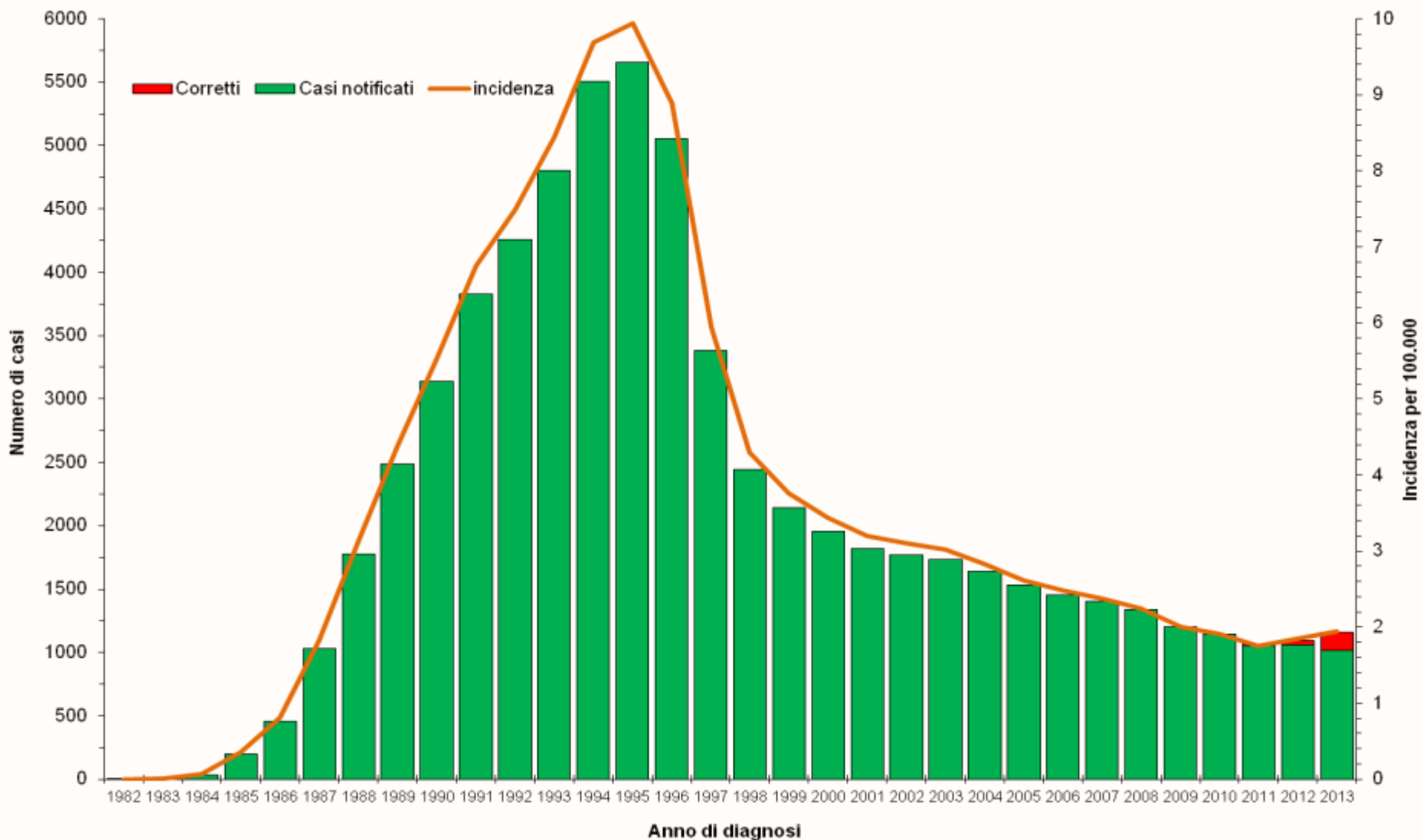


Numero delle persone diagnostiche e in cura nel 2012
94.146
 (prevalenza 0.16%)

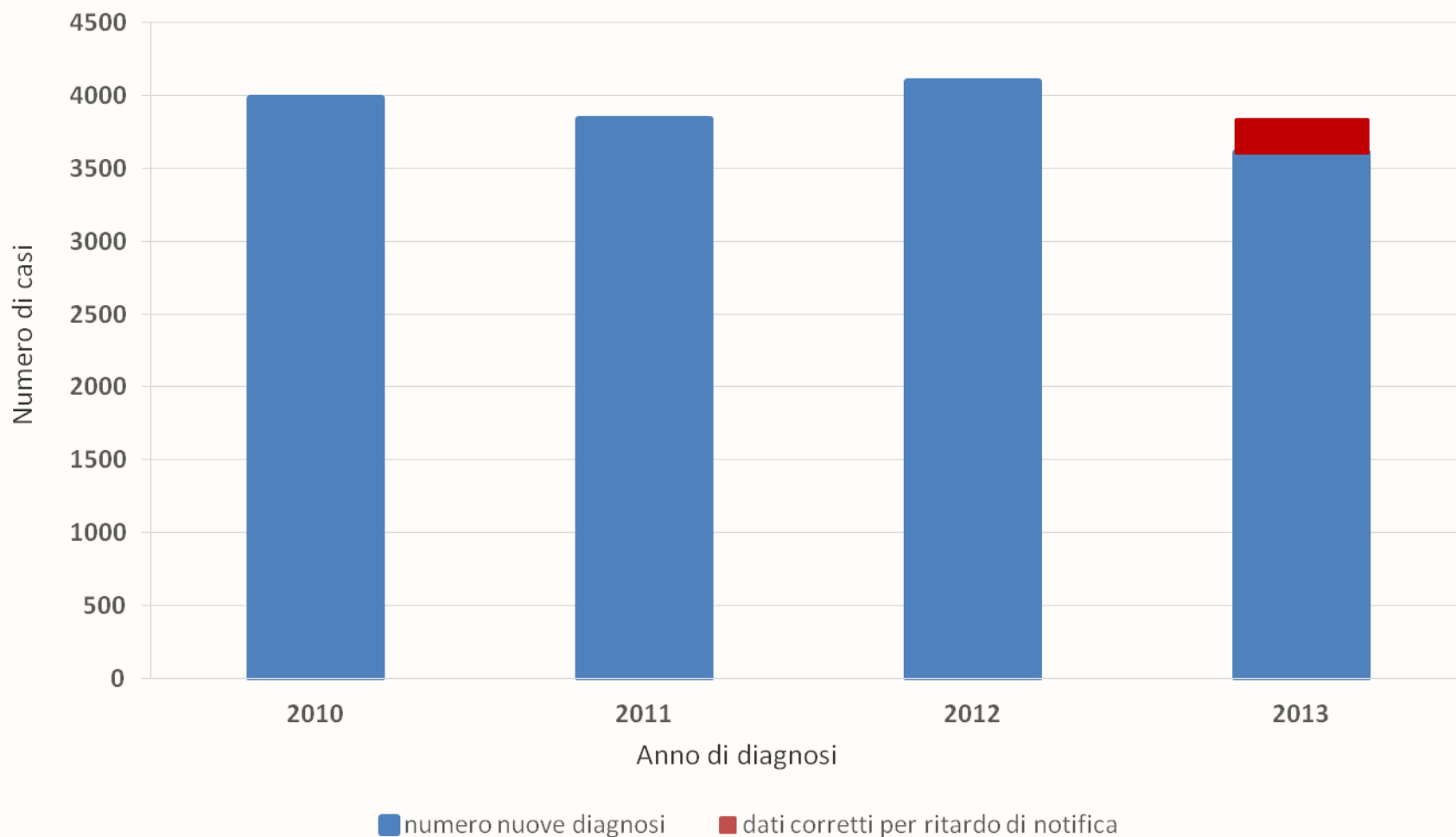
Figura - Prevalenza delle persone viventi con l'HIV e con l'AIDS (per 100 residenti)

Raimondo et al, Notiziario ISS 2014

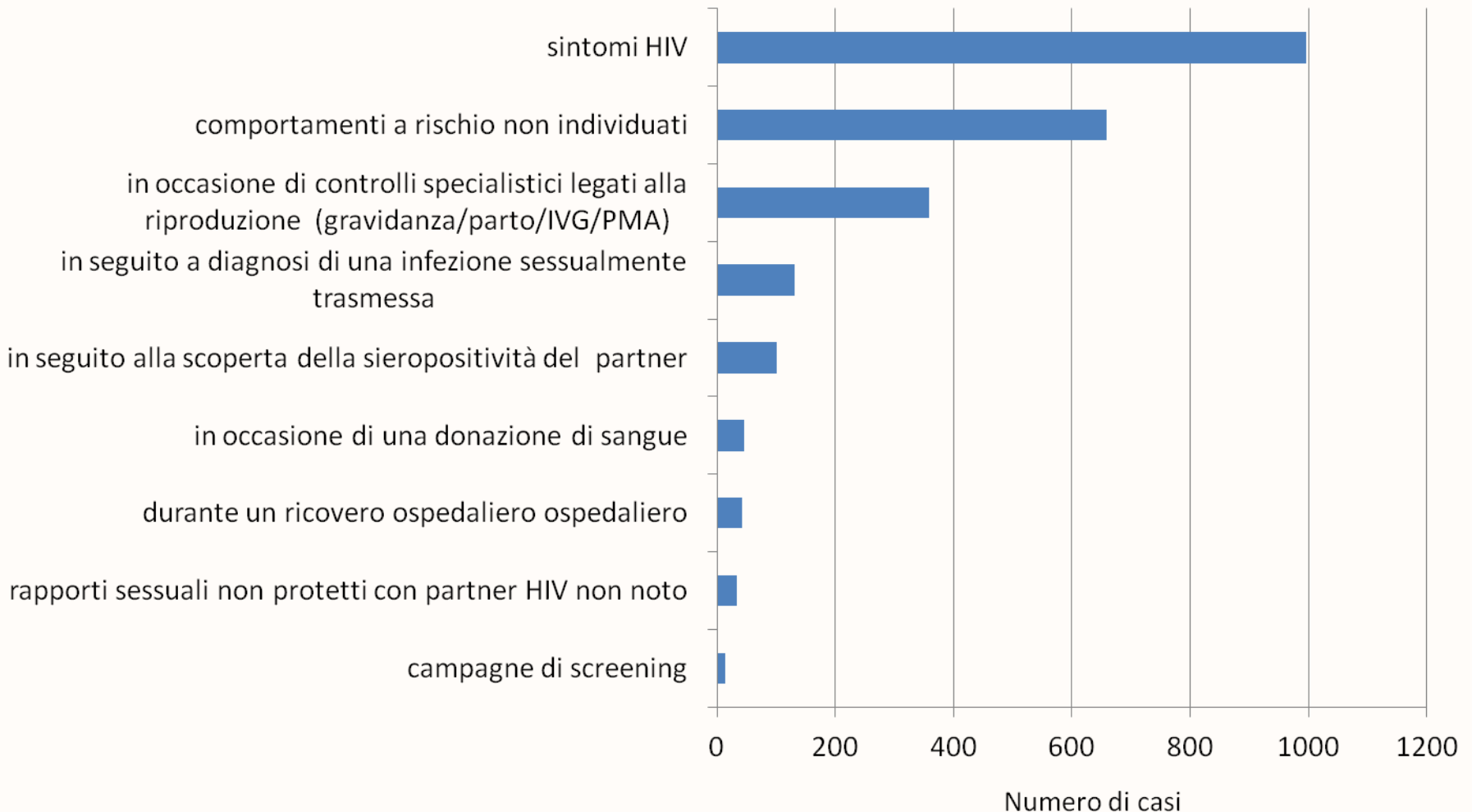
Numero dei **cas** di AIDS e incidenza per anno di diagnosi, corretti per ritardo di notifica(1982-2013)



Numero di nuove diagnosi di infezione da HIV in Italia (2010-2013)



Motivo di esecuzione del test delle nuove diagnosi di infezione da HIV (2013)



Proportion of HIV cases diagnosed late (CD4<350 cells/mm³), 2013, EU/EEA

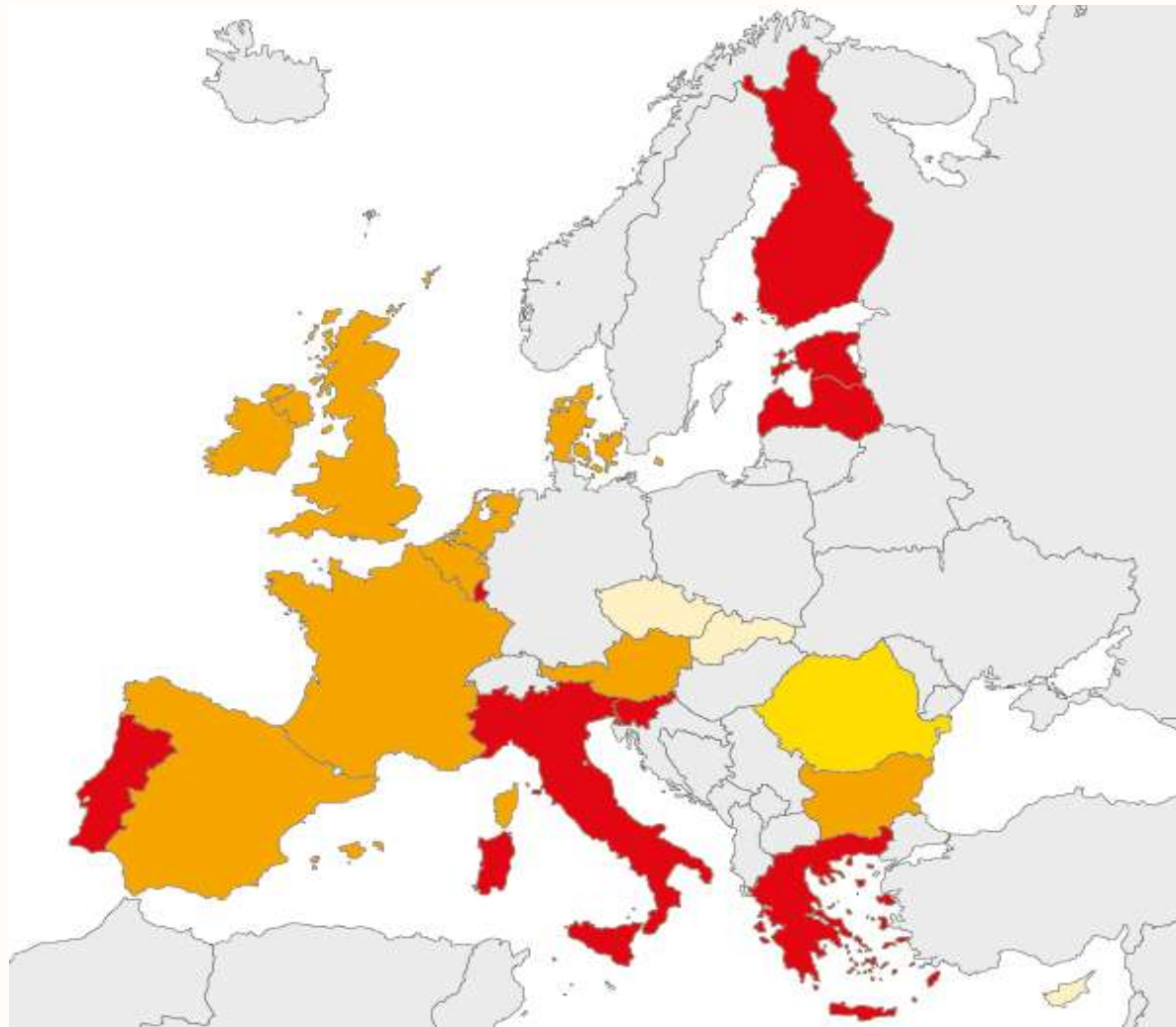
< 30%

30 to <40%

40 to 50%

> 50%

Not included or
not reporting



Source: ECDC/WHO (2014). HIV/AIDS Surveillance in Europe, 2013

Source: ECDC/WHO (2014). HIV/AIDS Surveillance in Europe, 2013

*Among cases with CD4 count at diagnosis reported

Conclusioni (1)

Mondo

- Alta prevalenza in Africa: 47% vs
0.3% in North America and Western Europe
- Riduzione delle nuove infezioni e delle morti stimate
- Aumento della disponibilità della terapia antiretrovirale e della speranza di vita

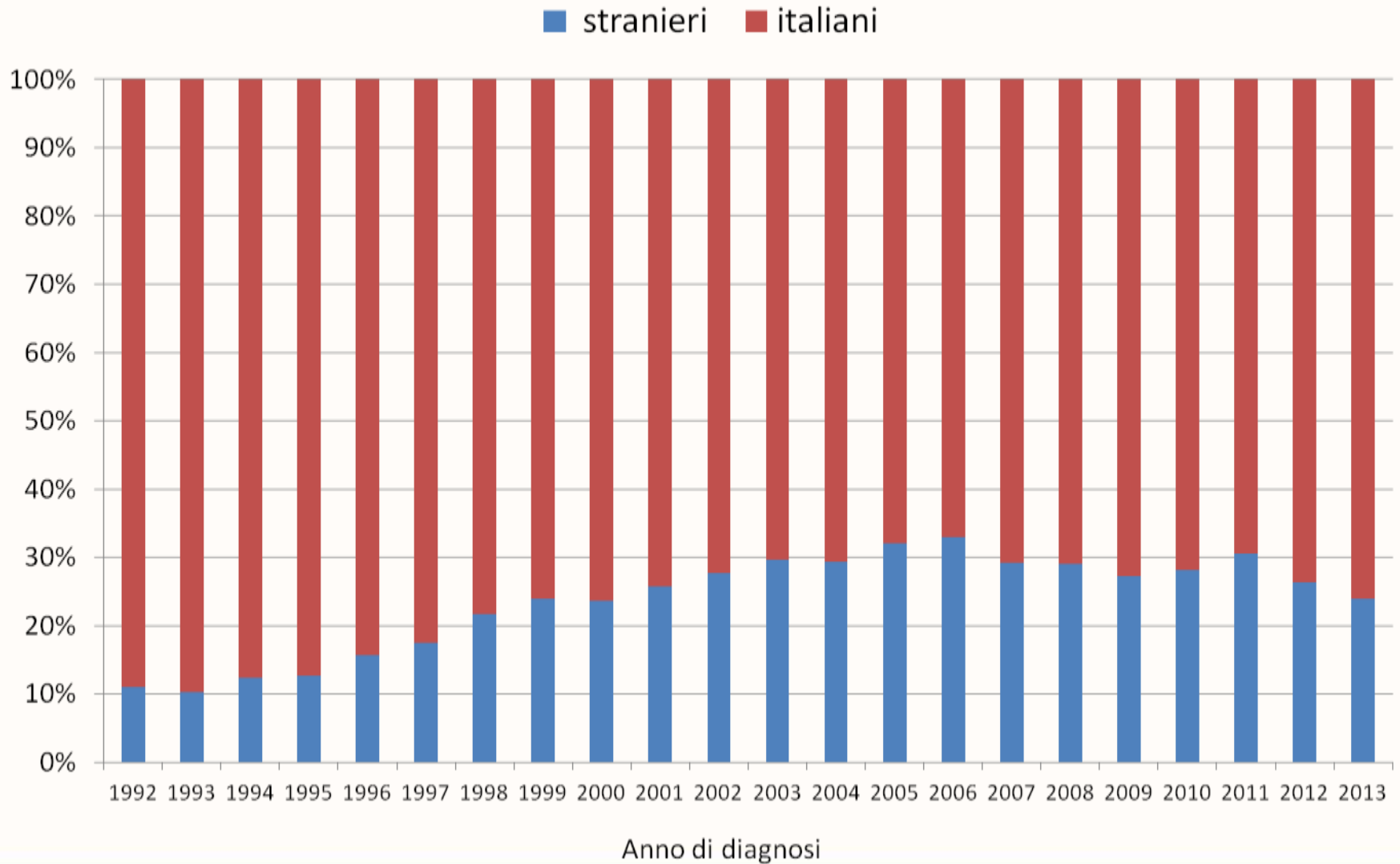
Europa e Italia

- No riduzione nuove diagnosi, aumento della persone viventi con HIV, invecchiamento, costi elevati trattamento
- Trasmissione sessuale e in particolare in MSM
- Diagnosi spesso tardiva
- Gap ~20% diagnosi – trattamento - soppressione

Conclusioni (2)

- Necessità di interventi di prevenzione mirati e basati sull'evidenza (**basta con campagne pubblicitarie per favorire offerta generica del test!!!**)
- Intervento di prevenzione necessario soprattutto tra MSM
- Non c'è grande evidenza di mixing con stranieri in Europa

Distribuzione percentuale delle nuove diagnosi di infezione da HIV, per nazionalità e anno di diagnosi



PROUD: Immediate vs Deferred PrEP in High-Risk MSM in “Real World” Trial

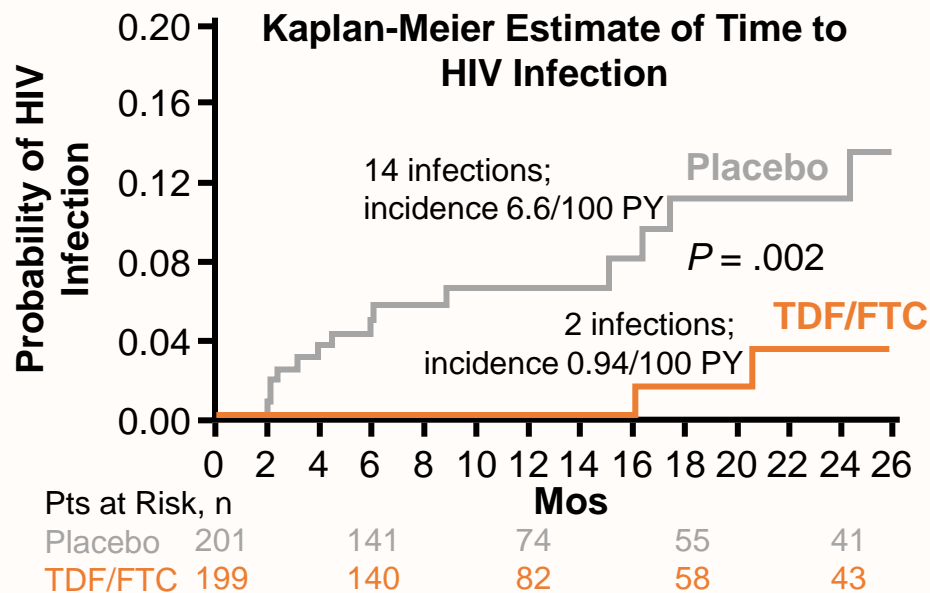
- Randomized, open-label trial of daily oral TDF/FTC PrEP in HIV- MSM in 13 clinics in London
 - Immediate (n = 267) vs
 - Deferred for 12 mos (n = 256)
- Primary endpoint: HIV infection in first 12 mos
- **86%** reduction in risk seen over 60 wks with immediate PrEP (90% CI: 58% to 96%, $P = .0002$)
 - Rate difference: 7.6 (90% CI: 4.1-11.2)
 - Number needed to treat to prevent 1 infection: 13 (90% CI: 9-25)

| HIV Incidence | | |
|---------------|-------------|---------------------------|
| Group | Infected, n | Incidence/100 PY (90% CI) |
| Immediate | 3 | 1.3 (0.4-3.0) |
| Deferred | 19 | 8.9 (6.0-12.7) |

- 2 of 3 infected persons in immediate group seroconverting at study entry or shortly after first dose of PrEP
- M184V/I observed in 3/6 patients who seroconverted
- No K65R observed
- High rate of STIs seen in both groups
- DMSB interrupted trial; recommended that all participants be offered PrEP

ANRS Ipergay: On-Demand Oral PrEP in High-Risk MSM

- Randomized double-blind trial of event-driven oral TDF/FTC* (n = 199) vs placebo (n = 201) (both with prevention services) in France
 - 2 tablets taken 2-24 hrs before sex
 - 1 tablet 24 hrs after sex
 - 1 tablet 48 hrs after first event-driven dose
- Primary endpoint: HIV seroconversion
- **86%** reduction in risk seen in PrEP arm (95% CI: 40% to 99%, $P = .002$)
 - Number needed to treat for 1 yr to prevent 1 infection: 18
 - Median of 16 pills taken per mo in each arm



- In pts with infection, no TFV found in serum in last 2 visits
- 4 cases of acute HCV infection noted among lab abnormalities
- DSMB stopped trial early and recommended all participants start PrEP

*On-demand PrEP strategy not FDA approved.

Molina JM, et al. CROI 2015. Abstract 23LB.

CDC PrEP Guideline: For Which Patients Is PrEP Recommended?

- PrEP is recommended as one prevention option for the following adults at substantial risk of HIV acquisition
 - Sexually active MSM
 - Heterosexually active men and women
 - Injection drug users

| | MSM | Heterosexual Women and Men | Injection Drug Users |
|--|---|---|--|
| Potential indicators of substantial risk of acquiring HIV infection | <ul style="list-style-type: none"> • HIV-positive sexual partner • Recent bacterial STI • High number of sex partners • History of inconsistent or no condom use • Commercial sex work | <ul style="list-style-type: none"> • HIV-positive sexual partner • Recent bacterial STI • High number of sex partners • History of inconsistent or no condom use • Commercial sex work • In high-prevalence area or network | <ul style="list-style-type: none"> • HIV-positive injecting partner • Sharing injection equipment • Recent drug treatment (but currently injecting) |