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Short Communication

Can India achieve UNAIDS' target by 2030?

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ABSTRACT

The world is embarking on a fast-track strategy to end the AIDS epidemic by 2030. UNAIDS is targeted towards achieving the 95-95-95 strategy by 2025. Scaling up prevention, testing and treatment services towards HIV/AIDS is paramount in achieving these targets. To understand the status of India in achieving these targets, review of trials registered in the CTRI registry was done and found that among the 155 included trials, most (n=45, 29%) of the trials were drug trails, few were vaccine trials (n=6, 3.8%). Out of 155 studies, forty-one (20%) were in line to reach UNAIDS' targets. The primary focus of those studies was improving CD4 counts and suppression of viral load (third target of UNAIDS') (n=12, 7.7%), and the minimal focus was on promoting treatment adherence (second target of UNAIDS') (n=11, 7%) and promotion of HIV testing (first target of UNAIDS') (n=4, 2.5%). As prevention is always better than care, research should be encouraged towards prevention of HIV, which in turn facilitates achieving UNAIDS' 2025 and 2030 targets.

Keywords: Immune deficiency disorder, AIDS, Bharath, Global targets

INTRODUCTION

The top-line target of the United Nations program on HIV/AIDS (UNAIDS) for 2025 is achieving the '95-95-95' strategy. The strategy aims to ensure three key areas. First, 95% of HIV-positive people must know their HIV status. Second, 95% who know their status should get anti-retroviral therapy (ART). Finally, those 95% on ART should be virally suppressed and ending HIV/AIDS as a threat to public health by the end of 2030.[1-3]

The world is embarking on a fast-track strategy to end the AIDS epidemic by 2030.[4] Findings after five years of global fast-track commitment have shown that the world is off track. The global HIV prevention report has indicated that the progress towards achieving targets is

substantially short, and global progress is far too slow.[4,5] If this delay continues, it would result in 3.2 million additional AIDS deaths and 6 million additional new infections during 2016-2030.[4,5] In order to achieve these targets, there is a need to scale up prevention, testing, and treatment services and ensure effective utilization of ART.[5] Another critical need is research, to explore strategies for effective utilization.

To understand where India is standing in meeting these needs, we felt that identifying the kind of research that is happening towards HIV/AIDS is one of the ways.

METHODS

We reviewed the HIV-related protocols registered in clinical trials registry-India (CTRI).[6] We have identified 275 protocols registered towards HIV/AIDS from the inception of CTRI that is from 2007 to October 2022 by using advanced search options and the key term 'HIV' in the title of the study.

Selection criteria

Vaccine trails, trials towards quality of life of the elderly or lifestyle, trails addressing opportunistic infections and drug trials were excluded from the review. Trials towards HIV testing, drug adherence, improving CD4 and viral load and HIV prevention were included in the review.

Data extraction and analysis

A data extraction form was developed to collect the data. Details of the data extraction included the type of trial, study design, scientific title of the study, source of monetary support, site of the study, health condition studied, participant details, sample size, intervention, control arm details, primary outcome, secondary outcome. Majority (n=88, 56.77%) of the trials were registered from 2018. Initially, through title search, we have identified the trials which are actually directed towards HIV/AIDS. Then, the abstracts of the articles were reviewed. After abstract review, 155 articles were found relevant (Figure 1). All these 155 articles were distributed among nine reviewers (TJ, AP, AD, VT, KH, MS, PMP, RV, KKR) for preliminary review. Two reviewers abstracted each trial protocol. All reviewers examined the protocols with the most interest to understand whether these trials are in line with reaching the UNAIDS' target or not. SC (another team member) acted as a referee to resolve the conflicts among the reviewers. All the articles were categorised under major categorises like drug trials (efficacy, tolerance, safety), trials addressing opportunistic infections, improving CD4 count and viral suppression, drug adherence, HIV testing, prevention of HIV, vaccine trails, trails towards quality of life of PLWH and others. Descriptive statistics (Frequency and percentage) were applied to analyse data.

RESULTS

We found that among 155 included trials, most (n=45, 29%) of the trials were drug trails, towards testing drug efficacy drug tolerance, safety and addressing opportunistic infections (n=35, 22.5%). Few were vaccine trials to improve the quality of life of people living with HIV (n=6, 3.8%) (Table 1).

As we were interested in the studies towards UNAIDS' 2025 and 2030 targets, we found that forty-one (20%) studies were in line to reach these targets. Among these 41 studies, the primary focus was towards improving CD4 counts and suppression of viral load (third target of UNAIDS') (n=12, 7.7%), and the minimal focus was on promoting treatment adherence (second target of UNAIDS') (n=11, 7%) and promotion of HIV testing (first target of UNAIDS') (n=4, 2.5%). Minimal trails were registered towards prevention of HIV, which is a target to achieve by 2030 (Figure 1).

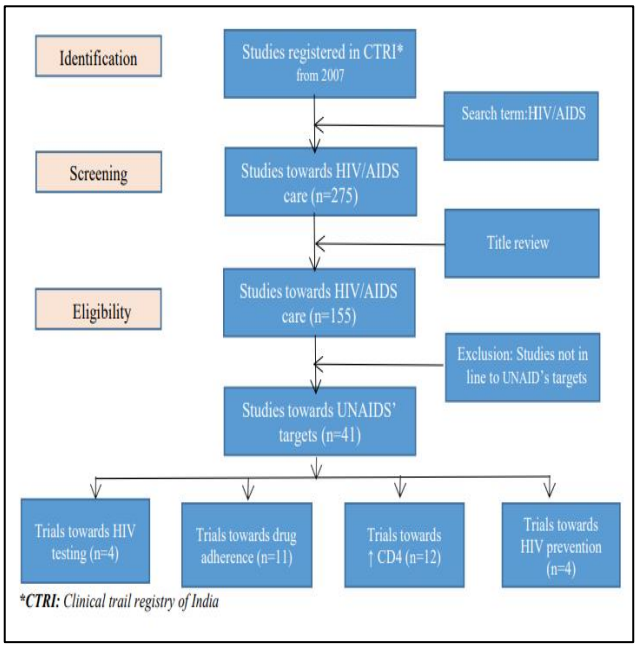

Figure 1: PRISMA flow diagram.

Table 1: Description of studies registered in CTRI from 2007 to October 2022 in India.

Trial details	N (%)
Drug trials (efficacy, tolerance, safety)	45 (29)
Addressing opportunistic infections	35 (22.5)
Improving CD4 count and viral suppression*	12 (7.7)
Drug adherence*	11 (7)
HIV testing*	04 (2.5)
Prevention of HIV†	04 (2.5)
Vaccine trials	06 (3.8)
Quality of life of PLWH	14 (9)
Others	24 (15.4)

*Studies in line to 2025 targets, †Studies in line to 2030 target.

DISCUSSION

As per the CTRI registry, the primary focus of the HIV/AIDS trials in India is on drugs and boosting immune parameters, where the least is on promoting screening for HIV and ART adherence.[7] Very minimal trails were registered towards prevention of HIV, which is a target to achieve by 2030.[8] Addressing stigma and discrimination will improve the screening for HIV and treatment adherence, which in turn help to reach the 2025 targets.[7,9] Targets for 2025 need to be achieved to reach the 2030 HIV targets within the Sustainable Development Goals.[10] Considering the importance of controlling stigma and discrimination, HIV and AIDS (prevention and control) Act-2017 clearly stated the legal liabilities towards discrimination of PLWH.[9,11]

Limitation

Trials that are not registered in CTRI were not included in the review.

CONCLUSION

Most of the trails are towards improving the treatment of the cases suffering from HIV/AIDS, but not towards it's prevention. As prevention is always better than care, research should be encouraged towards prevention of HIV, which in turn facilitates achieving UNAIDS' 2025 and 2030 targets.

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