**Scoping Consultation:**

**Integration of non-communicable disease prevention, assessment and treatment into HIV treatment programmes**

**9-10 April 2019**

**Global Health Campus, Geneva, Switzerland**

**Concept Note**

The scale up of antiretroviral therapy (ART) has significantly reduced the devastating impact of the global HIV epidemic in the last decades. For many, HIV infection has become a chronic disease and people living with HIV (PLHIV) are now aging and requiring lifelong care and treatment, for HIV but also for chronic non-communicable diseases (NCD). PLHIV have an increased risk of chronic non-communicable diseases including cardiovascular disease, mental, neurological and substance-use (MNS) disorders which can be pre-existing, HIV-associated, treatment-associated or due to aging.1 2 3,4

The 2016 WHO consolidated antiretroviral (ARV) treatment guidelines5 contain limited guidance regarding the prevention and management of chronic comorbidities among PLHIV. Recommendations are limited to the assessment and management of cardiovascular risk and the assessment and management of depression. The guidelines reference the WHO package of essential noncommunicable (PEN) diseases intervention guide6 and mhGAP interventional guide7 as regards to management.

WHO consolidated guidelines for treating HIV infection is planned to be reviewed in 2020. There is increasing global recognition of the burden of chronic comorbidities among PLHIV and the challenges of managing these chronic co-morbidities in low- and middle-income countries and in HIV treatment programmes. Consequently, there are requests from member states and partners for specific guidance from WHO for how to integrate the care of chronic diseases and HIV, while some countries have already moved ahead in developing models of integrated care of chronic non-communicable diseases and HIV. Furthermore, integration of non-communicable diseases and HIV is important as part of Universal Health Coverage, a priority policy for WHO.

Since the publication of the 2016 HIV consolidated guidelines, other initiatives for the management of NCD in low and middle-income countries, including the HEARTS package8, endorsed by WHO have been developed, which provide updated, simplified treatment protocols for treating chronic diseases including hypertension and other co-morbidities. In addition, partners and national programmes are already implementing integration of NCD care into HIV programmes, with examples of service delivery models of integration.9-11

**Objectives of the meeting**

1. To review the current data on the epidemiology of chronic NCDs and MNS disorders and their burden among PLHIV;
2. To review current WHO norms and policies for the prevention and management of major NCDs and MNS disorders and co-management of these chronic conditions among PLHIV;
3. To identify and prioritize the technical areas and interventions for the co-management of major NCDs and MNS among PLHIV;
4. To identify and prioritize the major clinical and programmatic gaps to guide the development of research questions for further systematic reviews and other assessments needed for the future updates of the WHO consolidated HIV treatment guidelines and other technical documents;
5. To review some country examples of integration of NCD and MNS care into HIV treatment programmes, and identify best practice, challenges and opportunities;
6. Create a working group to discuss a global short- and medium-term agenda on HIV-NCD integration.

**Expected Meeting Outcomes**

1. Prioritized list of clinical, programmatic and service delivery areas for the management of NCDs and MNS disorders in HIV treatment programmes, for consideration in the future updates of the WHO ARV guidelines (2020), policy briefs and other technical documents;
2. Determine specific priority areas of work required (programmatic guidance, toolkits, guidelines) to support countries in integrating care for non-communicable diseases and HIV;
3. Prioritized list of research gaps and priorities.

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