



INFECTIOUS DISEASES: TB /HIV

Introduction: Infectious diseases still make up a significant bulk of our clinical workload. Although we have made massive strides in HIV and TB over the last decade, these are still the most common infectious diseases you will see – and the landscape is always changing. Are you up to date?

TOP 5 HIV / TB Work Based Activities to focus on this week. Make sure you can:

- Identify and manage virological failure in a patient on first and second line treatment in adults and children
- · Work up of the sick, immunocompromised patient
- Work-up of the TB suspect with a GeneXpert negative result.
- Key PMTCT intervention in the pregnant women, during labor and in the neonate to prevent mother to child transmission.
- Managing the patient with the positive CLAT including cryptococcal meningitis
- Managing the patient that presents with an abnormal LFT (TB IRIS VS DILI)

Key Guidelines:

There are excellent, detailed NDOH guidelines that cover all aspects of HIV care. And don't forget your EML and APC! (see the General Resource Pack)

SA National ARV Guidelines 2019 (April 2020 update)

https://www.knowledgehub.org.za/system/files/elibdownloads/2020-05/2019%20ART%20Guideline%2028042020%20pdf.pdf

Guideline for the prevention of mother to child transmission of communicable infections, South African Department of health. (Nov 2019)

https://www.knowledgehub.org.za/system/files/elibdownloads/2019-10/PMTCT%20Guideline%2028%20October%20signed.pdf

National Tuberculosis management guidelines 2013

https://www.knowledgehub.org.za/elibrary/national-tuberculosis-management-guidelines

National Guidelines for the management of TB in children

https://www.knowledgehub.org.za/elibrary/national-guidelines-management-tuberculosis-children

Management of Rifampicin Resistant TB

https://www.health.gov.za/wp-content/uploads/2020/11/management-of-rifampicin-resistant-tb-booklet-0220-v11.pdf

Consensus statement: Management of drug-induced liver injury in HIV-positive patients treated

for TB: Jong et all. SAJHIVMED SEPTEMBER 2013, Vol. 14, No. 3

https://sahivsoc.org/Files/Consensus%20Statement Management%20of%20drug-

induced%20liver%20injury%20in%20HIV%20positive%20pts%20treated%20for%20TB%20(Oct%202013).pdf

Management of suspected drug-induced rash, kidney injury and

liver injury in adult patients on TB treatment and/or antiretroviral treatment: July 2020 Medicine Information Centre.

http://www.mic.uct.ac.za/sites/default/files/image tool/images/51/ADE%20Booklet July2020 fina l171120.pdf

Reading material / Tutorials/ Webinars / Additional resources

- The NDOH knowledge hub runs a free online training on Advanced Clinical Care (30CPD points) which is worthwhile doing.
- The HIV clinician Society website has excellent resources consider joining the society if you have a special interest in HIV.
- Basic introduction to ARV guidelines Dr Muller Jan 2022: YouTube video https://youtu.be/pDK9okgbDP4
- An overview of Rifampicin Resistant guidelines SAFP Dr Muller: https://safpj.co.za/index.php/safpj/article/view/5092/6017
- TB /HIV co-infection: Diagnosing TB in the patient who is GeneXpert neg. 2016 tutorial: https://youtu.be/Nw6DAVhvUN8
- Drug induced liver injury Dr Muller https://youtu.be/WDBi7GD8F3Y
- HIV treatment interruption with Dr John Black webinar: https://youtu.be/wu_tnQTsWcY
- TB spine with Prof Norrie Gibson, Dr Madeleine Muller & Karen Galloway webinar https://youtu.be/5MbfoiWJ9wU
- DRTB course for clinicians at decentralized sites online videos: https://youtube.com/playlist?list=PL2IvCQAf-vTsRnw7WPoKUBL0DXVTnQXjw

Google drive folder link with resources:

https://drive.google.com/drive/folders/16Cvo67UolKuehd hrzHhaYQ1kcehk8h ?usp=sharing

- PEP poster
- Paediatric dosing chart
- MSF HIV textbook
- EML ARV interaction table
- DRTB summary posters

Overview of HIV / TB Work based activities district / GP level

This is a summary of the types of consultations you may have related to HIV/TB. It is based on the curriculum for the Diploma of HIV Medicine. Over time you will need to become acquinted with all of these case presentations.

• Understanding and ability to advise patients (including key populations) on HIV prevention strategies such as U=U (partner on ARVs), PrEP, PEP, Medical Male circumcision.

Adults ARVs

- Testing for HIV, baseline investigations and initiating ARVs in adults including working up the very sick immunosuppressed patient and restarting the patient that has defaulted ARVs.
- Managing the patients on ARVs including diagnosing and managing virological failure in patients on first line and second line. Managing adherence. Prescribing prophylaxis – including CTX and TPT

Paediatric ARVs

- Testing for HIV, baseline investigations and initiating ARVs in neonates and children.
 Prescribing prophylaxis including CTX and TPT
- Managing children on ARVs including diagnosing and managing virological failure in patients on first line and second line. Managing adherence and counselling the caregiver. Use of children friendly preparations.
- Management of common Ols / complications in children with HIV including BCG disease, acute and chronic lung infections, ENT infections and identifying developmental delay.
- Screening for , diagnosing and management of TB in HIV positive and HIV negative children including ARV management.
- Managing adolescents on ARVs, including disclosure.

PMTCT

- Managing HIV in pregnant women, labour and during breastfeeding to prevent mother to child transmission of HIV
- Neonatal prophylaxis in the HIV exposed infant.
- o Screening, prevention and management of TB in pregnant women.

Opportunistic infections, Comorbid disease and Adverse events

- Diagnosis and management of PTB and EPTB in patients with our without HIV, including identifying and managing TB IRIS including ARV management
- Diagnosis and management of patients with Fluroquinolone sensitive Drug resistant
 TB (RRTB and MDRTB) including ARV management.
- Managing patient with HIV with neurological symptoms (seizure, meningitis, confusion); gastro-intestinal symptoms, respiratory infections (acute and chronic); oral and dermatological lesions; mental health problems, loss of vision and HIV related malignancies.
- Identifying and managing major adverse events on ARVs including DILI, anaemia, metabolic complications, neurological adverse events, renal function deterioration and drug related rash.
- Managing the HIV patient with chronic disease including cardiovascular disease and diabetes, epilepsy, peptic ulcer disease and DVT / PE.
- o Palliative and rehabilitative care for patients with HIV.