

HIV Care in 2009: Therapeutic Progress, but Complex Challenges Remain

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Although the hard-fought progress that has been made with regard to the prevention, diagnosis, and treatment of human immunodeficiency virus (HIV) infection is certainly worth celebrating, significant challenges remain in dealing with this public health pandemic more than a quarter of a century after it began.

Today, HIV infection is a complex chronic infection that requires a high degree of specialization among clinicians. HIV clinicians must constantly update their skills and knowledge. Routine HIV testing is an important tool to link persons infected with HIV to the care that they need early during the course of the disease, when advanced drug treatments and prevention strategies are the most effective. This evolving infection also demands a multidisciplinary approach that transcends the silos often found in traditional medical care. Both treatment and prevention efforts by HIV clinicians can provide patients with the support that they need early in the course of this disease and slow its spread.

In this context, the new issue of *Clinical Issues in HIV Medicine* includes recent articles from both *Clinical Infectious Diseases* and *The Journal of Infectious Diseases*. The goal of this annual collection is to provide

primary care providers who treat HIV-infected patients with the latest evidence-based information needed to deliver the best care. The articles discuss new findings related to the management of HIV infection and insights into disease prevention and special populations. Editorials follow several of the articles in this issue and offer additional perspectives, while also providing context for these new findings.

The compendium's first section includes articles that address the general clinical management of HIV infection, including current questions about the most effective use of antiretroviral medications. Since their introduction in the mid-1990s, much has been learned about how to use these drugs safely and effectively for the treatment of HIV infection. However, questions remain with regard to, for example, the best timing of initiation of this therapy and the specific benefits or risks associated with earlier treatment. Several articles discuss issues related to earlier initiation of antiretroviral therapy; others focus on drug resistance, concerns about poor treatment adherence, comorbidity rates, and differences in mortality rates by sex and among racial groups in the context of antiretroviral treatment.

Many of the articles focus on complex management issues in the long-term treatment of patients with HIV infection, with attention given to progressive multifocal leukoencephalopathy, Kaposi sarcoma—as-

sociated herpesvirus disease, cryptococcal meningitis, and kidney disease. The continued need for prevention and for treatment guidelines for opportunistic infections associated with HIV infection is also discussed.

Because concerns about the worldwide prevalence of HIV and *Mycobacterium tuberculosis* coinfection have increased, several articles focus on questions regarding HIV and drug-resistant tuberculosis, including recommendations for future research priorities from the National Institute of Allergy and Infectious Diseases. Together, these infections form an even deadlier combination that takes a terrible toll on the health of the global population.

Among all the therapeutic advancements that have been made, prevention remains crucial in slowing the spread of HIV infection. In the United States alone, >56,000 new HIV infections occur every year, with millions more people newly infected worldwide. The compendium includes recent articles about the role of male circumcision in preventing infection and the relationship between receiving care and HIV transmission risk behavior among patients who have recently received a diagnosis of HIV infection. Other articles focus on questions regarding the relationship between hormonal contraception and the progression of HIV infection in women, as well as the care of pregnant women infected with HIV.

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As the articles in this compendium demonstrate, the science behind HIV care is always changing. The editors hope that this latest issue can play a part in highlighting new evidence-based research to help HIV clinicians keep pace with this complex chronic infection, a public health

challenge that continues to demand great specialization and dedication from clinicians and health care providers.

This year's edition of the compendium also includes a survey. Please share your thoughts and feedback about this annual collection to help the editors plan next

year's issue. For more information about the HIV Medicine Association (HIVMA), please visit <http://www.hivma.org>. An HIVMA membership application can be found at the back of this compendium.