Some key points about the HIV treatment cascade

- The HIV treatment cascade is a model that is used to identify the gaps in HIV care.
- The HIV treatment cascade shows:
  - The number of people living with HIV in the United States at various stages along the HIV care continuum, from diagnosis to viral suppression
  - Opportunities to improve engagement in HIV care across the entire continuum

The HIV treatment cascade in 2012

Of every 100 people living with HIV in the United States...

1. HIV testing and diagnosis
2. Linkage to HIV care if HIV positive. Linkage involves getting under the care of an HIV healthcare provider as soon as possible after being diagnosed
3. Retention in HIV care over time. Retention in care involves regular visits to an HIV healthcare provider and getting all required lab tests done on time
4. Provision of HIV medicines
5. Achieving viral suppression (undetectable viral load) through the continued use of HIV medicines

References:
Closing the gaps: what you can do

• Guide your clients to:
  – Get an HIV test
  – Get into medical care for HIV and receive counseling to prevent HIV transmission if they test positive
  – Stay in HIV medical care
  – Take their HIV medicines as prescribed and stay on them in order to increase their chances of achieving viral suppression

• Ask your clients questions such as:
  – Have you been tested for HIV? If so, what was the result? If not, how can I help you arrange to be tested?
  – Have you seen an HIV healthcare provider since being diagnosed? If so, how many times have you visited your HIV healthcare provider in the last 6 months? How often does your HIV healthcare provider want to see you?
  – When was the last time you had lab tests done?
  – Have you started taking HIV medicines? If so, how many times have you missed a dose?
  – Are you responding to your HIV medicines? Is your viral load going down?

Engagement in HIV care

Engagement in HIV care means being actively involved in and committed to care across the entire spectrum of HIV care, from testing and diagnosis, through linkage, retention, treatment initiation, and adherence, with the goal of treatment being an undetectable viral load.

Ideal Engagement
- Aware of diagnosis
- Linked to HIV care
- Retained in HIV care
- Fully engaged in HIV care
- Adherent to HIV medicines
  - Undetectable viral load

Poor Engagement
- Aware of diagnosis, not linked to care
- Receiving other medical care but not HIV care
- Linked to HIV care, but lost to follow-up
- In and out of HIV care
- Not adherent to HIV medicines
  - Not virally suppressed