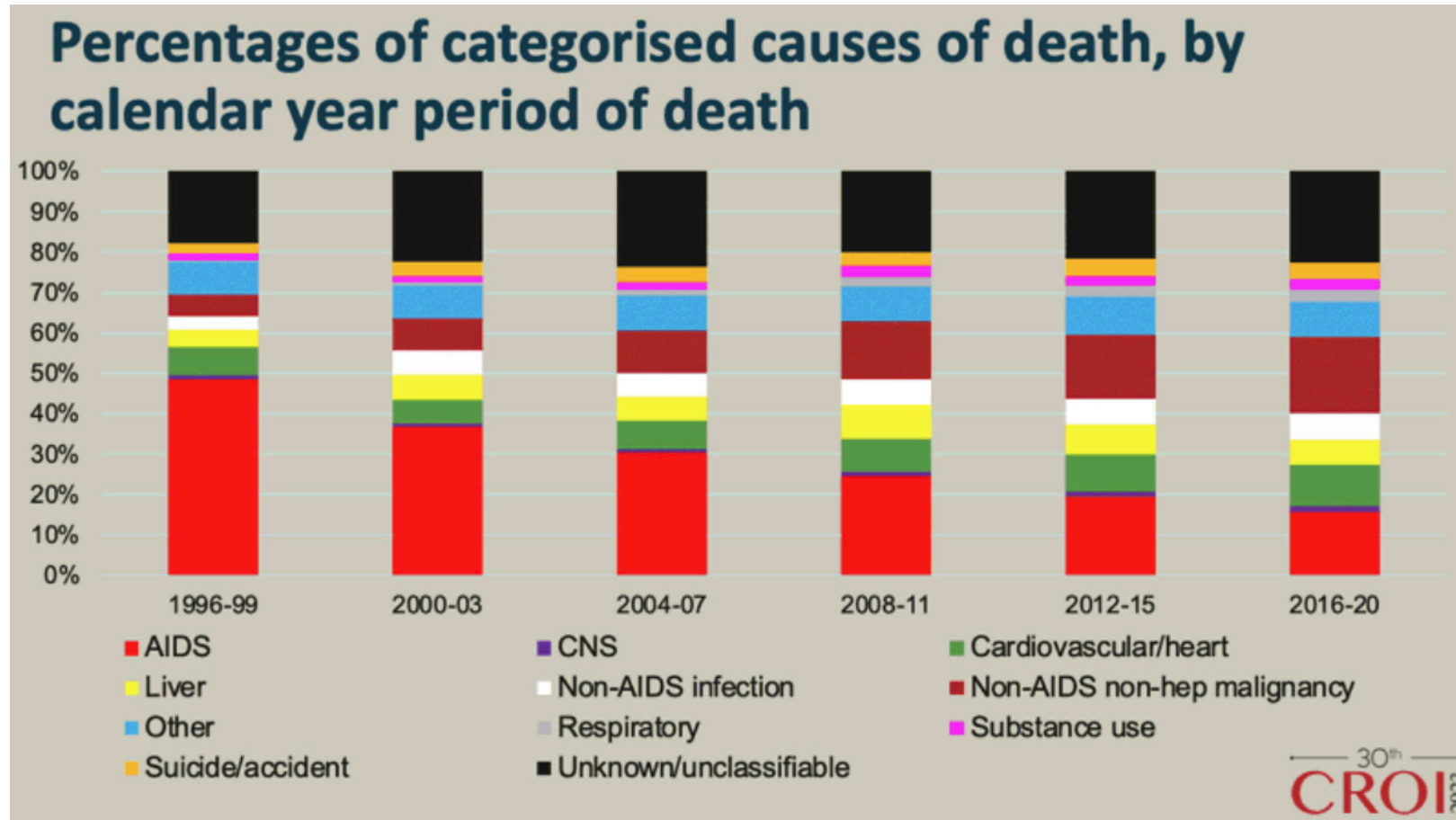


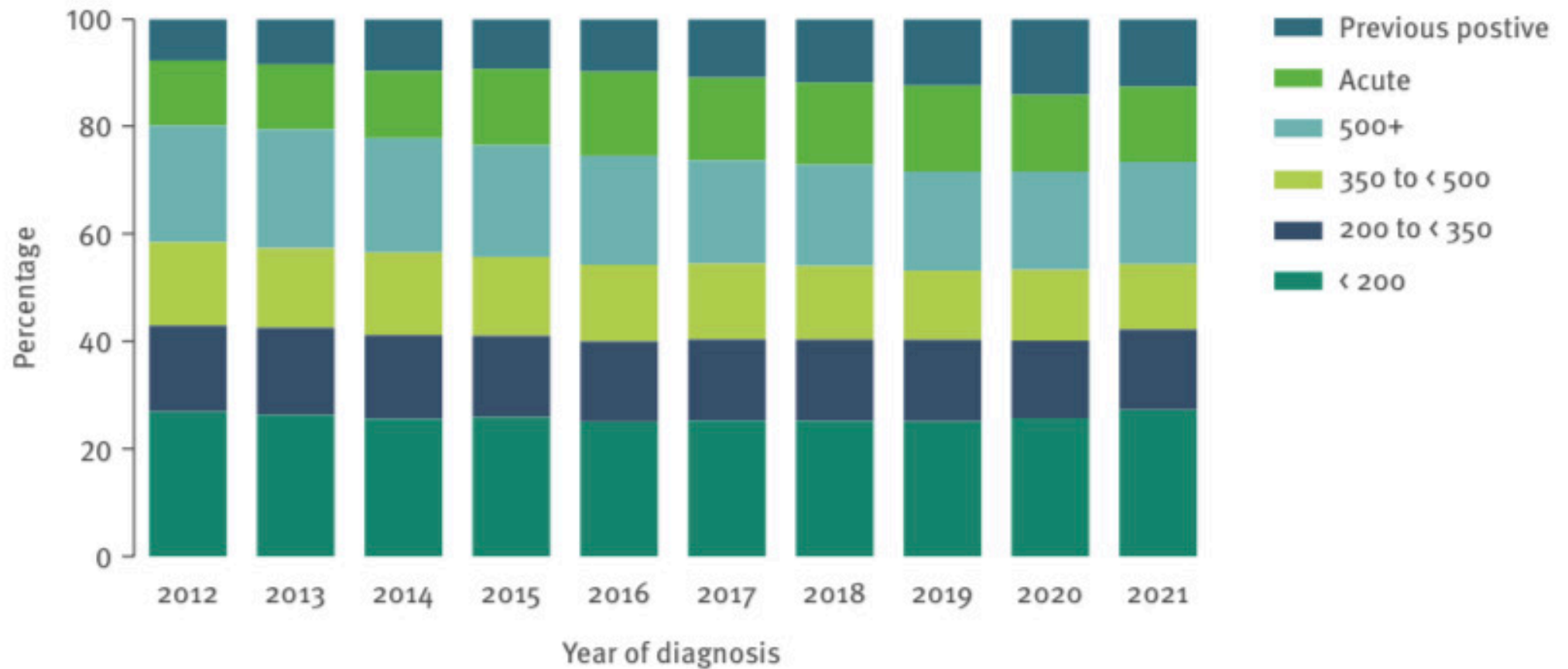
Opportunistic Infections: What's new ?

Prof. S. De Wit

Causes of mortality amongst PWH on ART: Europe and North America



Proportion with late presentation



ECDC/WHO: HIV/AIDS Surveillance in Europe 2022

<https://www.ecdc.europa.eu/en/publications-data/hiv-aids-joint-surveillance-2021-data>

Outline

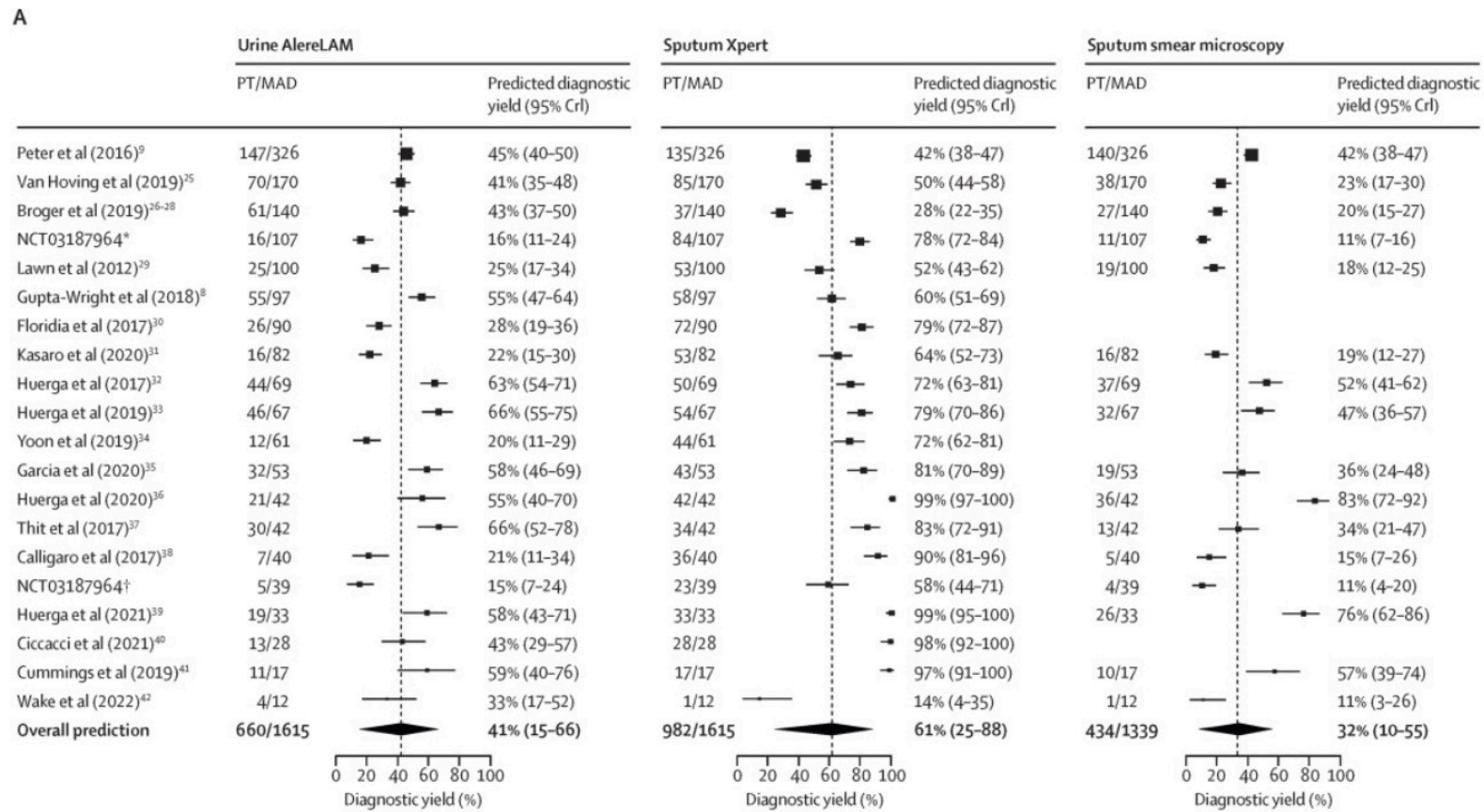
- Tuberculosis
- Cryptococcosis
- Histoplasmosis
- Pneumocystosis
- Mpox
- Toxoplasmosis
- Leishmaniosis

Outline

- Tuberculosis
- Cryptococcosis
- Histoplasmosis
- Pneumocystosis
- Mpox
- Toxoplasmosis
- Leishmaniosis

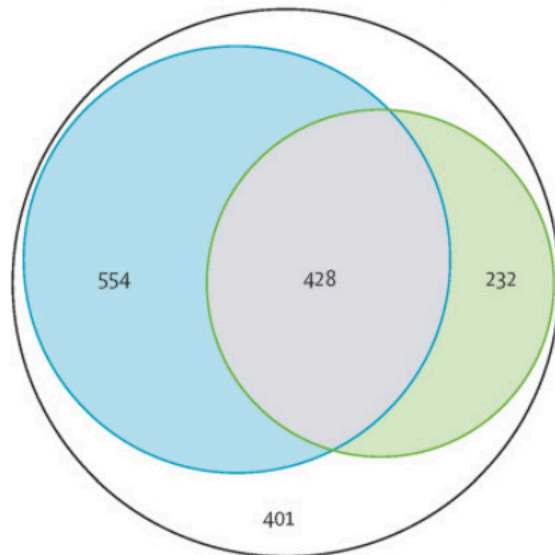
Euroguidelines

Diagnostic yields of urinary AlereLAM



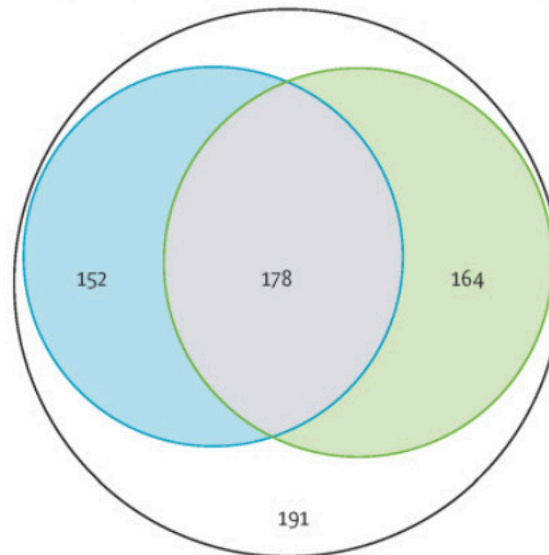
2-day diagnostic yield of Urinary AlereLAM

B 2-day diagnostic yield using the MAD (n=1615)



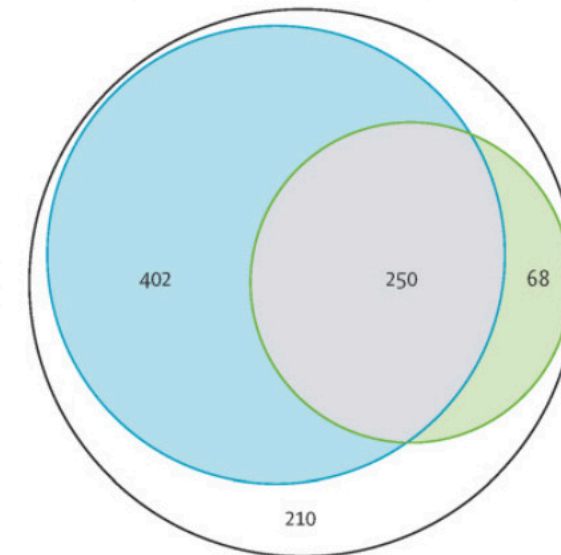
Urine AlereLAM=41% (660/1615)
Sputum Xpert=61% (982/1615)
Urine AlereLAM and sputum Xpert=75% (1214/1615)
Tuberculosis cases missed=23% (401/1615)

C 2-day diagnostic yield in inpatients using the MAD (n=685)



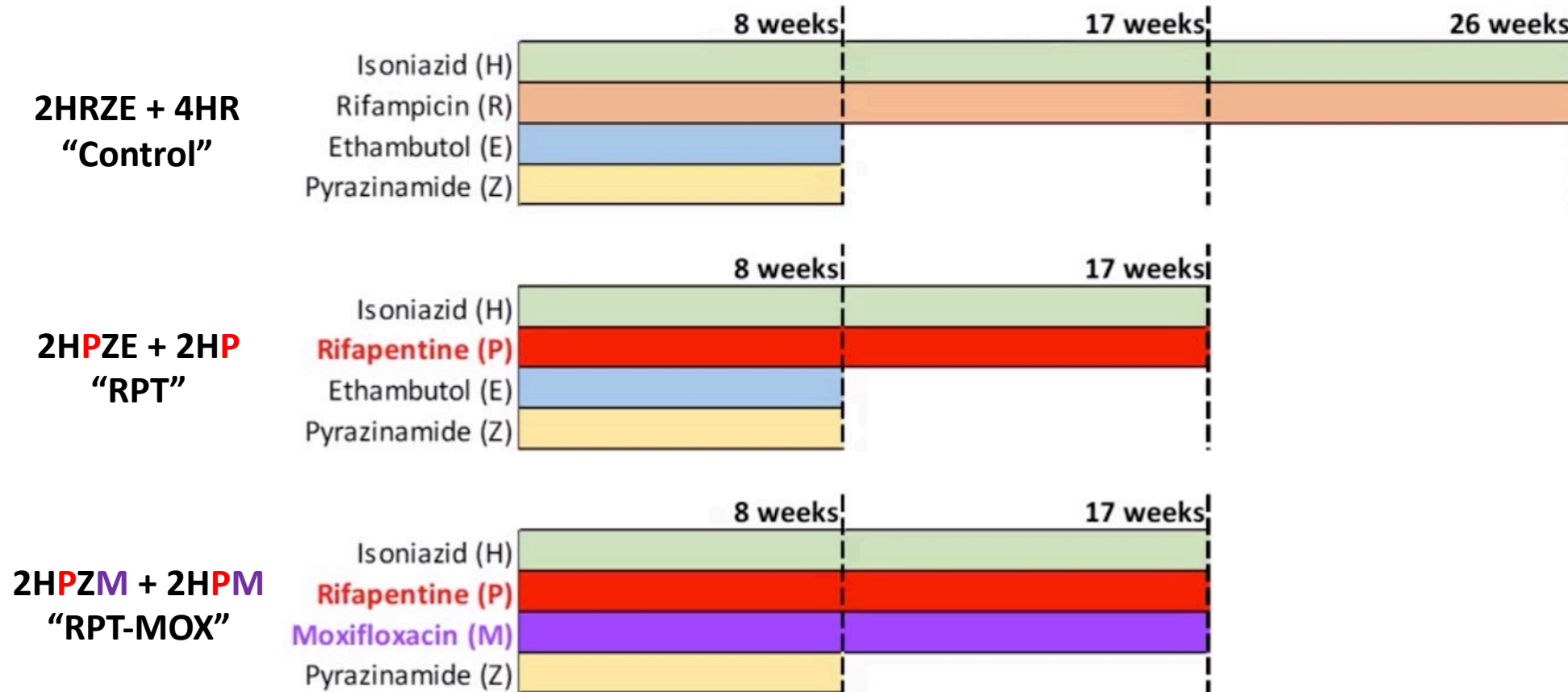
Urine AlereLAM=50% (342/685)
Sputum Xpert=48% (330/685)
Urine AlereLAM and sputum Xpert=72% (494/685)
Tuberculosis cases missed=28% (191/685)

D 2-day diagnostic yield in outpatients using the MAD (n=930)

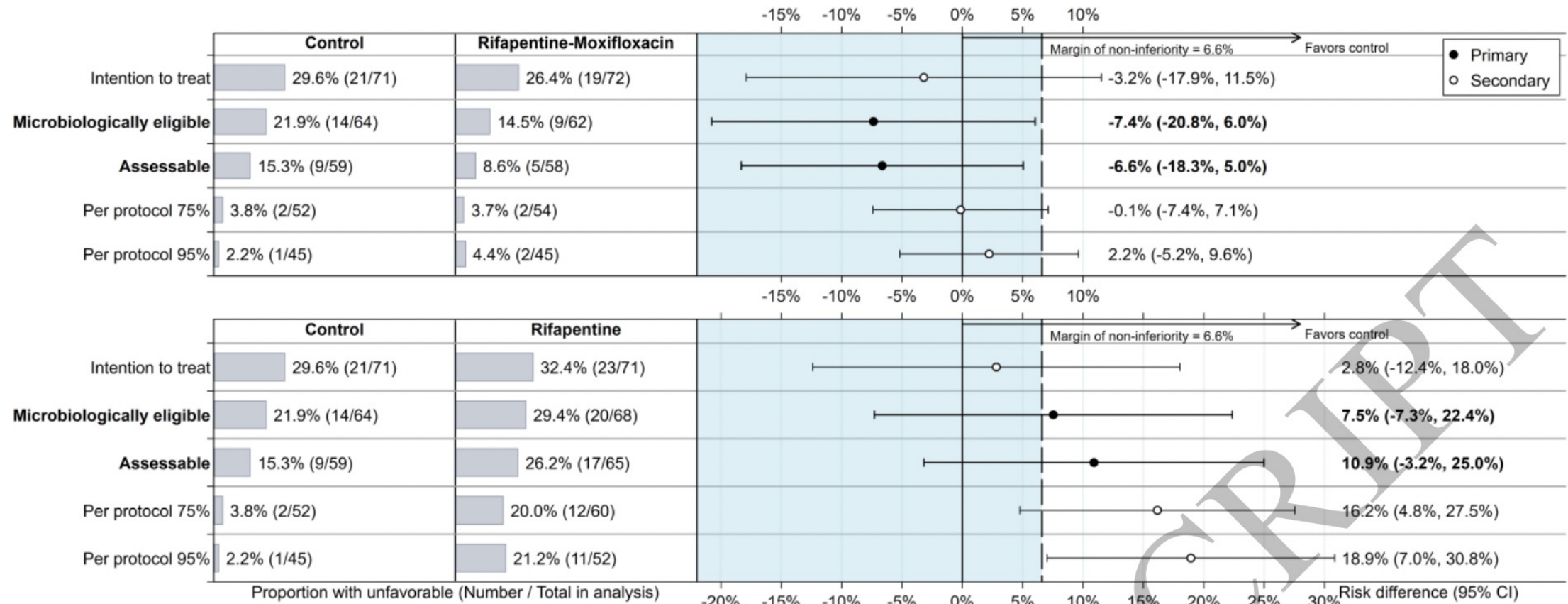


Urine AlereLAM=34% (318/930)
Sputum Xpert=70% (652/930)
Urine AlereLAM and sputum Xpert=77% (720/930)
Tuberculosis cases missed=23% (210/930)

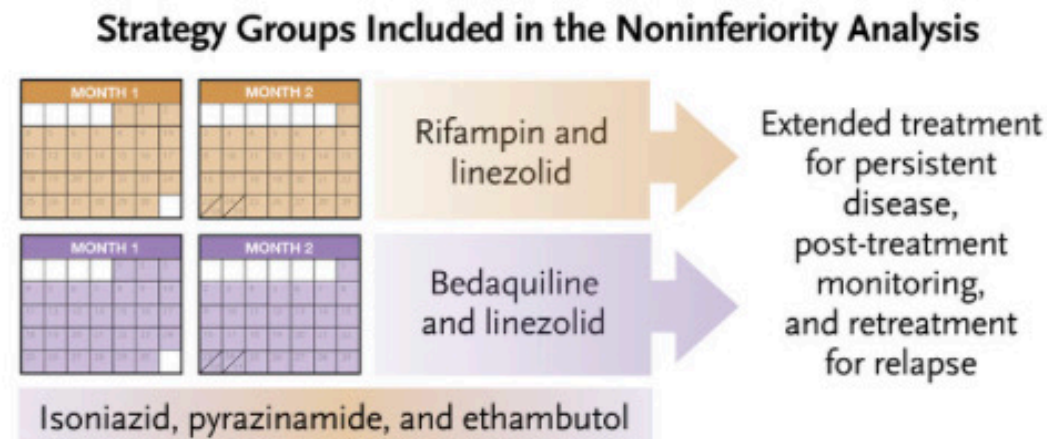
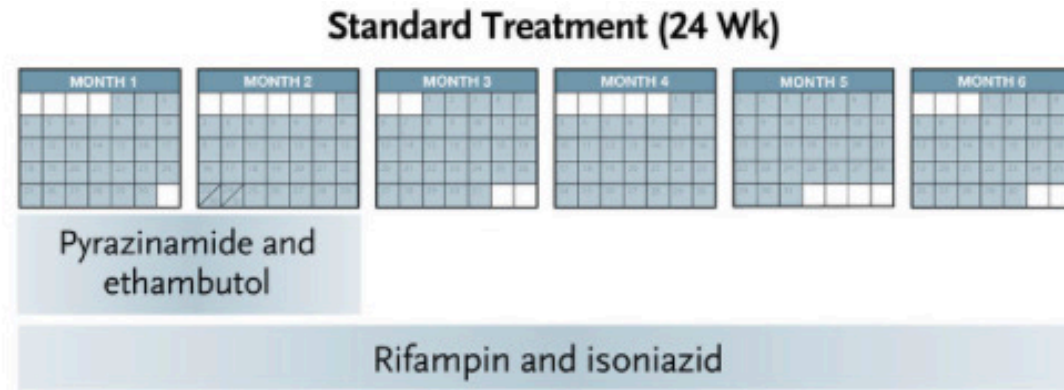
Can we shorten the duration of HIV/DS-PTB?



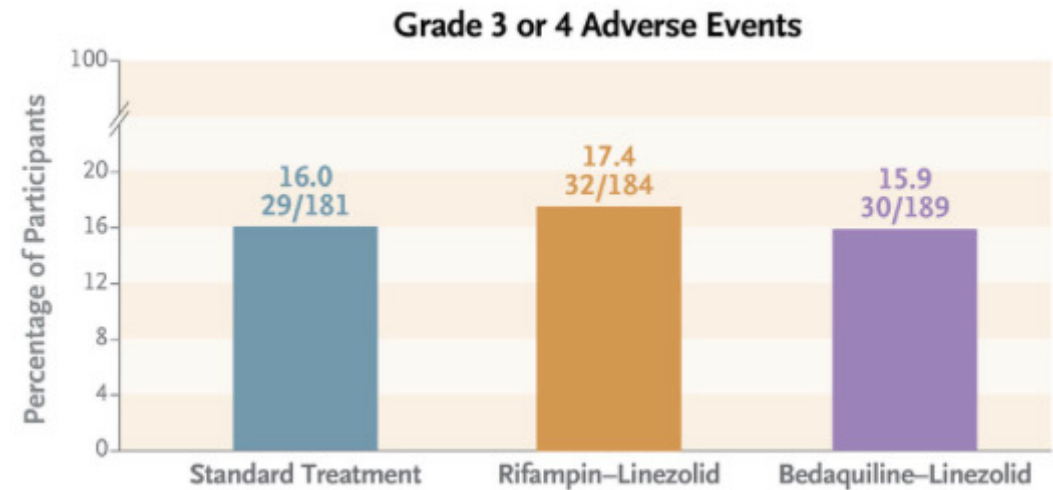
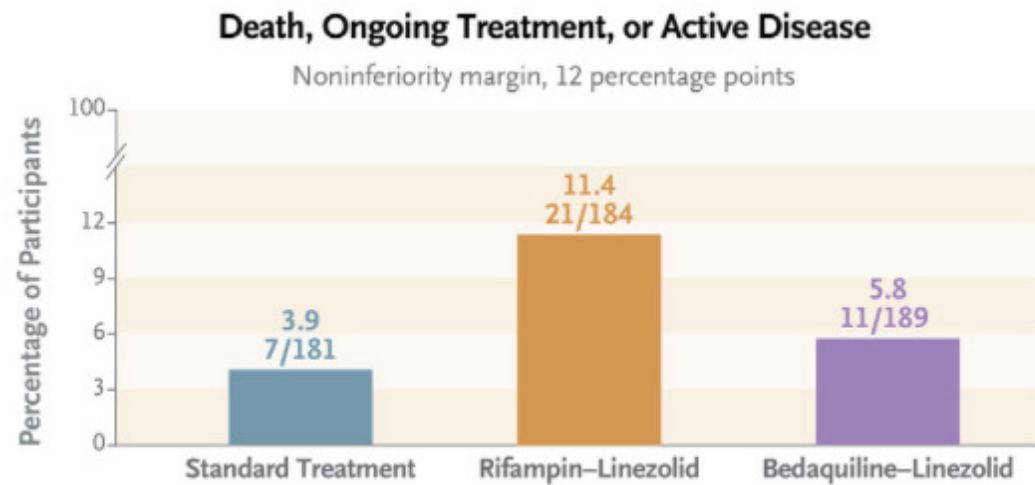
RPT-MOX non-inferior to control



TRUNCATE-TB trial: Short course 8 weeks



TRUNCATE-TB trial: Short course 8 weeks

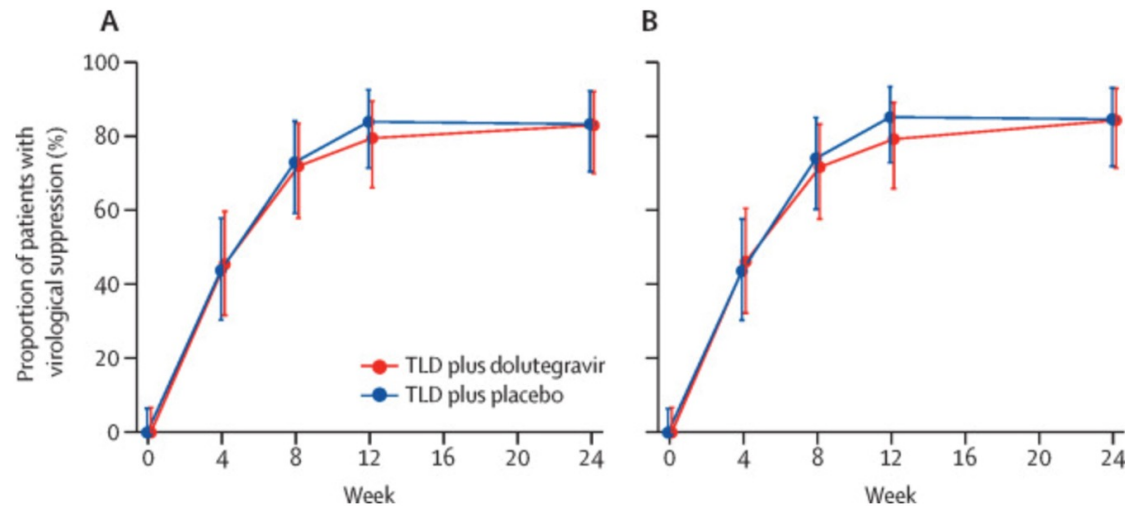
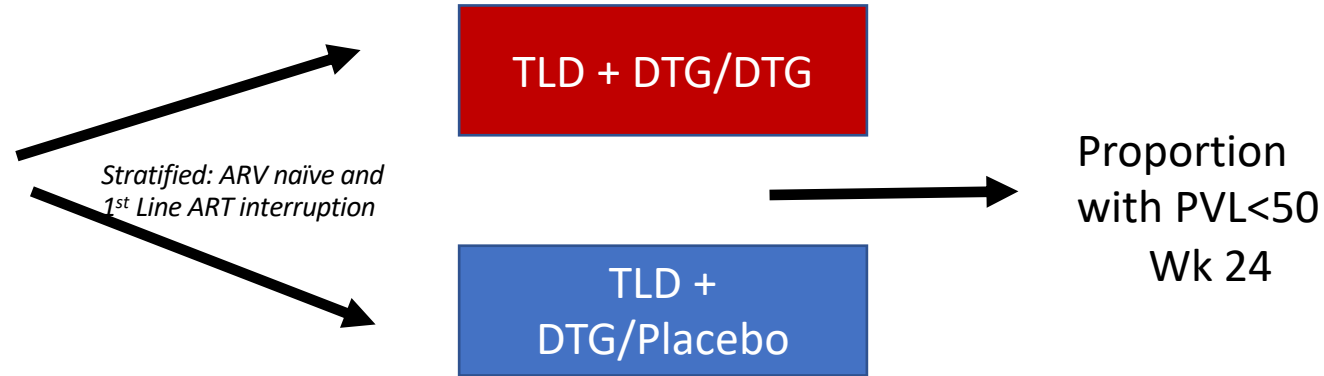


N Engl J Med 2023; 388:873-887

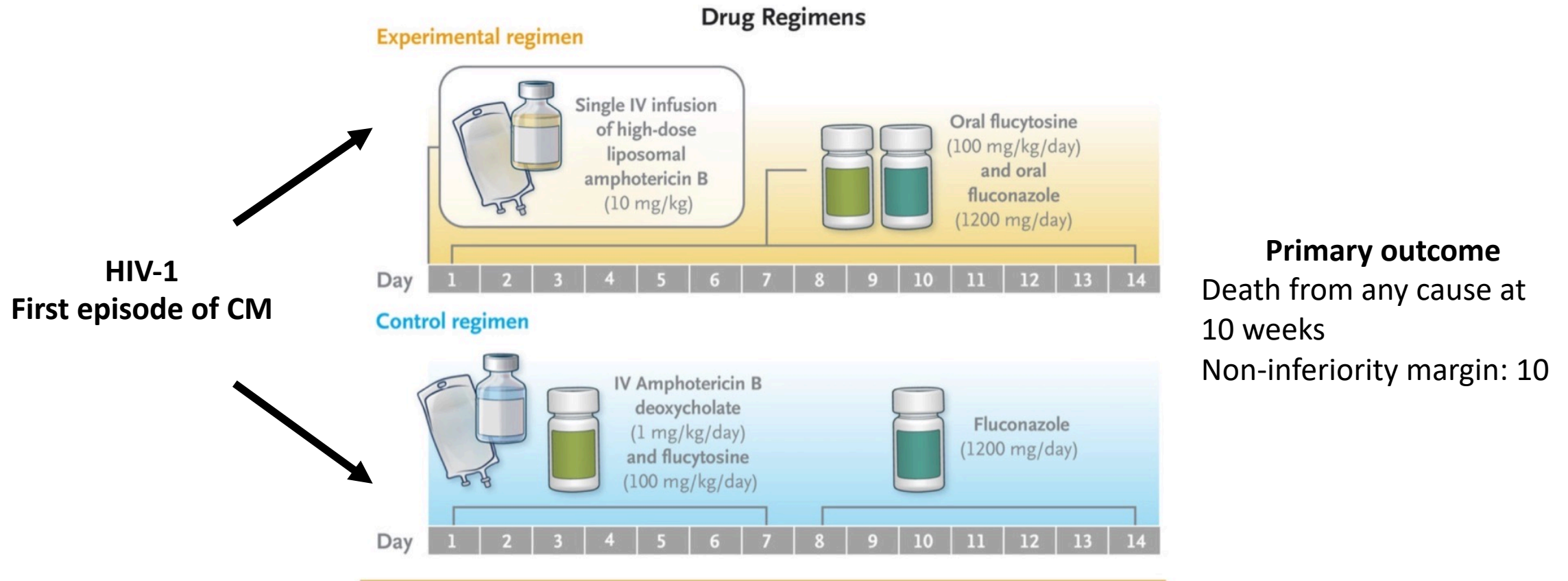
RADIANT-TB

DTG qd vs bid in HIV/TB treatment

HIV-1 > 18 yrs
PVL > 1000 cps/ml
CD4 < 200
ARV naïve/interruption
Rifa based ATT < 3 mo's

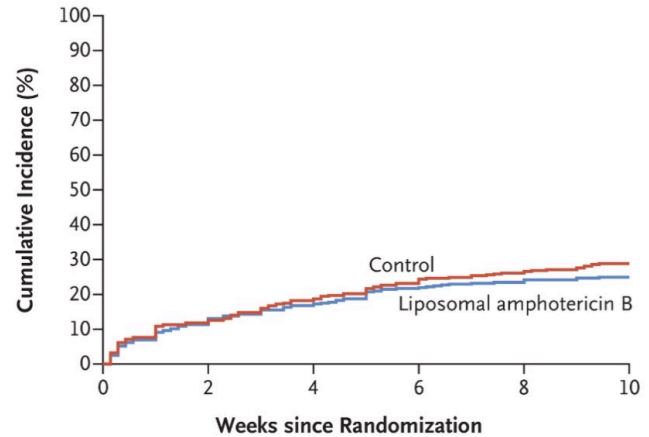


AMBITION-CM: single high dose lipo Ampho B for CM



AMBITION-CM: single high dose lipo Ampho B for Crypto M.

A All-Cause Mortality at Wk 10



No. at Risk
Control
Liposomal
amphotericin B

407	359	332	311	299	288
407	360	337	317	310	304

B Noninferiority for Differences in All-Cause Mortality at Wk 10

Analysis

**Difference in Mortality
(90% CI)**
percentage points

Intention-to-treat population

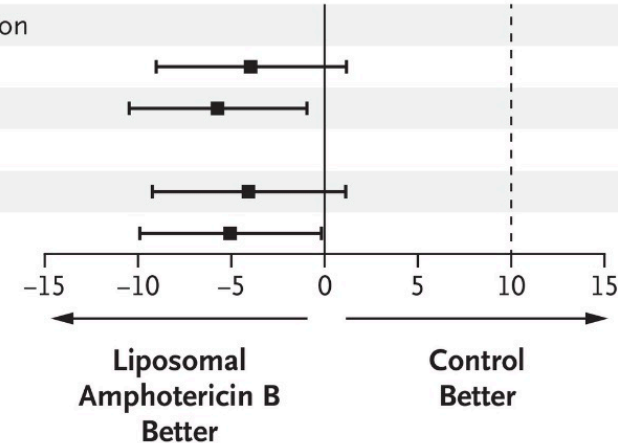
Unadjusted

Adjusted

Per-protocol population

Unadjusted

Adjusted



Event	Liposomal Amphotericin B (N=420)	Control (N=422)	P Value†
Grade 3 or 4 adverse events — no. of events	382	579	
Any grade 3 or 4 adverse event — no. of participants (%)			
Grade 3 or 4	210 (50.0)	263 (62.3)	<0.001
Grade 3	173 (41.2)	225 (53.3)	<0.001
Grade 4	91 (21.7)	127 (30.1)	0.005

Euroguidelines

Early Antiretroviral Therapy Not Associated With Higher Cryptococcal Meningitis Mortality in People With Human Immunodeficiency Virus in High-Income Countries: An International Collaborative Cohort Study

Suzanne M. Ingle,^{1,a} Jose M. Miro,^{2,3,a} Margaret T. May,¹ Lauren E. Cain,^{4,5} Christine Schwimmer,⁶ Robert Zangerle,⁷ Helen Sambatakou,⁸ Charles Cazanave,⁹ Peter Reiss,¹⁰ Vanessa Brandes,¹¹ Heiner C. Bucher,¹² Caroline Sabin,¹³ Francesc Vidal,^{14,15} Niels Obel,¹⁶ Amanda Mocroft,¹⁷ Linda Wittkop,¹⁸ Antonella d'Arminio Monforte,¹⁹ Carlo Torti,²⁰ Cristina Mussini,²¹ Hansjakob Furrer,²² Deborah Konopnicki,²³ Ramon Teira,²⁴ Michael S. Saag,²⁵ Heidi M. Crane,²⁶ Richard D. Moore,²⁷ Jeffrey M. Jacobson,²⁸ W. Chris Mathews,²⁹ Elvin Geng,³⁰ Joseph J. Eron,³¹ Keri N. Althoff,³² Abigail Kroch,³³ Raynell Lang,³² M. John Gill,³⁴ and Jonathan A. C. Sterne,¹ on behalf of ART-CC, COHERE in EuroCoord, CNICS, and NA-ACCORD

Can sdLipAmpB used to treat HIV-histo?



PARTICIPANTS: Adult people living with HIV, hospitalized and diagnosed with disseminated histoplasmosis, in six Brazilian tertiary medical centers.

METHODS

Prospective randomized multicenter open-label trial. Interventions: One or two-dose induction L-AmB therapy versus control (three arms), all followed by oral itraconazole therapy.



Clinical response at day 14



Overall survival at day 14



1-year overall survival



Nephrotoxicity at day 14
(any AKI criteria)

Single dose
10 mg/kg of L-AmB



84.0%

89.0%

73.7%

11.8%

ARR = +10.5%

95% CI [-7.7% - 28.7%]

ARR = -2.6%

95% CI [-15.6% - 10.4%]

10 mg/kg of L-AmB on D1,
and 5 mg/kg of L-AmB on D3



69.0%

78.0%

65.8%

26.7%

ARR = -4.2%

95% CI [-24.8% - 16.3%]

ARR = -13.7%

95% CI [-29.5% - 2.1%]

3 mg/kg of L-AmB daily for 2
weeks (control)



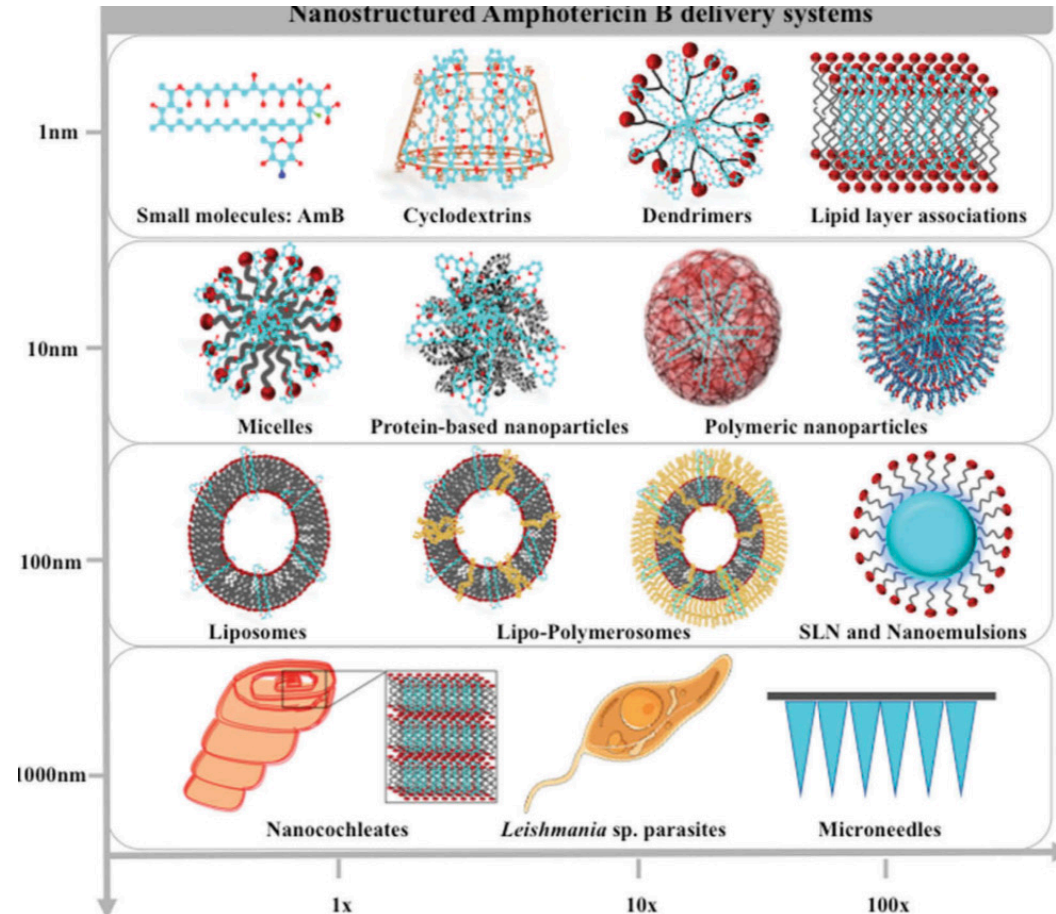
74.0%

89.7%

76.9%

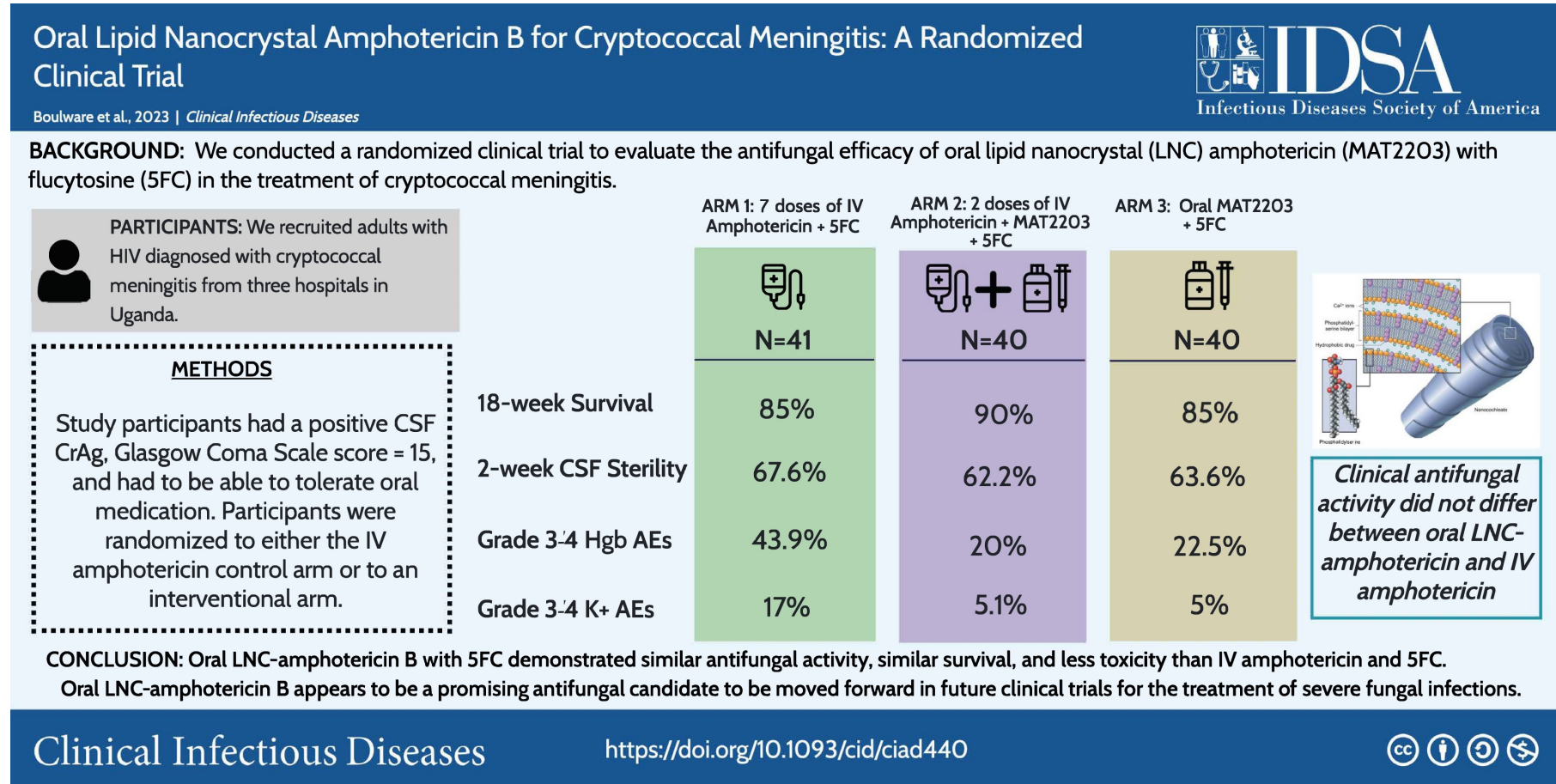
29.7%

Nanostructured Ampho B delivery systems

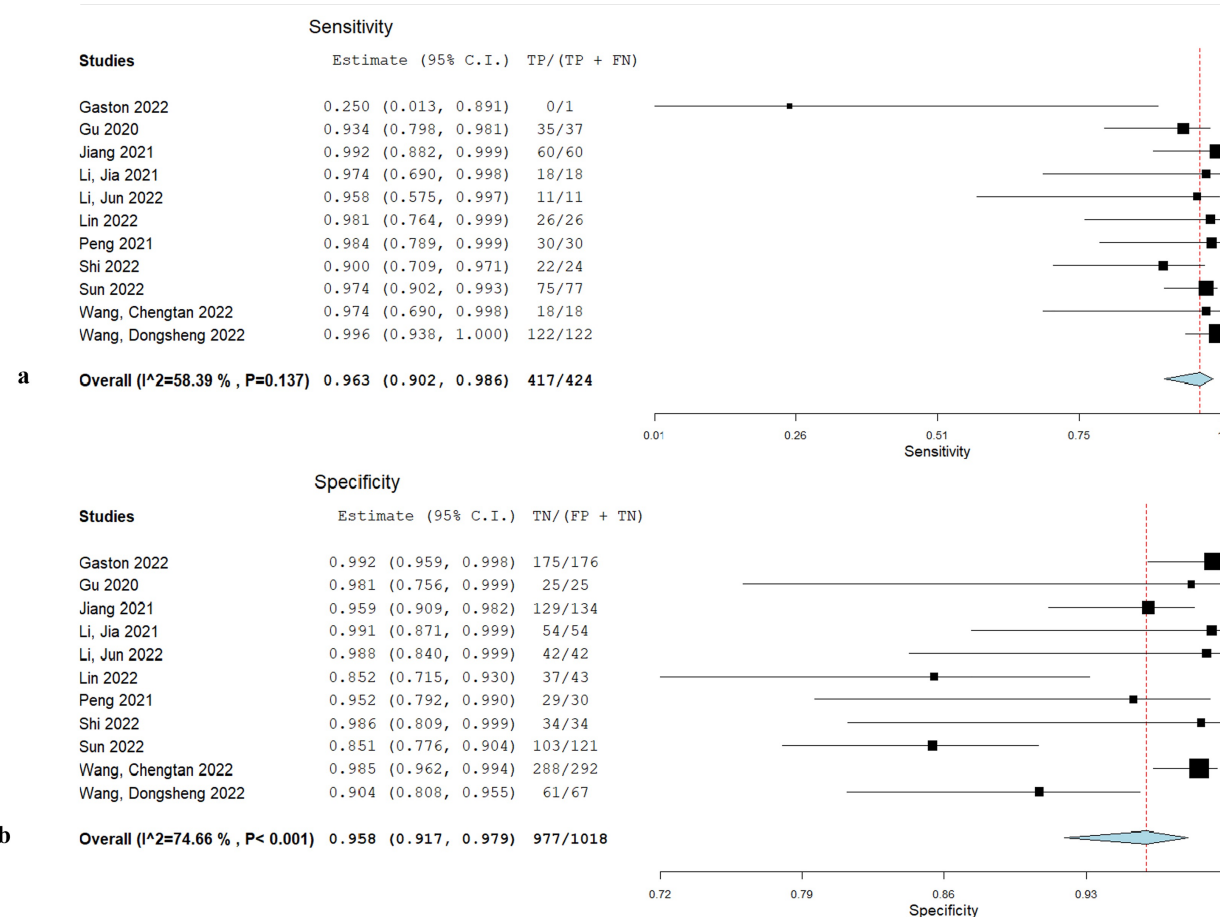


Expert Opinion on Drug Delivery Aug 2019;16(10)

Oral LNC Ampho B for HIV/CM: Proof of concept

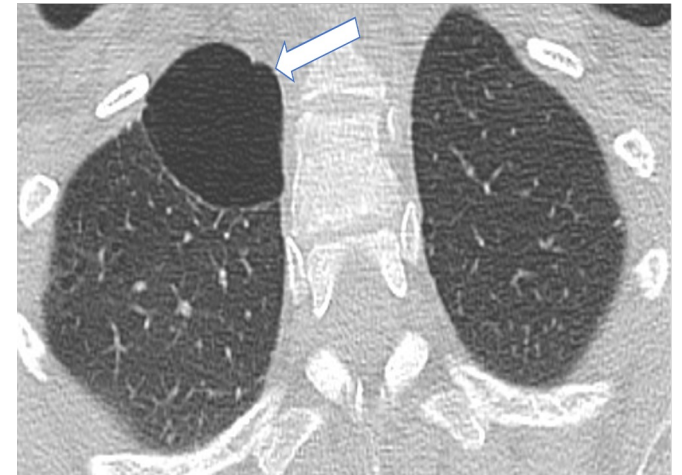
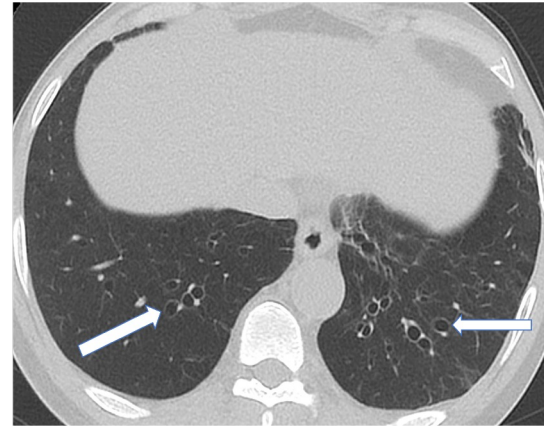
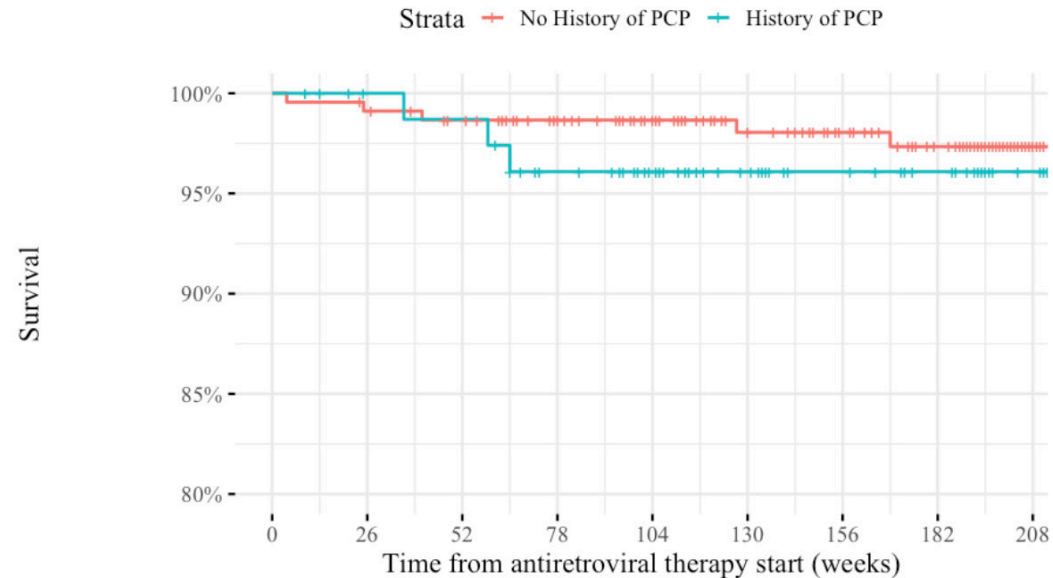


MNGS promising option for PJP diagnosis: BAL and Blood



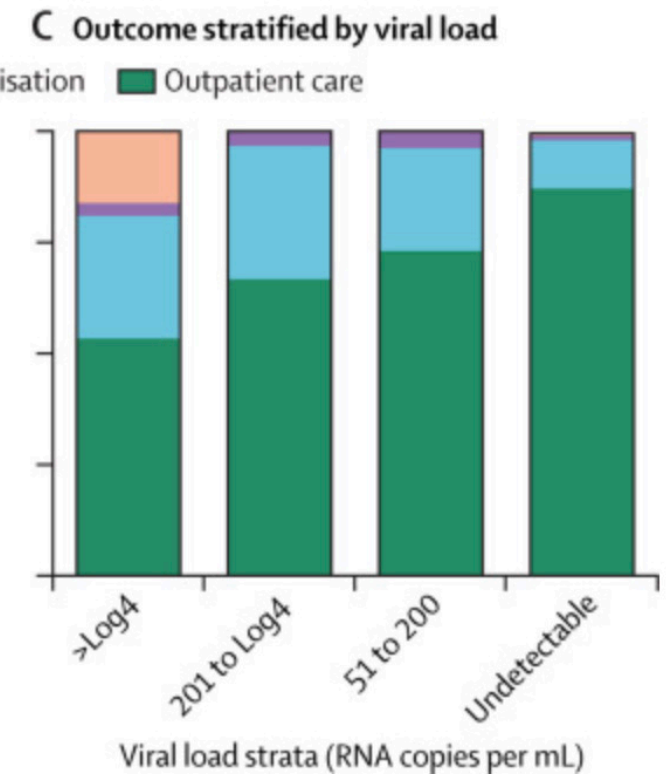
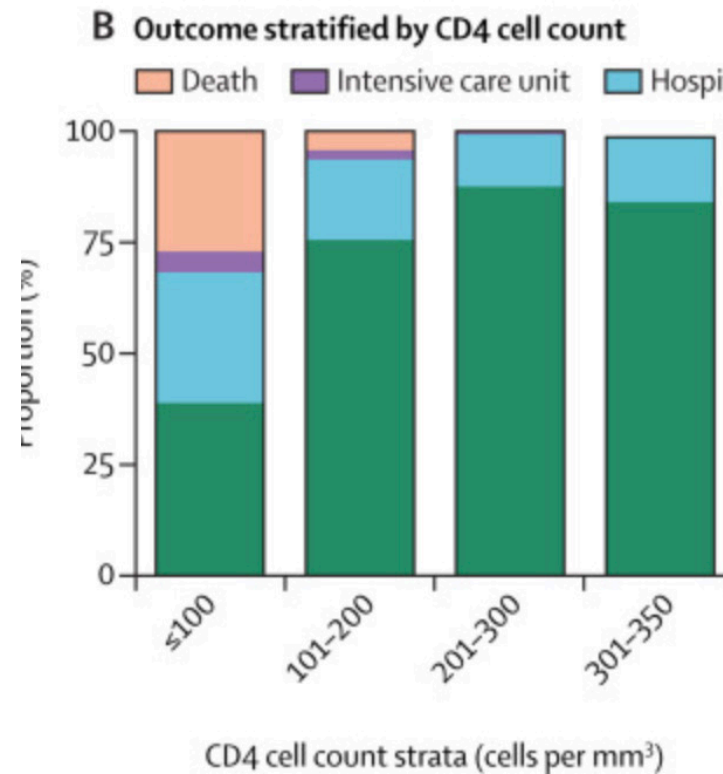
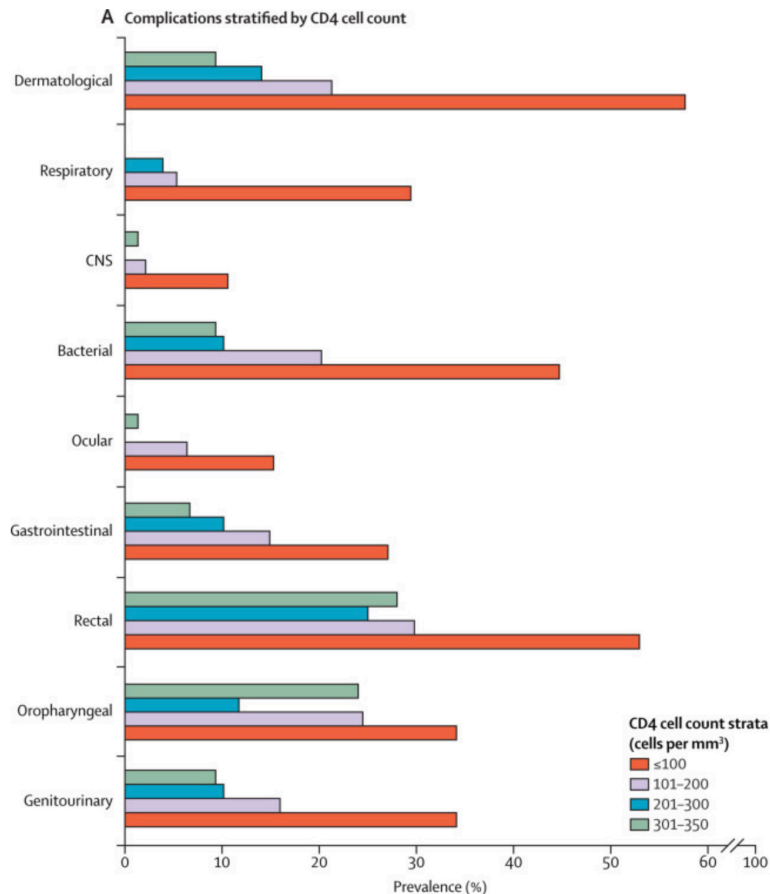
PCP in ART era: Long term outcomes

- Lower lung capacity/diffusion impairment



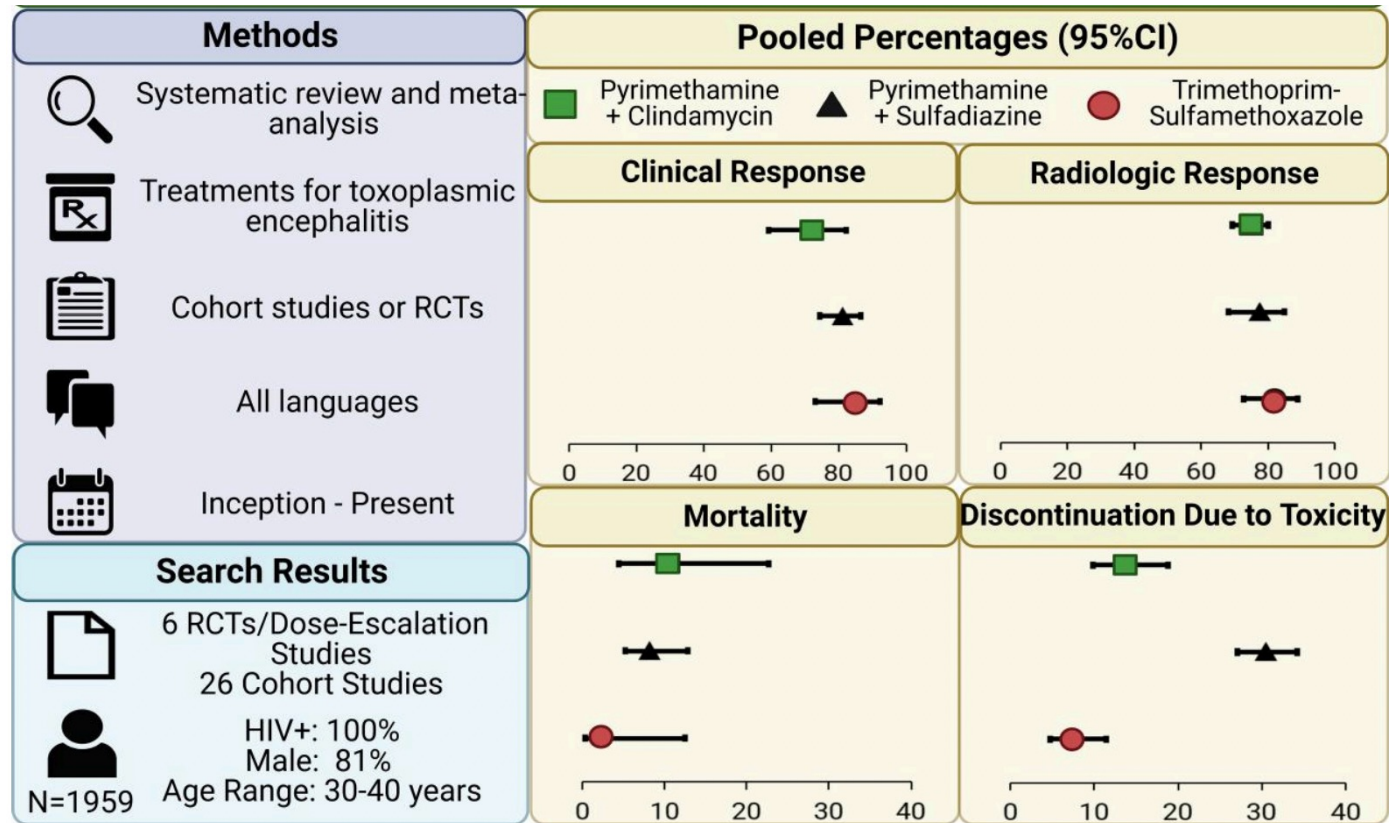
Mpox complications & outcomes stratified by CD4 count: The emergence of mpox as HIV-OI

Euroguidelines



Treating TE in PWH

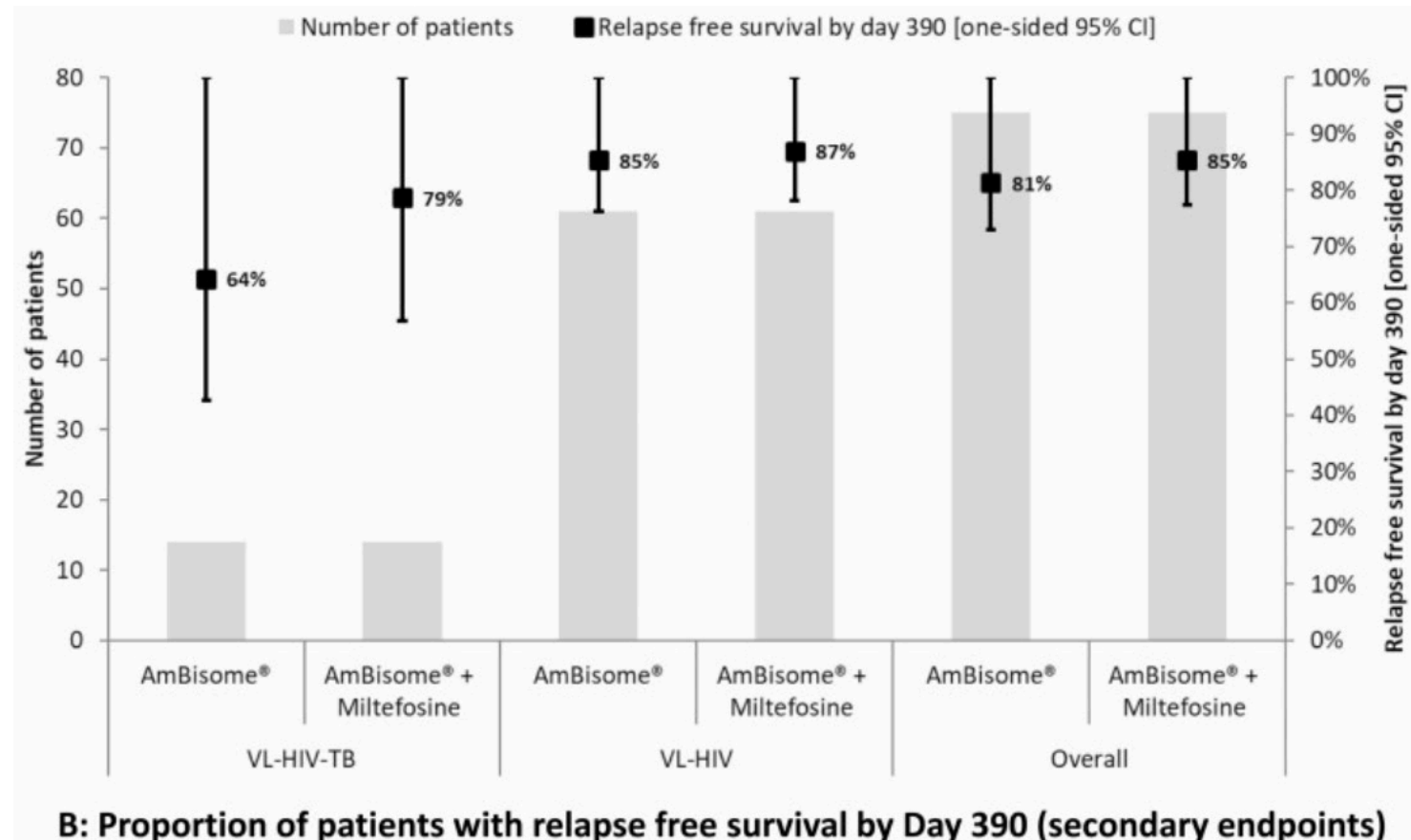
Euroguidelines



TMP-SMX (5/25 mg/kg) bid for TE
Time to revisit guidelines

HIV and visceral leishmaniasis

Euroguidelines



Summary

- OI's: here to stay, continue to demand our attention in foreseeable future
- Important advances in
 - Screening and diagnosis with POC rapid tests
 - Shortening duration of treatment with better safety
- Access to novel tools critical for scale-up
- Strategies for preventing late presentation urgently needed

Thank you