Antiretroviral therapy (ART), immune response and clinical outcomes among children and young people seen for paediatric HIV care in England in 2022-2023

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BACKGROUND

- The number of children and young people living with HIV in England continues to decline.
- Ongoing surveillance of this population is important to optimise health and care outcomes.
- The Children's HIV and AIDS Reporting System (CHARS) collects health and clinical care data on all children and young people seen for paediatric HIV care in England until transition to adult care (on behalf of NHS England).

RESULTS (cont.)

Key demographics	% among those in active paediatric care
Median age at last follow up	15 years
Median age at diagnosis	2.1 years
Female	52.8%
Born outside the UK	41.0%
Black African	74.8%
Acquired HIV vertically	93.7%

 We aimed use CHARS data to describe HIV-related outcomes for children and young people seen for paediatric HIV care in England in recent years.

METHODS

• Analyses included children and young people in CHARS in active paediatric HIV care at last report, with a report received between January 2022 to June 2023.

• <u>Definitions</u>

- Undetectable HIV viral load: ≤200 copies/mL, per BHIVA guidelines
- Immunological status:
- Stage 1: ≥1,500 cells/mm3 if <1 year, ≥1,000 if <6 years, and ≥500 if ≥ 6 years

 A recent viral load was available for 260 of 266 children and young people on ART.



4.2% had viral load >1000 copies/mL

 A CD4 count measurement was available for 259 of 266 children and young people on ART.



Figure 2. Viral load at last reported follow-up among 260 children and young people on ART 2022-2023, by age group

- Stage 2: 750-1,499 cells/mm3 if <1 year, 500-999 if <6 years, and 200-499 if ≥ 6 years</p>
- Stage 3: <750 cells/mm3 if <1 year, <500 if <6 years, and <200 if ≥ 6 years ,per CDC paediatric HIV CD4 cell count infection categorisation

RESULTS

- Of 270 children and young people in active paediatric HIV care, 98.5% (266/270) were on ART at their last appointment. Most (96.3%) of those on ART were on a ≥3 drug regimen (Figure 1).
- 31.6% of those on ≥3 drug regimens were on Triumeq (ABC+3TC+DTG).

Figure 1. ART regimen at last reported follow-up (Jan 2022 – June 2023) among 266 children and young people on ART

350	2 drug and other regimens	3+ drug (2 NRTI + anchor(s)) cART regimens
300		
La 9 250		



CONCLUSIONS

 Clinical markers among children and young people in active paediatric care in England seen in 2022-2023 are reassuring, with nearly 90% virologically suppressed and 80% with Stage 1 immune status.



*Ritonavir and Cobicistat, included as booster drugs as part of a combination with DTG or 3TC and DRV, were not counted as individual drugs. "Other cART" regimens include NRTI+NtRTI+INSTI, NRTI+NNRTI+NtRTI, NRTI+PI+NtRTI+INSTI, NRTI+NNRTI+PI+NtRTI, and NRTI+NNRTI+PI+NtRTI

- Nearly all children and young people are on some form of ART, with most on a ≥3 drug regimen, such as Triumeq (ABC+3TC+DTG).
- National surveillance of children and young people accessing paediatric HIV care remains vital to ensure unique needs of this population are met.

CONTACT

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<u>www.ucl.ac.uk/chars</u> <u>emily.dema.19@ucl.ac.uk</u> @ISOSS_UCL A **big thank you** to all respondents to CHARS and ISOSS, rest of the ISOSS/CHARS team, and our colleagues at CHIPS. ISOSS and CHARS collect patient data under legal permissions granted under Regulation 3 of The Health Service (Control of Patient Information) Regulations 2022



