

HIV/AIDS prevention, care and treatment in the Region of the Americas: achievements, challenges and perspectives

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The world has pledged within the Sustainable Development Goals to end the AIDS epidemic by 2030. In Latin America and the Caribbean in 2015 approximately 2.0 million people were living with HIV and an estimated 100 000 new infections occurred. Yet, significant progress has been made in the Region of the Americas over the past ten years in expanding access and coverage of HIV care and treatment and in achieving elimination of mother-to-child transmission of HIV and syphilis (1, 2). Regarding HIV prevention, and HIV stigma and discrimination new regional elimination targets have also been developed and endorsed (3). However, challenges still persist; among them, a 3% increase in the rate of new HIV infections in the Region between 2010 and 2015 (4).

This special issue on *HIV/AIDS prevention, care and treatment in the Region of the Americas: achievements, challenges and perspectives* provides an opportunity to present the current response to HIV/AIDS in the Region with a focus on three main areas: HIV prevention, HIV care and treatment, and the elimination of mother-to-child transmission of HIV and congenital syphilis. A call for papers was issued in early 2016, and 12 articles were selected for publication—nine original research papers, one brief communication, one review, and one opinion and analysis article. The papers represent seven different countries as well as an overview of the Caribbean sub-region.

A successful HIV prevention program requires a combination of structural, biomedical, and behavioral interventions that are mutually reinforcing, continually evaluated, and tailored to the needs and risks of specific key populations and others who are vulnerable to infection. Previous reports have shown the importance of combination prevention strategies (5). The special issue addresses this by focusing on HIV prevention strategies available for men who have sex with men in the United States (6), as well as the social vulnerability of transgender persons (7). Both papers highlight the need for tailored interventions that take into account local epidemiological contexts.

The HIV care continuum is a framework that models the dynamic stages of HIV care and is an important tool to measure progress in population-level estimates of program coverage from diagnosis to viral suppression. One paper focuses on HIV care and treatment by addressing the HIV care continuum through a study that looks at risk factors for delays and losses to follow-up among the different stages of care in Brazil (8), and two manuscripts describe the continuum of care in the Bahamas and in the city of Buenos Aires, Argentina (9, 10). Other researchers present a review of the HIV response in the Caribbean focusing on the epidemiology, prevention, and the continuum of care and treatment (11).

Contraception services can help meet the family planning goals of women living with HIV as well as prevent mother-to-child transmission of HIV and other infections. A recent review highlighted the importance of integrated services as well as improved counseling methods to help women choose and use an effective birth control method (12). For the track on accelerating progress towards the elimination of mother-to-child transmission of HIV and congenital syphilis, an opinion and analysis paper brings attention to the importance of contraception services to meet the family planning needs of women living with HIV as well as to prevent transmission of HIV or syphilis during pregnancy (13). With rising use in effective interventions against pediatric HIV infection in the Region, the number of infants infected with HIV has declined. However, the number of uninfected infants exposed to HIV during pregnancy continues to rise. The health outcomes of this pediatric population remain to be fully described (14). An original research article from Jamaica shows that infectious disease morbidity increased in a cohort of HIV-exposed, uninfected, non-breastfed infants (15). Another paper provides information on HIV

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and syphilis co-infection among pregnant women in Porto Alegre, Brazil, and emphasizes the role of social vulnerability (16). Universal HIV and syphilis screening of pregnant women is recommended as part of basic antenatal care. Rapid, specific and validated point-of-care syphilis tests have been developed and successfully implemented in a variety of clinical settings (17). Two papers from Colombia provide information on this topic. One explores the effectiveness and safety of dual rapid tests on a single device compared to single tests for HIV and syphilis in pregnant women, and the second, a qualitative study, evaluates the acceptability of point-of-care testing in routine antenatal services (18, 19). The quality of the data used to monitor progress and evaluate impact of prevention of mother-to-child transmission programs requires the existence of an adequate system to document and monitor the status of the elimination of mother-to-child transmission impact and coverage indicators. Finally, another paper provides results of a Brazilian study evaluating the quality of the information system on HIV/AIDS among pregnant women in the state of Rio Grande do Norte, which highlights the need to invest in infrastructure and training (20).

The vigorous response to the HIV epidemic by the Region of the Americas thus far has led to unprecedented advancements in programs and declines in infections. However, the results of these studies make it clear that it is necessary to address the health needs of the transgender population; increase the proportion of people living with HIV who remain engaged at each step of the HIV treatment cascade; consider the health needs of HIV-exposed infants; and introduce and /or scale up HIV and syphilis rapid testing as part of the routine package of antenatal care services available for all pregnant women. In addition, key populations continue to be disproportionately affected by HIV infection and face considerable stigma and discrimination, both at the community level and in accessing health services. Although pre-exposure prophylaxis demonstration projects are starting to be implemented in the Region (21), HIV combination prevention strategies need to be considerably enhanced, especially among young people and those most at risk. Likewise, more efforts supporting progress in elimination of mother-to-child transmission are required to allow additional countries to reduce perinatal transmission of HIV and special focus is needed to further support prevention of congenital syphilis and other diseases (i.e., perinatal hepatitis B and Chagas disease where prevalent). Overall, there is a strong need to evaluate and document the effectiveness of HIV interventions in order to identify best practices and disseminate the valuable lessons already learned to allow more effective scale-up of programs in the Region. We hope that this special issue will provide a meaningful contribution toward this goal.

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