



European
AIDS Treatment
Group



Ageing with HIV

Quality of Life and Preventive Healthcare

CONCLUSIONS

Koen Block

HIV CURE - managing expectations

- “Shock and kill (or activate and eliminate)” – “Main motivation is activist spirit”

- **Observations**

- Reservoirs and latency remain difficult to target
- Social and ethical challenges linked to CURE research (resources, risk vs reward, participant selection, trial design, cost and scalability)
- Cure or remission?
- CURE research: not there yet but almost ...
- Existing (altruistic) interest in HCRCT

- **Actions needed**

⇒ HIV CURE research must go on

⇒ Interest exists in HCRCT => wish to receive regular updates on research

⇒ Importance of patient-physician relationship

The role of technology in HIV management

- “If I can understand what is happening, others can do as well” – “Call your mother”
- **Observations**
 - Problem of late presenters and existence of many barriers towards testing
 - Success of combination prevention programs and checkpoints
 - Ideal test doesn’t exist yet
 - Advantages of e-health & evolution of virtual hospitals (from idea to application): role of apps, websites
 - Importance of robust co-design processes
- **Actions needed**
 - ⇒ Promotion of rapid & community based testing => checkpoints
 - ⇒ Increase uptake of HIV testing to reduce undiagnosed infection and late presentation
 - ⇒ Look at possibilities of apps for co-morbidities
 - ⇒ Further use of PROMs
 - ⇒ Link more hospitals to e-health and further develop apps and websites

Where do we go from here?

- “ ”

- **Observations**

- **Actions needed**

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