



Factsheet 6: HIV Care and Antiretroviral Therapy (ART) Services in Nepal, as of July 2016

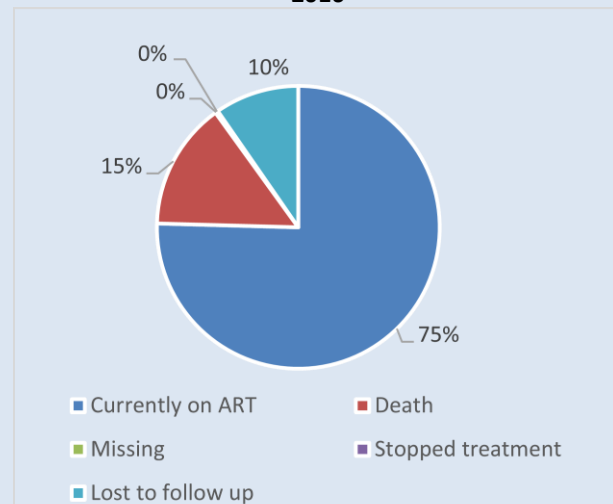
Background about ART program in Nepal

- ✎ ART was started in Nepal in February 2004 from Sukraraj Tropical and infectious Disease Hospital, Teku.
- ✎ ART is available for free of cost for all eligible people living with HIV (PLHIV).
- ✎ Currently ART is available from 65 sites in 59 districts. HIV care is available from many sites including ART sites.
- ✎ Establishment of ART dispensing centers is underway to increase accessibility of the treatment.
- ✎ National Consolidated Guideline for Treating and Preventing HIV in Nepal 2014 is the guiding document for providing HIV treatment and care in Nepal and it is being updated in Test and Treat approach.
- ✎ CD4 count service is available from 27 sites across the country.
- ✎ Viral load testing service is available from National Public Health Laboratory and is expanded to Seti Zonal Hospital, Kailali.

Table 1: Facts on ART, as of July 2016

Indicators	Value
Total PLHIV currently on ART (as of July 2016):	12,446
Patients on the 1 st line regimen:	9,216
Patients substituted on the 1 st line	2,974
Patients switched on the 2 nd line	256

Figure 1: Outcomes of ART Program in Nepal, as of July 2016



Facts about ART Coverage

- ✎ Among Total People with advanced HIV infection who are currently on ART, of which,

Proportion of Adults (15+ years): 92.4%	Proportion of Male: 6,446 (51.8%)
Proportion of Children (Under 14 years) : 7.6%	Proportion of Female: 5,967 (47.9%)
	Proportion of TG: 33 (0.3%)
- ✎ Percentage of people with advanced HIV infection who are alive and currently on ART after

12 months of treatment: 86.6%	24 months of treatment: 79%
(<15 yrs: 93.5%, 15+ yrs: 86%) (F=91%, M=83%, TG=67%)	36 months of treatment: 79%
- ✎ Percentage of adults and children receiving antiretroviral therapy among all estimated adults and children living with HIV (2015): 30.3%

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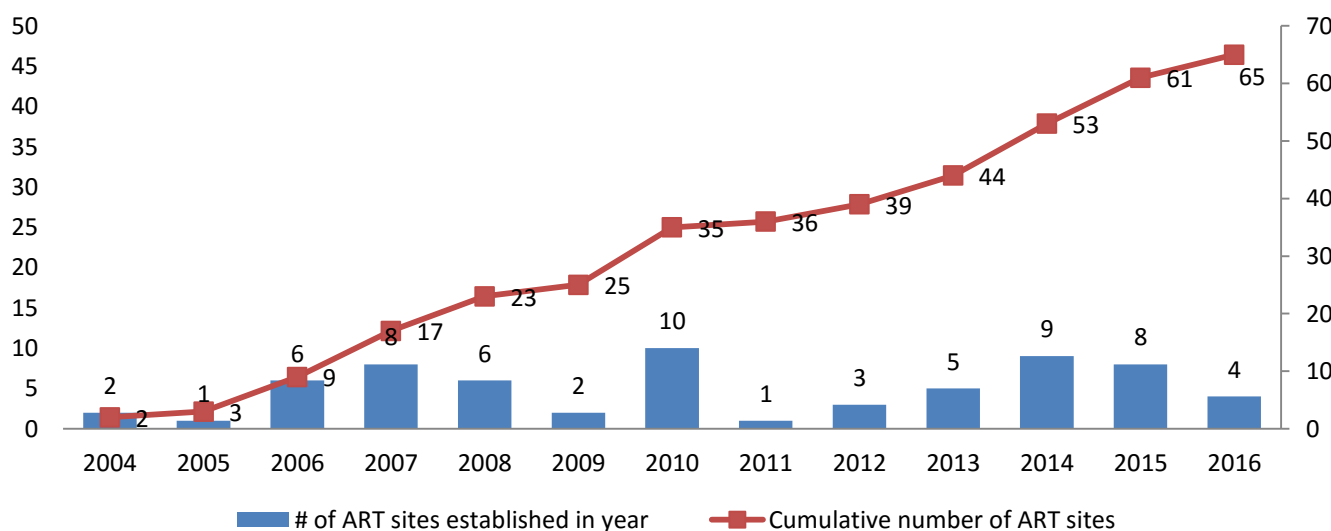


Table 2: ART Profile of Nepal, as of July 2016

Indicators	2007 July	2008 July	2009 July	2010 July	2011 July	2012 July	2013 July	2014 July	2015 July	2016 July
PLHIV ever enrolled on ART (cumulative)	1,180	2,452	3,968	5,539	7,437	9,246	11,091	12,899	14,745	16,449
PLHIV with advance HIV infection receiving ARVs (cumulative)	891	1,997	3,226	4,509	5,876	7,142	8,546	9,818	11,089	12,446
People lost to follow up (cumulative)	54	182	293	426	647	908	1,055	1,216	1,530	1,612
People stopped treatment	2	5	18	11	12	11	27	30	31	31
Total deaths (cumulative)	114	276	447	653	872	1,185	1,463	1,834	2,095	2,410

Source: NCASC, 2016

Figure 2: Number of ART sites in Nepal by establishment year



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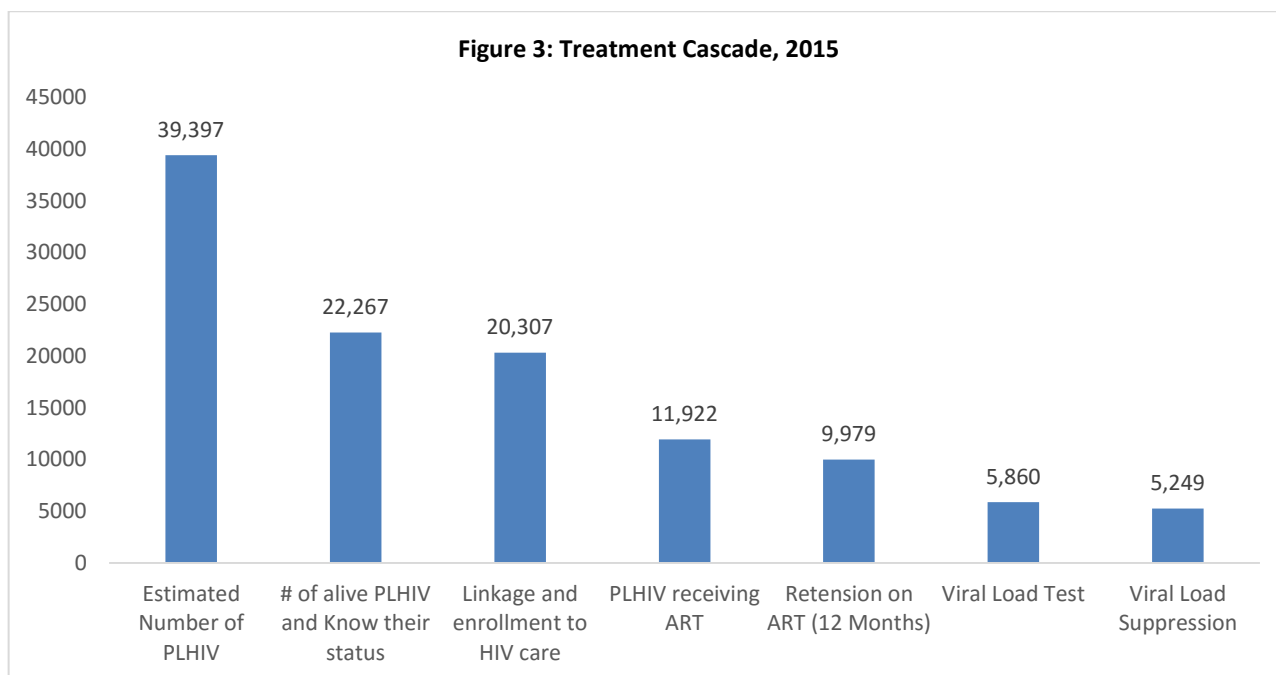
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Figure 3: Treatment Cascade, 2015



Viral Load:

- ✘ Viral load testing is recommended as the preferred approach to monitor ART response and diagnosing treatment failure.
- ✘ It compliments clinical and immunological monitoring of people receiving ART.
- ✘ The Viral load testing service is available at National Public Health Laboratory (NPHL) and Seti Zonal Hospital.

Table 3: Facts on Viral load

	2014	2015	2016 (Jan-July)
Total Sample tested for viral load	1,198	5860	5,478
Number of PLHIV with viral load suppression (<1,000 copies/ml)	1,004	5249	4,816

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Community Care Centre (CCC) Service in Nepal, 2016

- ✎ CCC is a short-term care home catering to the needs of PLHIV and serving as a link between the hospital and home/community.
- ✎ The key services include positive prevention, medical care, nutritional support, treatment literacy for adherence, care and support, and linkage to other social services.

Table 4: Facts on CCC (FY 2072/73)	N
District Covered	43
Number of new PLHIV receiving services from CCC	3,444
Number of Follow-up PLHIV receiving services from CCC	7,050
Number of PLHIV received psycho-social counseling support	3,804
Number of PLHIV received nutritional support	2,878
Number of PLHIV referred for management of opportunistic infections	2,019

Community and Home Based Care (CHBC) Services in Nepal, 2016

- ✎ CHBC responds to the physical, social, emotional and spiritual needs of PLHIV and families from diagnosis to death and bereavement.
- ✎ National package of CHBC as per National Guidelines on CHBC and Standard Operating Procedures 2011 consists of care and support to PLHIV for adherence, nutritional education, hygiene and sanitation, family planning, referral, linking with social services, emotional/spiritual support and counseling, infection prevention, and end of life care.

Table 5: Facts on CHBC (FY 2072/73)	N
District Covered	40
Number of PLHIV who received CHBC services	11,899
Number of PLHIV referred for ART management	4,093
Number of PLHIV referred for management of opportunistic infections	2,234

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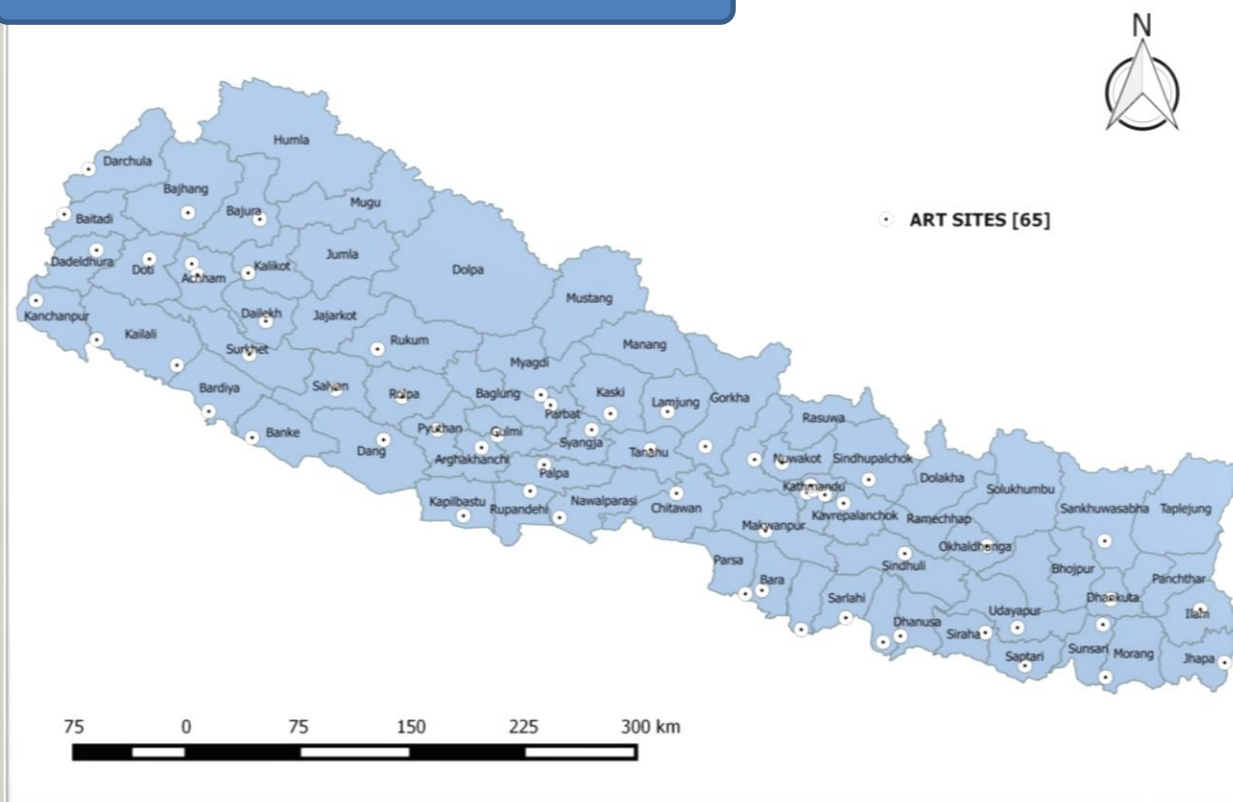
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Figure 4: ART service sites in Nepal, July 2016



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