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COVID-19 – Information about managing HIV positive patients

Aid for Aids (AfA) is closely monitoring unfolding events relating to the COVID-19 pandemic caused by SARS-CoV-2 virus. The amount of information one is exposed to on a daily basis can be overwhelming and some of it is not accurate. For this reason, we have put together a brief summary of the most critical points, some of which pertain to all of us but most particularly to individuals who are living with HIV.

At the moment, very little is known about how COVID-19 affects HIV and vice versa. Nonetheless, some reasonable assumptions based on experience with other infections, such as influenza, can be made with regard to immune-suppressed individuals. The Southern African HIV Clinicians Society has put together some recommendations for healthcare providers and AfA has communicated these to all of the 12 000+ doctors who treat AfA registered patients. A copy of these basic clinical recommendations is attached for your information.

We want to assure you that AfA is working closely with various stakeholders to monitor stock levels of antiretrovirals (ARVs) needed for effective HIV treatment. To that end, we are engaging with drug manufacturers and distributors to ensure that every possible precaution is taken to prevent critically low stock levels becoming a reality. Contingency plans are being made by government and business to ensure the risk to SA supply chains is kept minimal. One advantage in the SA environment is that 40% of ARVs are produced locally. We will communicate timeously with clients about developments in this regard.

AfA has already taken steps to include important information relating to COVID-19 in its communications with registered beneficiaries. In addition to regular patient interactions, SMS communication has been sent to every beneficiary on the AfA programme emphasising the importance of adherence to their medication at this time more than ever. Furthermore, all treatment support counsellors have been briefed on including the following type of messaging:

1. Wash your hands frequently for at least 20 seconds using soap and water. If these are not available, use an alcohol-based sanitiser with at least 60% alcohol.

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- 2. Avoid touching your eyes, nose and mouth.
- 3. Cover your cough or sneeze with a tissue or with your flexed elbow. Throw the tissue away after use.
- 4. As far as possible, practice social distancing.
 - Staying at home as much as possible and only leaving to attend to necessities like food shopping or work.
 - Giving up all but essential travel both nationally and internationally.
 - Avoiding unnecessary group gatherings particularly with those who are at risk of complications like the elderly (over 60) or people with an underlying chronic health issue.
 - Changing your greetings from a handshake or a hug to a simple nod or a touch of the elbows.
 - Avoiding close contact with infected people.
 - Self-isolating at home for 14 days if you've travelled recently or are exhibiting symptoms such as a dry cough, fever or sore throat.

AfA always recommends that patients living with HIV have an annual flu vaccine. This year it will be more important than ever. While available flu vaccines will provide no protection from COVID-19 itself, a flu vaccine mitigates the risk and reduces the severity when infected with flu. We expect the next round of flu vaccinations to be available by end April 2020. It is always appropriate for beneficiaries to talk to their treating doctor before getting vaccinated, especially if they are already experiencing flu-like symptoms. AfA will drive this messaging with beneficiaries in its daily operations.

TB infection is a significant risk for people living with HIV and will increase the risks associated with Coronavirus infection as well. AfA's recommendation is that employees presenting with TB symptoms seek treatment as soon as possible. In addition, if employees who are HIV positive who do not have TB (as confirmed by screening) and have never received TB preventative treatment in the form of TB Preventive Therapy (TPT), AfA then recommends commencement of TPT as soon as possible. Employees will need to consult with their doctor in this regard.

One of the **most important** messages AfA is emphasising with registered beneficiaries is around treatment adherence. We want to assure you that AfA's methodology and approach to managing HIV is already geared to ensuring our patients stand the best

chance of achieving a healthy immune system. We are reinforcing messaging regarding treatment adherence in all of our communications with our patients and are providing caring support to those with questions about how they might be affected by COVID-19

There has never been a more important time for all Scheme beneficiaries to know their HIV status. Undiagnosed HIV may leave a person more vulnerable to complications or increase the severity of infection with COVID-19. It is our recommendation that this is one focus area for Scheme-wide communications which you may be sending out at this time.

We will provide updates on the unfolding events related to COVID-19 as and when necessary and in the interim, welcome any questions you may have.

Mike Marshall