SUSA02 **Sustaining ARV Supply and Management Systems in Low and Middle Income Countries: Sharing Models from Asia**

Non-Commercial Satellite

Venue: **Mini Room 2**

Date: **Sunday 30 June**

Time: **10:15-12:15**

Organizer: **PEPFAR/USAID Vietnam**

Background: During the past decade, Southeast Asian countries have scaled up their national ARV programs with combined support of national budgets and international donor support. As international funding across the region declines, questions about who supports ARV financing, procurement and distribution loom large. Countries such as Thailand and Malaysia lead the region in efforts to finance their ARV programs from domestic sources and to establish national systems for long-term ARV provision and supply chain management. However, many other countries are searching for practical models that mobilize domestic funding to effectively scale up and sustain ARV programs that fit within their existing health systems
Purpose: To share lessons learned and model practices on ARV financing, procurement, and distribution across Southeast Asian countries.

Target Audience: National policymakers, international donors, and program implementers.

ART Program Management under Universal Health Coverage
D.Bhakeecheep,, Thailand

ARV Program in Indonesia:Advantages, Challenges and the Way Forward
E.Budi Hastuti, Indonesia

Financing ARV- experience from Malaysia
S.Bin Ngadiman, Malaysia

sustainability of ARV financing and suply chain management - challenges of Vietnam
N.Do Thi, Vietnam

SUSA03 **WHO Global Update on HIV Treatment: Results, Impact and Opportunities**

Non-Commercial Satellite

Venue: **Session Room 3**

Date: **Sunday 30 June**

Time: **12:30-14:30**

Organizer: **WHO HIV/AIDS Department**

This satellite symposium presents the main findings from the WHO Global HIV Treatment and Care Update 2013. WHO staff, implementation partners, programme managers and civil society representatives will present and analyze the progress in the global scale-up of HIV treatment and care, identify critical issues, and discuss the main challenges and opportunities for maximizing the benefits of treatment provision. Global and regional data detailing progress towards the Universal Access target will be presented, and implications of the new eligibility scenarios based on 2013 WHO ARV guidelines will be discussed.
The impact of the treatment scale-up to date on mortality and new HIV infections will be discussed, with particular focus on the prospect of attaining the goal of zero AIDS deaths and zero new infections.
Finally, presenters will outline opportunities for key programme improvements along the treatment cascade.

Welcome and introduction
G.Hirnschall (WHO), WHO; C.Luo (UNICEF), United States

Global progress update: 15 million and beyond
G.Weiler (WHO), Switzerland

Scaling Up Treatment in Zimbabwe: The path to high coverage
T.Apollo (MoH), Zimbabwe

Strengthening the treatment cascade: Evidence and practice
N.Ford WHO, Switzerland

Quality of care: How can we do better?
Y.Ma (NCAIDS), China

How can we get to zero? The potential contribution of treatment
P.Godfrey-Faussett UNAIDS, UNAIDS

Panel discussion: Perspectives on the progress and ways forward
S.Raghavan, India; C.Duncombe (BMGF), United States

Summary and closing remarks
H.Nakatani (WHO), Switzerland; G.Hirnschall (WHO), WHO; C.Luo (UNICEF), United States

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SUSA05 **ARV-Based Prevention: State of the Art and Key Issues for a Multidisciplinary Research Agenda**

Non-Commercial Satellite

Venue: **Mini Room 1**

Date: **Sunday 30 June**

Time: **12:30-14:30**

Organizer: **Network for Multidisciplinary Studies on ARV-based Prevention (NEMUS) & International AIDS Society**

This session will provide a summary of the state of the art ARV-based prevention, exploring both the evidence and challenges. The goals and working methods of the Network of Multidisciplinary Studies on ARV-Based Prevention will be presented and discussion will focus on the trans-disciplinary research questions on ARV-based prevention that are relevant now. Participants interested in this field will be invited to contribute to the discussions.

Welcome Remarks

State of the Art of ARV-Based Prevention
K.O'Reilly, Switzerland

Modelling the impact of ARV-Based Prevention: The role of model parameters
T.Hallett, United Kingdom

The Network of Multidisciplinary Research on ARV-Based Prevention
C.Caceres, Peru

IAS: Present work in ARV-based prevention
C.Caceres, Peru

Discussion

Closing Remarks

SUSA04 **Launch of the 2013 WHO Consolidated ARV Guidelines - What's the Evidence?**

Non-Commercial Satellite

Venue: **Session Room 4**

Date: **Sunday 30 June**

Time: **14:45-16:45**

Organizer: **WHO HIV/AIDS Department**

This satellite session launches the 2013 WHO Consolidated Guidelines on the Use of Antiretroviral Drugs for HIV Treating and Preventing HIV Infection.

The Guidelines include recommendations along the continuum of HIV care, including recommendations on HIV testing and counseling, ART initiation and maintenance, patient monitoring, 2nd and 3rd line ART, management of co-infections and comorbidities and service delivery. New recommendations in the guidelines have been informed by 41 systematic reviews, modeling on costs and impact, surveys and country case studies.

The satellite will present the science behind new key recommendations, including the rationale for deciding on when to initiate ART in different populations and the preferred regimens to use. After each presentation a small panel representing the perspectives of a national HIV program, civil society and a development agency, will comment on the presentation. These presentations will be followed by an opportunity for the audience to ask questions.

Welcome and introduction to speakers and discussants
A.Ball (WHO), Switzerland; N.Kumarasamy YRGCARE Medical Centre, India

Official Launch of the WHO 2013 Consolidated ARV Guidelines
H.Nakatani (WHO), Switzerland

Deriving public health recommendations from a systematic review of evidence
P.Easterbrook (WHO), Switzerland

Development Partners' Perspectives (Video Message)
M.Dybul (Global Fund), Switzerland; E.Goosby (PEPFAR), United States

Critical issues in adults with HIV
M.Doherty (WHO), WHO

Critical issues in pregnant women with HIV
N.Shaffer, Switzerland

Critical issues in children infected with HIV
T.Puthanakit Chulalongkorn University, Thailand

Critical issues in service delivery and decision making - Evidence review on service delivery, modelling of costs and impact, country experiences
Y.Pillay, South Africa

Panel discussion and perspectives from Civil Society and UNAIDS
S.Phurailatpam, Thailand; S.Kraus, UNAIDS

Summary and concluding remarks
A.Ball (WHO), Switzerland; N.Kumarasamy YRGCARE Medical Centre, India

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SUSA01 **What to Consider When Initiating ART in Patients with HIV-Associated Comorbidities**

Major Industry Sponsor Satellite

Venue: **Session Room 3**

Date: **Sunday 30 June**

Time: **17:00-19:00**

Chair: Nicholas Paton, United Kingdom

This symposium will address the challenges faced by physicians in managing comorbidities in HIV. The speakers will look at coinfections that are linked to, or associated with, HIV infection (cryptococcal meningitis, tuberculosis, hepatitis B & C), and at a long-term neurological complications that may result from HIV disease and its treatment (HAND). In all these examples, the speakers will focus on patient management, offering insights into the latest thinking in these important areas of care.

Opening Remarks
N.Paton, United Kingdom

Cryptococcal Meningitis and Tuberculosis
A.Kambugu, Uganda

HIV-Associated Neurocognitive Disorder (HAND)
P.Li, Hong Kong

Hepatitis B and C
J.Rockstroh, Germany

Discussion/Q&A

Closing Remarks

SUSA07 **Advances and Opportunities to Address Hepatitis C and CMV Retinitis**

Non-Commercial Satellite

Venue: **Mini Room 1**

Date: **Sunday 30 June**

Time: **17:00-19:00**

Organizer: **Médecins Sans Frontières / Doctors Without Borders (MSF)**

Although the scale up of ART has dramatically reduced the burden of co-infections in many contexts, they remain a major cause of morbidity and mortality in low and middle-income countries. Access to diagnostics, treatment and funding for co-infections remains unacceptably low. Recent improvements in tests and drugs for several co-infections as well as reductions in costs of key interventions offer an opportunity to reverse the history of neglect and improve care and the delivery of life-saving treatments for people with co-infections.

This session presents the challenges and opportunities in improving access to care for two key co-infections: CMV retinitis and hepatitis C. Access will be addressed from a clinician, health system and market perspective. The session will be of interest to donors, policy makers, civil society representatives, and implementing organizations.

PANEL - 1 CMV: The Neglected Opportunistic Infection

PANEL 2 - HCV: Gaining Recognition of Importance

Introduction
J.Cohn, United States

MSF & CMV: Myanmar Experience
D.Nyein Chan, Myanmar

New Burden of Disease Data
N.Ford, Switzerland

Scaling-up Screening and Diagnostics
D.Saranchuk, South Africa

New Treatment Opportunity: Valganciclovir
A.Bozadjian, Switzerland

The Challenge of HCV in the Region
N.Durier, Thailand

Simplifying and Adapting Diagnosis and Therapy
I.Meyer-Andrieux, Switzerland

Pricing and Policies of Drugs and Diagnostics
L.Menghaney, India

Respondent
S.Phurailatpam, Thailand

Questions and Comments

SUSA09 **Expanding HIV Prevention Options for Women**

Non-Commercial Satellite

Venue: **Mini Room 3**

Date: **Sunday 30 June**

Time: **17:00-19:00**

Organizer: **AVAC & International AIDS Society - Industry Liaison Forum**

Oral and topical pre-exposure prophylaxis (PrEP) studies in women yielded both promising and disappointing results. Efficacy of PrEP depends on biological and behavioural factors. The right concentrations of ARVs must be achieved in the right biological compartments at the right time. Moreover, PrEP studies clearly indicate that PrEP can only be effective if people actually use it.

This session will follow up on the CROI 2013 IAS-ILF affiliated event ("Sex and Gender Differences in ARV-Based Prevention Research"). It will provide an overview of the results of PrEP studies in women, analysing factors that may explain the variation of results. Discussions will focus on: (1) improvement of clinical trials to address such concerns as PK/PD of drugs in women, women's motivation, and product adherence and reporting; (2) programme design for effectively introducing, promoting and marketing ARV-based methods for women; and (3) ways for developing new formulations and delivery mechanisms to maximize effectiveness.

Welcome and introduction
L.Bekker, South Africa; M.Warren, United States

Overview presentation: What do we know about tenofovir-based PrEP in women?
L.Bekker, South Africa

Moderated panel discussion followed by interaction with the audience. The next steps in PrEP implementation and additional research.
C.Hankins, Netherlands; C.Dieffenbach, United States; J.Rooney, United States; J.Auerbach, United States; R.Gulick, United States; B.Hull, United States; K.O'Reilly, Switzerland; J.Pottage, United States

Conclusion
L.Bekker, South Africa; M.Warren, United States

SUSA10 **Ensuring Successful Roll-Out of Quality POC Diagnostics**

Non-Commercial Satellite

Venue: **Mini Room 4**

Date: **Sunday 30 June**

Time: **17:00-19:00**

Organizer: **World Health Organization**

New WHO guidelines on ART will place a greater emphasis virological and/or immunological monitoring to ensure early, and therefore optimal, management of treatment and virologic failure. Given that access to existing laboratory-based diagnostics for CD4 and viral load is limited in rural areas and for other populations with limited access to health services, innovative point-of-care (POC) diagnostics hold the potential for great impact. However, POC diagnostics will only be transformative if there is programmatic readiness to absorb them. To be cost-effective, POC diagnostics should be placed with the national tiered laboratory network to assure support for quality assurance (external quality assessment and quality control), training, and procurement.

WHO will present on the quality and performance criteria, in addition to, normative guidance on how and where to place POC diagnostics for successful roll-out and, importantly, cost-effective use of financial and human resources to ensure that the expected influx of POC diagnostics in the field will truly meet needs.

Objectives: (1) to brief stakeholders on the key operational characteristics of POC diagnostics, (2) to inform stakeholders about key requirements for programmatic readiness for roll-out of POC diagnostics.

Welcoming remarks

Quality, performance and operational characteristics of point-of-care technologies
A.Sands, Switzerland

Programmatic readiness for POC roll-out
G.Gershy-Damet, Burkina Faso

Country experiences - Viet Nam
D.Nhan, Vietnam

Country experiences - Mozambique
I.Jani, Mozambique

Country experiences - South Africa
L.Scott, South Africa

Discussion
