

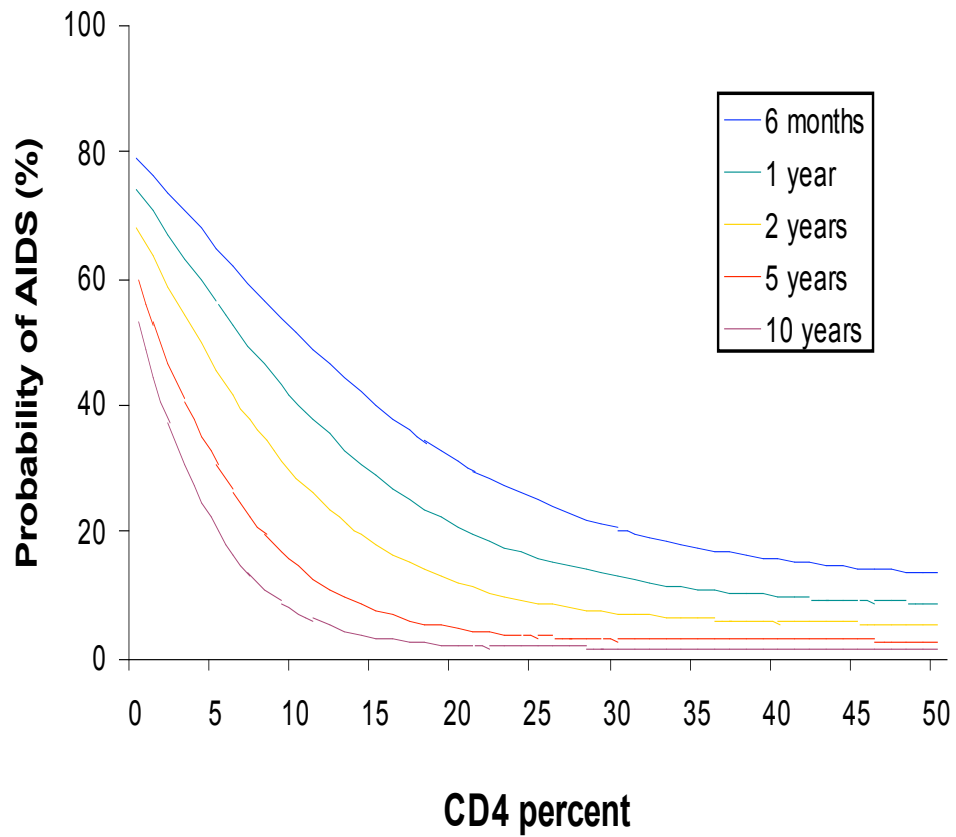
HIV Paediatric Prognostic Markers Collaborative Study (HPPMCS)

- **Meta-analysis of individual longitudinal data on HIV-infected children from cohort studies and randomised trials in Europe and USA**
- **Main objective to increase understanding of prognostic markers of disease progression**
- **Data censored at start of ART (except AZT monotherapy)**
- **Approximately 4000 children, 1000 initial AIDS events, 550 deaths**

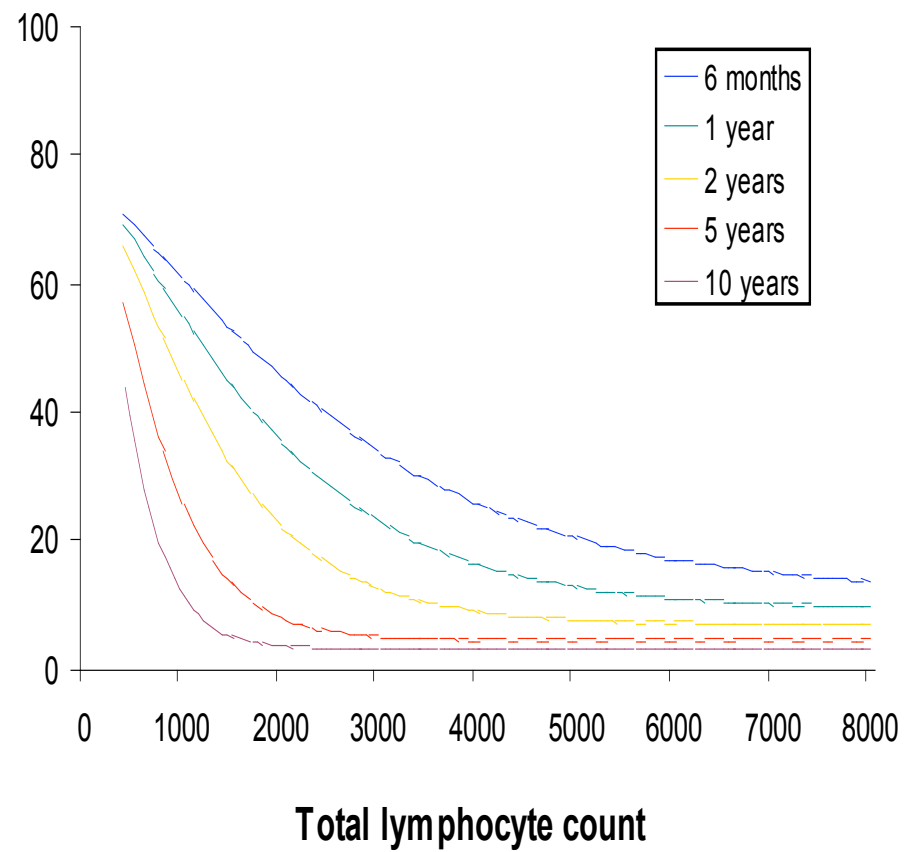
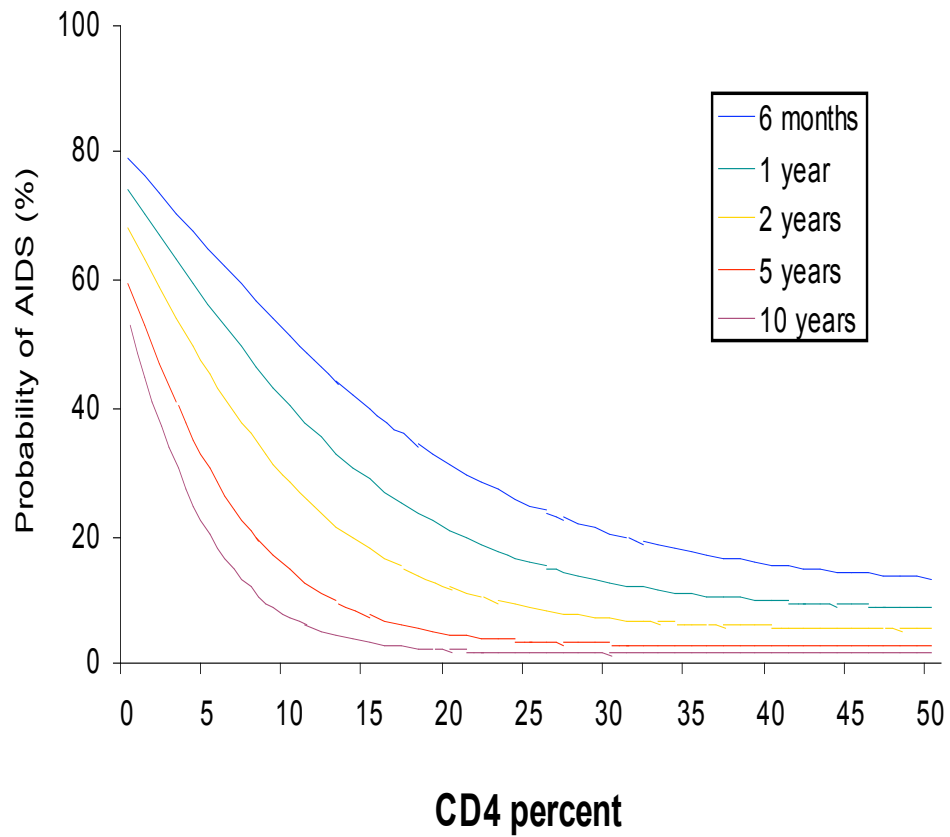
HPPMCS - Studies included

Study	Calendar period	No. children
<u>Prospective birth cohorts</u>		
Perinatal AIDS Collaborative Transmission Study	1986-2000	342
Pediatric Pulmonary and Cardiovascular Complications of HIV Infection Study	1990-1995	265
Women and Infants Transmission Study	1990-2001	142
European Collaborative Study	1985-2000	99
PACTG 076 (infected children)	1991-1995	47
<u>General cohorts</u>		
Italian Register for HIV Infection in Children	1983-2000	927
Collaborative HIV Paediatric Study (CHIPS) of UK & Ireland	1986-2002	486
Swiss Mother and Child HIV Cohort Study	1985-2001	100
<u>Randomised trials (interventions)</u>		
NICHD IVIG Clinical Trial (IVIG vs albumin placebo)	1988-1991	335
PACTG 128 (high vs low dose of ZDV)	1989-1994	339
PACTG 152 (ZDV vs ddl vs ZDV+ddl)	1991-1995	232
PACTG 051 (IVIG vs placebo)	1988-1994	252
PACTG 240 (ZDV vs d4T)	1994-1996	94
PACTG 190 (ZDV vs ZDV+ddC)	1992-1994	90
PENTA 1 (immediate vs deferred ZDV)	1992-2000	164
PENTA 3 (ddC+ZDV vs ZDV)	1994-1996	11
PENTA 4 (adding 3TC or placebo to current therapy)	1995-1998	16
Total		3941

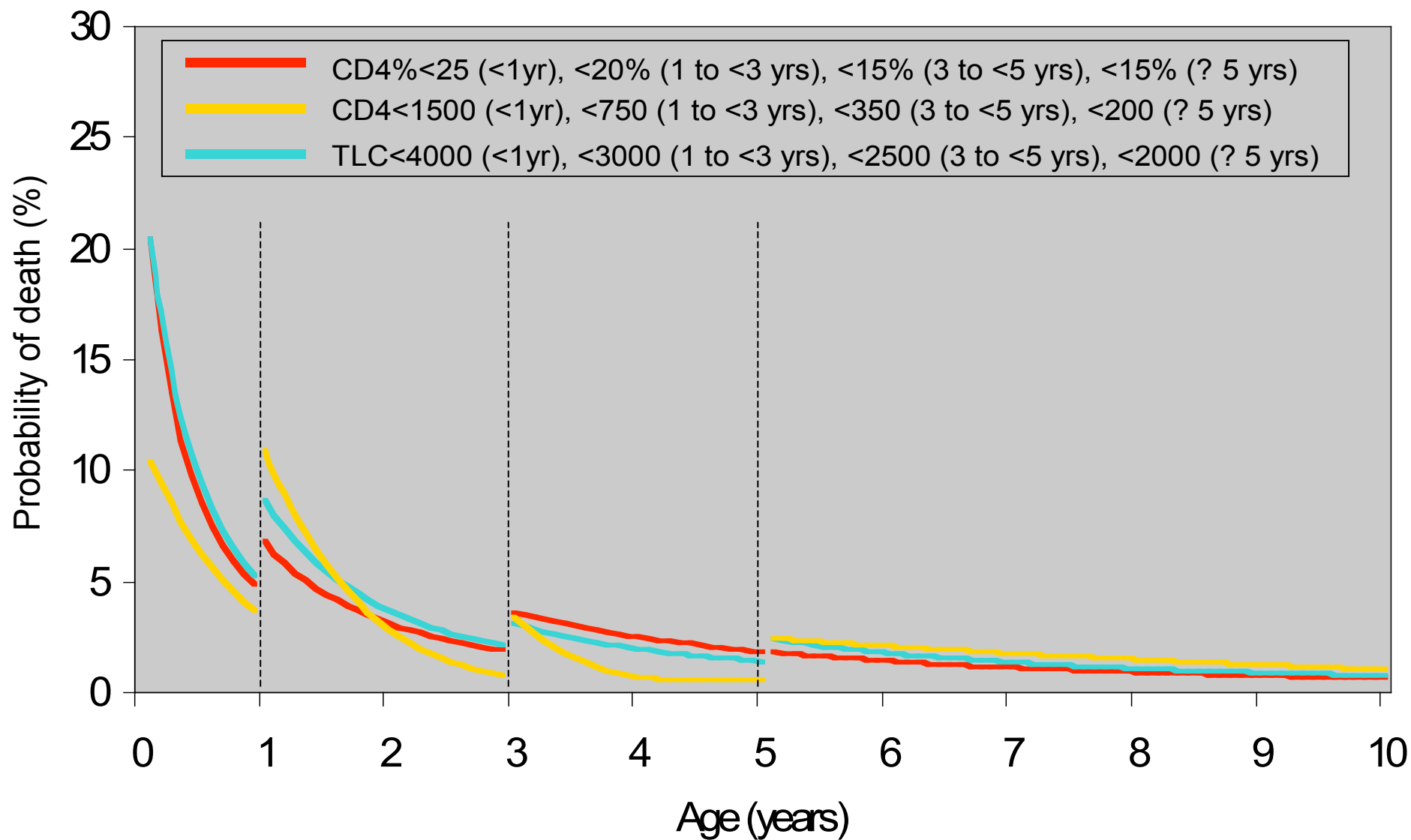
Risk of progression to AIDS within 12 months



Risk of progression to AIDS within 12 months



12-month mortality risk at selected thresholds for CD4%, CD4 count and TLC, by age



3Cs4Kids

Cross Continent Collaboration for Kids

**A Cohort Collaboration of HIV-Infected
Children In Resource Limited Settings**

3Cs4kids

- **Short-term pilot phase (small grant from WHO):**
 - During this phase, retrospective data would be pooled across cohorts with an already existing database.
- **The aims during this phase are:** to explore the availability of appropriate data to combine in order to:
 - Undertake an initial analysis to evaluate the prognostic importance of longitudinal measurements of:
 - CD4
 - simple alternatives to CD4 – eg haemoglobin, total lymphocyte count, weight for age – in terms of short-term risk of death/disease progression
 - Undertake a validation of the revised WHO Paediatric Staging.

Number of Children, F/U and Deaths n=2572 (338 deaths – 17%)

Country	No.	F/U (m)	deaths	Calendar period
Zambia (1)	531	27	227	2001-5
Uganda (1)	478	5.3	25	2000-5
S Africa (4)	857	3-4 m	97	95-05
Malawi (2)	87	7	19	2002-5
Cote d'Ivoire (1)	214	5	44	2000-4
Brasil (1)	370		44	89-03
Mexico, Arg, Brazil (NICHD)	45	7	0	2002-5

Measurements in Children before starting ART (n=2572)

Parameter	Number children	Total number	No. per child
CD4 percent	1764	4220	2 (1-3)
CD4 count	1596	3481	1 (1-3)
TLC	1497	4164	2 (1-4)
Total WC	1881	4843	2 (1-3)
Hb	2098	7015	2 (1-5)
Albumin	184	309	2 (1-2)
Height	2073	13654	4 (1-9)
Weight	2280	15137	3 (1-9)