

MODERN ART FOR KENYA

ART & TB

Everyone with HIV needs to take
HIV treatment – called antiretroviral
therapy, ART or ARVs

NOVEMBER 2020



NEW HIV TREATMENT



Kenya has changed to a new preferred first-line HIV antiretroviral treatment (ART).

The medicines in the new ART combination are: tenofovir, lamivudine & dolutegravir.

This combination is also called TLD.



Most people living with HIV will be given TLD.

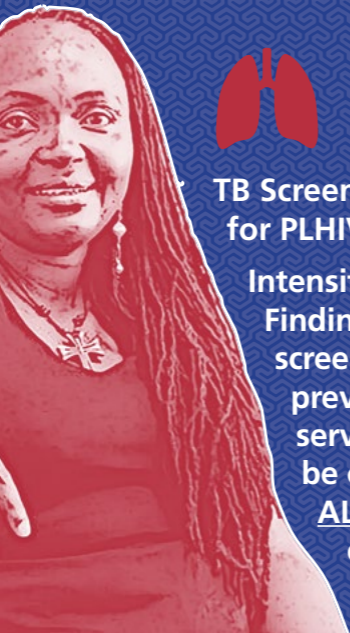
Some people, including some who are treated for tuberculosis (TB), will be given efavirenz-based ART.



HOW DO I FIND OUT IF I HAVE TB?

Everyone starting ART will be screened for symptoms and tested for TB.





• TB Screening for PLHIV:

Intensified Case
Finding (ICF) TB
screening and
prevention
services should
be offered to
ALL PLHIV at
clinical visit.



WHAT IF I

DON'T HAVE

ACTIVE TB*?

If you are tested and don't have active TB, you will be started on TB preventive therapy (TPT).

*Active TB means that you have TB with symptoms.





TPT

TB preventive therapy is done with a drug called isoniazid (INH), taken once a day for 12 months.

You will also be given pyridoxine (vitamin B6) to help prevent peripheral neuropathy (nerve damage) which can be caused by long term INH use.

TPT and ART will help to stop you getting TB.

SYMPTOMS OF

ACTIVE TB

COULD INCLUDE

- Coughing that lasts three or more weeks
- Coughing up blood
- Chest pain, or pain with breathing or coughing
- Weight loss
- Extreme tiredness
- Fever
- Night sweats
- Chills



WHAT IF I DO HAVE TB?

If you test positive for active TB and it is drug sensitive* you will start treatment with Rifafour.

This treatment is a combination of four anti-TB drugs: rifampicin, isoniazid, pyrazinamide and ethambutol.

It will also include pyridoxine (vitamin B6) to prevent side effects from isoniazid.

*Drug sensitive means that the TB is not resistant to first-line TB drugs.

TB TREATMENT & CD4 COUNT

You will start ART soon after starting TB treatment, depending on your CD4 count:

- If your CD4 is less than 50 cells/mm³ – start ART within two weeks of starting TB treatment, when your symptoms are improving, and TB treatment is tolerated.
- If your CD4 is more than 50 cells/mm³ – start ART eight weeks after starting TB treatment.

WHAT ART

COMBINATION

WILL I START WITH?

If you are not already on ART when you start your TB treatment you will be given a combination based on efavirenz.

This is because rifampicin lowers the amount of dolutegravir in the body, as it does for many drugs.

This is called a drug-drug interaction.

HOW LONG DO I NEED TO STAY ON EFAVIRENZ?

The efavirenz-based ART should be continued until two weeks after TB treatment is finished.

After this the efavirenz can be switched to dolutegravir.

**WHAT IF I AM
ALREADY ON
ART WHEN I FIND
OUT I HAVE TB?**

If you are on efavirenz-based ART you will continue this until you finish your TB treatment.



**If you are on
dolutegravir-based
ART you will need to
increase the amount
of dolutegravir you
take to 50mg twice
daily to overcome
the interaction
with rifampicin.**



**If you are on TLD
FDC, you will need
to add a dolutegravir
50mg dose 12 hours
after taking TLD.**

**So if you take your TLD
in the morning, you will
need to take your extra
dolutegravir in the evening.**

You can find more
information on treatment
at the following links:

www.afrocab.info

www.i-base.info

www.clintonhealthaccess.org

AFRO-CAB



i-base

