

# Changing ART



The British HIV Association (BHIVA) produces medical guidelines about HIV treatment.

This is one of four leaflets about the 2015 guidelines on antiretroviral treatment (ART). This is leaflet 2 of 4.

---

## The guidelines recommend changing ART for different reasons

- If viral load results are not as good as they could be and HIV is detectable.
- If side effects are affecting your quality of life.
- If HIV has become resistant to one or more of your drugs.
- If there is a drug interaction between your HIV meds and other drugs.

---

## Key for the strength of guideline recommendations

**!** Strongly recommended. This advice should almost always be followed.

**○** A recommendation based on less evidence. It might apply in some situations.

**GPP** A recommendation based on expert opinion. Even with limited evidence, this is something most doctors should follow. GPP stands for “good practice point”.

---

## Important recommendations in the guidelines

### Changing ART because of side effects

**GPP** You can change to new meds if you have side effects.

Talk to your doctor about any side effect and ask about alternative drugs.

### Assessing what meds you can change to

**GPP** If you need to change meds your doctor will talk about other drugs that you can use.

Ask your doctor about any new side effects, or drug interactions, or drug resistance. Talk to your doctor about interactions with other meds you take.

This includes vitamin or mineral supplements and recreational drugs.

### Viral blips

A blip is when viral load becomes detectable on ART for a short time.

**GPP** There is no need to change meds if you have a single and temporary viral blip.

### Viral rebound

**!** If viral load goes above 200 copies/mL you should have a resistance test. If a second viral load test shows this is not a blip (and it is not explained by adherence or other factors) you might need to change treatment.

## Drug resistance

Drug resistance can stop ART from working. If HIV becomes resistant to one or more of your drugs, viral load will become detectable. This is a reason to change treatment. The best way to avoid drug resistance is to always take ART as it is prescribed.



## High viral rebound with no resistance

- ! Even if tests don't show drug resistance the guidelines recommend changing treatment. This is usually to a completely new combination.

## Extensive drug resistance

Drug resistance reduces your choice of treatment. The recommendations include:

- GPP** That your doctor gets expert advice on your treatment options.
- ! The new combination should include at least one new class of drug.
- Resistance test results, together with your history of resistance, might mean you need to use more classes of drugs.
- GPP** Adherence is always important. You'll have to take the new meds in the right way for them to work. Talk to your doctor to get support for this. Understanding why your previous ART failed will help to not repeat the same mistakes.

## When treatment options are very limited

- GPP** If you have resistance to approved drugs, you may be able to use drugs that are in late stages of research.
- ! Stopping ART is not recommended. Viral load rebounds quickly in nearly everyone who stops ART, and CD4 counts will drop.  
New drugs will be used carefully to reduce the risk of further drug resistance.

---

### The other three leaflets on the 2015 guidelines are:

1. Overall ART guidelines for HIV.
3. ART with other health issues: cancer, TB, hepatitis and mental health.
4. What's new in the guidelines. Including young people, women and later life.

### Further information and support

Community organisations in the UK that produce HIV treatment information and resources include HIV i-Base ([i-Base.org.uk](http://i-Base.org.uk)) and NAM ([aidsmap.com](http://aidsmap.com)).

## About BHIVA

BHIVA is an organisation for health professionals in the UK. Members include doctors, nurses, researchers, pharmacists and community advocates. Since 1995, BHIVA has been committed to providing excellent care for people living with and affected by HIV.

BHIVA is a national advisory body on all aspects of HIV care and provides a national platform for HIV care issues. To help promote and monitor high standards of care, BHIVA publishes a range of clinical guidelines: [www.bhiva.org/guidelines.aspx](http://www.bhiva.org/guidelines.aspx)

Information about how BHIVA guidelines are developed: [www.bhiva.org/ClinicalGuidelines.aspx](http://www.bhiva.org/ClinicalGuidelines.aspx)

---