Managing the patient tracking system, and ensuring that patients who miss appointments are phoned or visited, and brought back into care



- Conducting grass-roots level research at the clinic facility. The latest project looked at reasons why children fail HIV treatment, and involved interviews with various staff members, caregivers and children on treatment