



European
AIDS Treatment
Group



Ageing with HIV conference



“young by age – old by treatment”



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Day 2: Testing in children and adolescents

“we’ll pay the price later”

Observations

Low testing is happening in < 25y people but prevalence and incidence are increasing in young population

High percentage recognised as vulnerable population

Actions needed

- ⇒ Upscaling testing is needed < 18 year old people
- ⇒ Better information and mobilization (and normalization of testing)
- ⇒ Make testing possible without guardian’s permission



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Day 2: *Disclosure: how and when?*

“no bugs, no battles, no war”

Observations

Disclosure often happens rather late and this has impact on future (mental) health and relationships

Choosing the right moment is important

Actions needed

- ⇒ Don't dramatize HIV (but disclosure remains difficult)
- ⇒ Work on stigma and discrimination (also from direct surrounding)
- ⇒ Positive messaging



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Day 2: Paediatric ARV formulations

“children are different so there is a need to tailor treatment”

Observations

Better access to treatment but suboptimal treatments are still being used. Earlier treatment should be possible.

Most variabilities below 6 years (but understudied group)

Actions needed

- ⇒ More research within children/very young children
- ⇒ Support adherence and improve retention to care
- ⇒ Simplify paediatric treatments (and create new and better options)



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Day 2: *Pharmacology of ARVs*

“take control – doctors make mistakes”

Observations

Impact of puberty, genetics and metabolism

Actions needed

- ⇒ More research needed and improved paediatric options
- ⇒ Underuse of pharmacogenetics in treatment
- ⇒ Better understanding needed of infancy, childhood and puberty
- ⇒ Listen and support good doctor/patient relationship