POPULATION SPECIFIC ISSUES IN HIV CURE RESEARCH: IMPLICATION FOR CHILDREN ETHICS

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ETHICS ISSUES FOR CHILDREN

• Aim is sustained viral remission
• Major concerns – Risk:Benefit assessment
  • Potential direct benefit should outweigh the risks
  • Risks
    • HIV Drug Resistance
    • Increased HIV reservoir – no clear strategy to determine reservoir persistence
    • Weakened immune system when there is viral load rebound
ETHICS ISSUES FOR CHILDREN

• When to start
  • Different age groups pose different challenges
    • Adolescents probably to follow similar strategies as adults
    • Neonates are unique in terms of both immunology and time point infected eg if infected during birth – may be ideal to aim to eradicate viral reservoir
    • Disease process different than adults due to immunology differences – therefore not necessarily possible to extrapolate

• Sample size
  • Similar strategy as for rare diseases and paediatric oncology
  • Smaller sample size with good longitudinal follow up
ETHICS ISSUES FOR CHILDREN

• Recruitment strategies – need to ensure that there is no therapeutic misconception
• Different message in LMICs where focus was to initiate ART – now planned interruption may be confusing
• Informed consent process more complex
  • Regularly re-consent, as well as re-assent as child grows older
• Monitoring crucial – additional burden as more follow up visits required
• Adherence crucial – families to be carefully selected who will comply
• Ancillary care needs to be addressed