15 JULY 2016, Nairobi, Kenya. The Ministry of Health through the National AIDS and STI Control Program (NASCOP) has launched a campaign dubbed “Anza Sasa” to encourage all those who test HIV positive to get ARV treatment regardless of their CD4 Count. In the past, only those with a CD4 count of 500 and below were eligible for treatment. “The aim of providing antiretroviral treatment to all people living with HIV is two pronged; first, it will enable the individual who is on antiretroviral therapy to reduce the level of the virus circulating within their body to an undetectable level and as such reduce further damage to their immune system and improve the body’s ability to fight off infections averting unnecessary illnesses, disabilities and even deaths related to HIV said Dr. Sirengo, Head of the National AIDS and STI Control Program (NASCOP). Secondly, with an undetectable viral load level, further transmission to people who are uninfected with HIV will be minimized”.

New Guidelines on Use of Antiretroviral Drugs for Treating and Preventing HIV Infection in Kenya 2016 were also launched to provide guidance on the use of antiretroviral medicines for treating people living with HIV. Kenya currently has 1.5 million people living with HIV and an estimated 900,000 have been receiving treatment.

“As a paradigm shift from previous guidelines, these new guidelines that are in line with international standards and World Health Organization recommendations stipulate that all people living with HIV be put on treatment with the lifesaving antiretroviral medicines”, said Dr.-Nduku Kilonzo, NACC. The services will be offered free of charge at all public health facilities providing HIV care and treatment services in Kenya.

Another new shift is that the use of antiretroviral medicines to prevent HIV transmission will particularly be emphasized through the elimination of mother to child transmission of HIV (eMTCT) program where all pregnant women identified to be HIV-infected will be started on antiretroviral medicines immediately upon diagnosis in order to reduce transmission of HIV to the unborn baby. Upon delivery, infants born to a mother who is HIV-infected will be tested for HIV at birth or within two weeks after delivery. “The infants who are identified to be HIV-infected will be initiated on antiretroviral medicines immediately in order to increase their chances of survival whereas infants who are not infected will be provided with preventive antiretroviral medicines for twelve weeks after birth, this will go a long way in reducing new infections among children, said Cabinet Secretary for health, Dr. Clephas Mailu. The breast feeding women will be closely followed up to ensure that they closely adhere to antiretroviral therapy and remain virally suppressed throughout the breastfeeding period in order to prevent HIV transmission to their babies.

Antiretroviral therapy is now also recommended for HIV negative persons to prevent acquisition of HIV and is known as pre-exposure prophylaxis. This intervention will be accessible at specific HIV prevention, care and treatment service delivery settings under close supervision by NASCOP and County Health team.
and will be available to populations at high risk of acquiring HIV.

"The Ministry of Health is committed towards the implementation of the recommendations provided in the Guidelines on use of Antiretroviral drugs for treating and preventing HIV Infection in Kenya 2016 towards reducing new HIV infections and deaths related with HIV and reaching HIV epidemic control" said Dr. Cleophas Mailu Cabinet Secretary, Health

Other guidelines and documents that were launched during the same function included Integrated Biological and Behavioral Survey for Key Populations, the Polling Booth Survey 2015, Report, Reaching the Unreached: The Evolution of Kenya’s HIV/AIDS Prevention Programme for Key Population report and a training manual on Responding to Violence against Key Populations to Promote Access to HIV Services

NASCOP’s Voluntary Medical Male Circumcision program also launched Results of Active Adverse events surveillance for PrePex circumcision in Kenya. To prevent occupational exposure to HIV among health workers, a report on Occupational Exposure to Blood/Body Fluids and HIV Post Exposure Prophylaxis in Health Care Facilities in Kenya (2011 – 2014) was also launched as well as several handbooks on HIV treatment literacy materials for parents, caregivers, children and adolescents were also launched. And as the country moves towards strengthening quality and efficiency in the health sector, HIV commodity management guidelines were launched.

For more information, see attached background information on all the documents launched.

We will be happy to provide further interviews.

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Signed:
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