

Learning from COVID-19 Inspired ART Client Management Innovation: A Comparison of Retention and Viral Load Suppression between One and Three Months Dispensation at ART initiation in Zambia

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Multi-Month Dispensation (MMD) of Antiretroviral Therapy (ART) at initiation is successful in supporting clients in their first year of treatment



USAID DISCOVER-Health ART Providers carrying out HIV tests and counselling on HIV treatment and prevention options. Credit: JSI

INTRODUCTION

In Zambia, newly diagnosed clients are given one month dispensation (1MD) of antiretrovirals (ARVs), or less at initiation, which enables frequent client and provider interaction and adherence counselling. These early confidential sessions help support client retention during the initial year of treatment.

In 2020, COVID-19 pandemic and public health restrictions threatened HIV treatment program because people living with HIV in care were unable to access services regularly. The Ministry of Health, supported by USAID DISCOVER-Health, implemented by JSI, worked to mitigate the risk to protect the HIV treatment program, while also safeguarding clients and providers from COVID-19.

As a result, Multi-Month Dispensation of three months (3MMD) was introduced to newly diagnosed clients. Two years on, the need for further inquiry as to whether this intervention produced the desired treatment outcomes compared to standard of care (1MD) is clear.

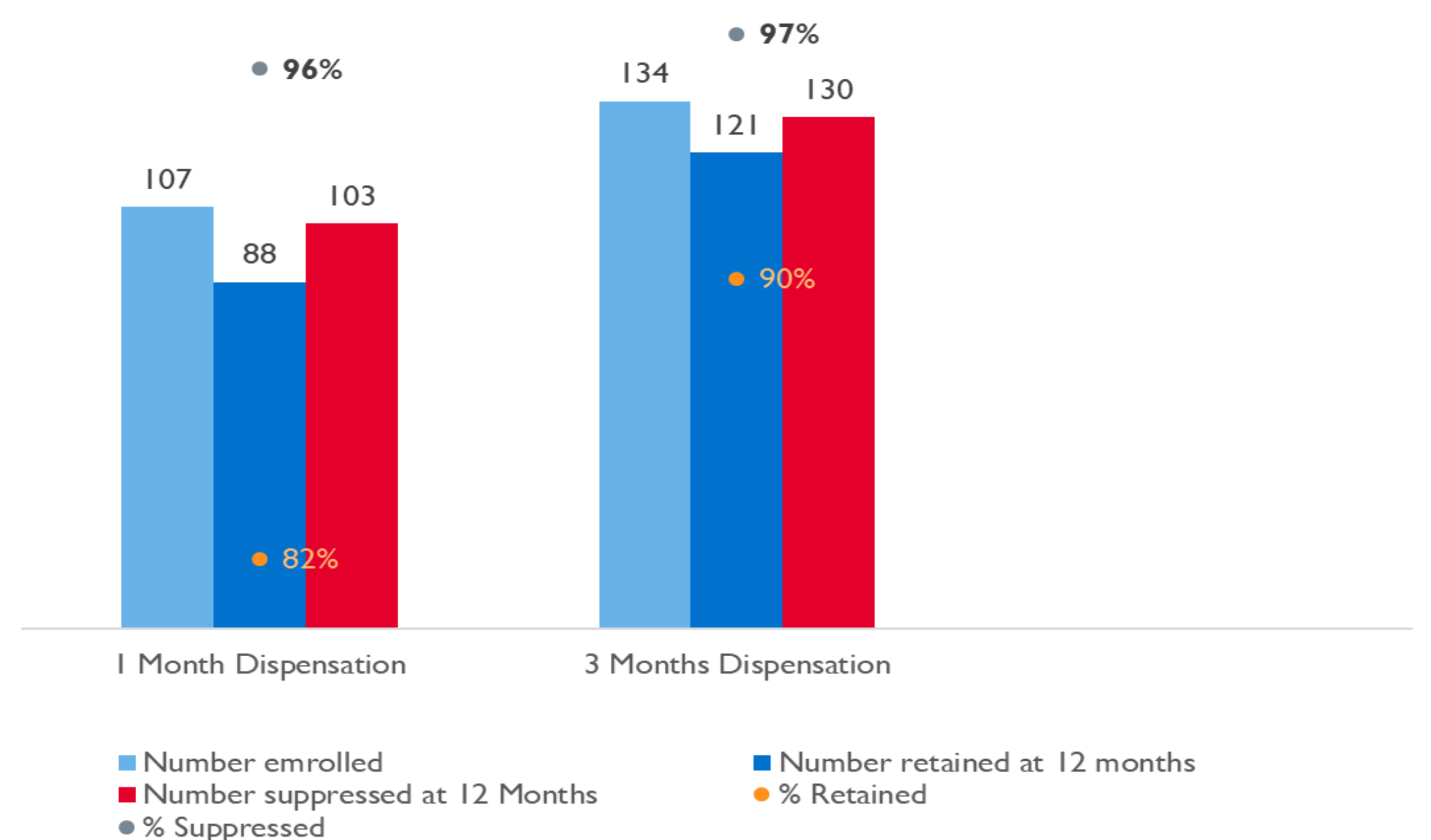
METHODS

The USAID DISCOVER-Health Project used retrospective data from a cohort of clients initiated on ART in December 2021, in Ndola. Data analysis compared proportions of retention in care and viral load suppression at 12 months, between clients dispensed one month and those dispensed three months at ART initiation. Retention was defined as the proportion of clients with less than 30 consecutive days without ARVs at any point during follow-up, while suppression was defined as having <1000 copies per mL at 12 months in care.

RESULTS

- 241 clients were analysed; 146 females and 95 males, with a mean age of 35 years.
- At ART initiation 107 (44%) received 1MD and 134 (56%) received 3MMD.
- Retention in care rates at 12 months was higher in 3MMD at 90%, compared to 82% in 1MD.
- Viral load suppression at 12 months was 97% for 3MMD and marginally lower at 96% for 1MD.

Results at 12 Months of Follow Up



CONCLUSION

The 3MMD produced the desired treatment outcome comparable to standard of care with better retention in care results. 3MMD played an important role in helping to make treatment more convenient and attractive for the client in the first critical year of care. This finding is important to countries like Zambia that are trying to simply further HIV management for every client and provide person centered care.