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HIV/AIDS: Treatment, Prevention and Future Innovations

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Abstract

HIV/AIDS remains a significant global health challenge despite advancements in medical science. This article reviews the current strategies in treatment and prevention, emphasizing the role of Antiretroviral Therapy (ART) in managing HIV infection. ART aims to reduce the viral load to undetectable levels, enhancing immune function and quality of life. Preventive measures, including Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP), along with behavioral interventions, play crucial roles in reducing transmission. Emerging trends such as long-acting antiretrovirals, ongoing HIV vaccine research, and innovative cure strategies like gene editing and immune-based therapies offer promising future directions. Continued research, innovation, and global collaboration are essential to advancing HIV/AIDS management and working towards eradicating the virus.

Keywords: HIV; AIDS; Antiretroviral therapy; ART; Prevention; Preexposure prophylaxis; PrEP; Post-exposure prophylaxis; PEP; Longacting antiretrovirals; HIV vaccines; Gene editing; Safe sex practices; Needle exchange programs

Introduction

Human Immunodeficiency Virus (HIV) continues to be a major global health issue, leading to Acquired Immunodeficiency Syndrome (AIDS) if untreated. Despite significant advancements in medical science, HIV/AIDS remains a critical public health challenge. This article outlines current treatment protocols, preventive measures, and emerging trends in managing HIV/AIDS [1].

Current treatment strategies

Antiretroviral therapy (ART)

ART remains the cornerstone of HIV treatment. The primary goal of ART is to reduce the viral load to undetectable levels, thus improving the patient's immune function and quality of life. The standard ART regimen includes a combination of three or more antiretroviral drugs from at least two different classes:

Nucleoside reverse transcriptase inhibitors (NRTIs): These drugs block the reverse transcriptase enzyme, preventing the virus from replicating. Examples include tenofovir and emtricitabine.

Non-nucleoside reverse transcriptase inhibitors (NNRTIs): NNRTIs also inhibit reverse transcriptase but in a different manner than NRTIs. Efavirenz and nevirapine are common NNRTIs [2].

Protease inhibitors (PIs): These inhibit the protease enzyme, which is essential for viral replication. Examples include ritonavir and lopinavir.

Integrase inhibitors: These block the integrase enzyme, preventing the integration of viral DNA into the host genome. Raltegravir and dolutegravir are well-known integrase inhibitors.

Entry inhibitors: These prevent the virus from entering the host cells. Maraviroc and enfuvirtide fall into this category [3].

Monitoring and adherence

Regular monitoring of viral load and CD4 count is essential to assess treatment efficacy and make necessary adjustments. Adherence to ART is crucial; non-adherence can lead to drug resistance and treatment failure. Strategies to improve adherence include patient education, simplified drug regimens, and support systems.

Preventive measures

Pre-exposure prophylaxis (PrEP)

PrEP involves the use of antiretroviral drugs by HIV-negative individuals at high risk of infection to prevent HIV acquisition. Tenofovir/emtricitabine (Truvada) is commonly used for PrEP. It has shown high efficacy in preventing HIV transmission when taken consistently [4].

Post-exposure prophylaxis (PEP)

PEP is an emergency intervention for individuals who have been potentially exposed to HIV. It involves taking antiretroviral medications within 72 hours of exposure for 28 days. PEP is effective in preventing HIV infection if started promptly and adhered to rigorously.

Behavioral interventions

Behavioral interventions aim to reduce risky behaviors that increase HIV transmission. These include:

Safe sex practices: Promoting the use of condoms and reducing the number of sexual partners.

Needle exchange programs: Providing clean needles to intravenous drug users to prevent transmission through shared needles [4].

Education and awareness campaigns: Raising awareness about HIV transmission and prevention strategies through community outreach and educational programs.

Emerging trends and future directions

Long-acting antiretrovirals

Long-acting injectable antiretrovirals, such as cabotegravir and

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rilpivirine, offer a promising alternative to daily oral regimens. These drugs are administered every one to two months, improving adherence and reducing the burden of daily medication [6].

HIV vaccines

Research into HIV vaccines is ongoing, with several candidates in various stages of clinical trials. While no vaccine is currently available, advancements in vaccine technology and a better understanding of the virus may eventually lead to an effective preventive vaccine.

Discussion

HIV/AIDS continues to pose a significant global health challenge despite remarkable advancements in medical science. The introduction and widespread adoption of Antiretroviral Therapy (ART) have transformed HIV from a fatal disease into a manageable chronic condition. However, this progress is not without its challenges and limitations [7].

The role of art in managing HIV

ART has revolutionized the treatment of HIV by reducing viral loads to undetectable levels, thus improving immune function and overall quality of life for individuals living with HIV. The standard regimen, which typically includes a combination of drugs from different classes, aims to prevent the virus from replicating and to maintain immune health. Despite its efficacy, ART requires lifelong adherence and regular monitoring to ensure its effectiveness and to prevent the development of drug resistance. Adherence to ART can be challenging due to various factors, including medication side effects, complex dosing schedules, and socio-economic barriers. Innovative solutions, such as long-acting injectable antiretrovirals, offer promising alternatives by reducing the frequency of dosing and potentially improving adherence.

Preventive measures: PrEP and PEP

Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP) are critical components of HIV prevention strategies. PrEP has demonstrated high efficacy in preventing HIV transmission among high-risk populations when taken consistently. However, access to PrEP remains limited in many regions, particularly in resource-limited settings where the burden of HIV is highest [8]. PEP provides an emergency intervention for individuals who may have been exposed to HIV. Its effectiveness depends on timely initiation and strict adherence to the 28-day regimen. Both PrEP and PEP are essential tools in reducing new HIV infections, but their success relies on awareness, accessibility, and adherence.

Behavioral interventions and public health strategies

Behavioral interventions play a crucial role in HIV prevention. Safe sex practices, such as consistent condom use and reducing the number of sexual partners, are foundational strategies. Needle exchange programs have been effective in reducing transmission among intravenous drug users by providing access to clean needles. Education and awareness campaigns are vital in changing behaviors and reducing stigma associated with HIV. Community outreach and targeted interventions can address misconceptions and promote preventive measures, contributing to a decrease in new infections [9].

Emerging trends and future directions

Research into long-acting antiretrovirals represents a significant advancement in HIV treatment. These medications administered monthly or bimonthly, have the potential to improve adherence and reduce the burden of daily pill regimens. Early results from clinical

trials are promising, suggesting these treatments could become a new standard in HIV care. HIV vaccine research continues to be a high priority. Despite setbacks, several candidates are in various stages of development. A successful vaccine would be a game-changer in the fight against HIV, offering a proactive means of prevention. Innovative cure strategies are also under investigation. Gene editing technologies, such as CRISPR, and immune-based therapies, including broadly neutralizing antibodies, are at the forefront of this research. These approaches aim to achieve either a sterilizing cure, eliminating the virus entirely, or a functional cure, allowing individuals to maintain viral suppression without ongoing treatment.

The importance of global collaboration

Addressing the HIV/AIDS epidemic requires continued research, innovation, and global collaboration. Efforts to improve access to ART, PrEP, and PEP, along with investment in emerging technologies and public health strategies, are essential. Collaborative initiatives, such as the Joint United Nations Programme on HIV/AIDS (UNAIDS) and various international partnerships, play a crucial role in mobilizing resources and coordinating efforts to combat HIV/AIDS globally [10].

Conclusion

The treatment and prevention of HIV/AIDS have come a long way, significantly improving the lives of those affected by the virus. However, challenges remain, particularly in resource-limited settings. Continued research, innovation, and global collaboration are essential to further advance HIV/AIDS management and move closer to a world free of HIV.

References

- Anna S, Emily N, David E, William H, Alicia R, et al. (2022) Mortality among Care Home Residents in England during the first and second waves of the COVID-19 pandemic: an observational study of 4.3 million adults over the age of 65. The Lancet Reg Health-Europe 14: 100295.
- Cinzia DN, Gianmaria M, Caterina S (2023)The impact of informal and formal care disruption on older adults' psychological distress during the COVID-19 pandemic in UK. Econ Hum Biol 49: 101242.
- Gregor AS, Gerold S, Philipp Z, Simon O, Simonis H (2020) Adult patients' wellbeing and disturbances during early recovery in the post anaesthesia care unit. A cross-sectional study. Intensive and Critical Care Nursing 61: 102912.
- O'Grady HM, Harrison R, Snedeker K, Trufen L, Yue P, (2023) A two-ward acute care hospital outbreak of SARS-CoV-2 delta variant including a pointsource outbreak associated with the use of a mobile vital signs cart and suboptimal doffing of personal protective equipment. JHI 131: 1-11.
- Jennifer R. Tynan MD, Meghan D, Duncan M, Brent E, et al. (2009) Reduction of Adult Fingers Visualized on Pediatric Intensive Care Unit (PICU) Chest Radiographs After Radiation Technologist and PICU Staff Radiation Safety Education. CARJ 60: 182-184.
- Louise IRC, Thomas H, Janine B (2022) Social media discussions about longterm care and the COVID-19 pandemic, Social media discussions about longterm care and the COVID-19 pandemic. Journal of Aging Studies 63: 101076.
- Nawal Alzailai RN, Phil M, Louise Barriball RN, Awad AM, Andreas Xyrichis RN, et al. (2023) Factors that contributed to burnout among intensive care nurses during the COVID-19 pandemic in Saudi Arabia: A constructivist grounded theory. Australian Critical Care 36: 19-27.
- Tsehay B, Leulayehu AG, Mulualem SF, Hirbo SH (2022) Early versus late intubation on the outcome of intensive care unit-admitted COVID-19 patients at Addis Ababa COVID-19 treatment centers, Addis Ababa, Ethiopia: A multicenter retrospective cohort study. International Journal of Surgery Open 47: 100561.
- Monod M, Blenkinsop A, Xi X, Hebert D, Bershan S, et al. (2021) Age groups that sustain resurging COVID-19 epidemics in the United States. Science, 371: 6536.
- Ma Q, Liu J, Liu Q, Kang L, Liu R, et al. (2021) Global Percentage of Asymptomatic SARS-CoV-2 Infections Among the Tested Population and Individuals With Confirmed COVID-19 Diagnosis: A Systematic Review and Meta-analysis. JAMA Network Open 4: e2137257.