Policy Briefing:

The Future of HIV Treatment and the Hope for a Cure

Overview:

This policy briefing synthesizes key insights from the Cameroon Townhall for Healthcare Professionals meeting held on December 2, 2023, the day after World AIDS Day, focusing on the theme "The Future of HIV Treatment and the Hope for a Cure," presented by Dr. Boghuma Kabisen Titanji, infectious disease physician-scientist at Emory University.

Context:

Cameroon has about half a million people living with HIV and close to 10,000 new infections a year (2022). Treatment coverage and viral suppression are near 80%, but PrEP reached only about 4,377 people in 2022 and only 39% of young children with HIV are on treatment, while donor funding for HIV has fallen by about 57% in ten years.

Key Issues:

1. **Prevention gap:** PrEP is up to 98% effective but little used in Cameroon, and the 'high risk' framing and links to promiscuity discourage uptake, especially among young women.
2. **Children left behind:** Only 39% of children aged 0 to 4 with HIV in Cameroon are on treatment, and new long acting options are designed and tested mainly in adults.
3. **Access to long acting drugs:** Injectables and implants improve adherence and reduce stigma, but are costly, under patent and do not treat hepatitis B.
4. **Cameroon absent from trials:** HIV cure and vaccine trials are concentrated in East and Southern Africa; regulatory barriers and few trained investigators make starting a trial in Cameroon very difficult.
5. **Misinformation:** Claims by some religious leaders and traditional healers, and COVID vaccine misinformation, undermine treatment and could hinder future cure strategies.

Discussion Highlights:

- HIV control gains are fragile and depend on sustained funding.
- PrEP should be prescribable by any trained clinician and framed without stigma.

- Cameroon's diverse HIV strains make local participation in research important.
- Unpublished local innovation, such as Prof. Victor Anomah Ngu's work, cannot be credited or built on.
- Clinicians need clear guidance on disclosure in discordant couples under Cameroonian law.

Recommendations:

- **Scale up PrEP and remove stigma:** MINSANTE and the national AIDS programme should expand PrEP beyond specialist clinics, allowing GPs, nurses and trained pharmacists to prescribe it with baseline and periodic HIV testing, and drop 'high risk' labels from guidance and messaging. First step: review PrEP guidelines and training materials with community groups of people living with HIV.
- **Close the paediatric treatment gap:** MINSANTE, regional delegations and partners should prioritise testing and treatment of children, especially those under five, and press manufacturers and procurement partners for child friendly formulations. First step: a district level review of why exposed infants are missed.
- **Prepare for long acting options:** MINSANTE and partners should plan for long acting injectables and future implants, including registration, pricing negotiations and screening for hepatitis B co-infection. First step: a technical working group with diaspora experts to assess costs and readiness.
- **Make Cameroon a viable trial site:** MINSANTE and the national ethics committee should shorten approval times, and universities should train HIV investigators in trial conduct, with support from DAC-Africa and diaspora researchers. First step: map HIV treatment centres able to host studies and the steps that slow approvals.
- **Give clinicians guidance on disclosure:** MINSANTE should issue clear guidance, based on Cameroonian law, on counselling and partner disclosure in discordant couples, built around U=U.
- **Counter misinformation:** Regional delegations, hospitals and training schools should equip health workers and engage religious and traditional leaders with accurate information on HIV treatment, prevention and cure research.

Next Steps: Dr. Titanji offered to return to speak on HIV vaccines. The next session, led by Elvis Ndansi, was to address getting clinical research running in Cameroon.

Conclusion: HIV treatment has moved from 20 or more pills a day to long acting options, and a cure is being actively pursued. For Cameroon, the immediate priorities are wider and less stigmatised PrEP, treatment for children, readiness for new drugs, and the research capacity to take part in the next generation of trials.

Prepared by the Co-Moderators, Cameroon Townhall for Healthcare Professionals, from the session of December 2, 2023. Recording: https://www.youtube.com/watch?v=mcww6evOg3Q