

To: Meg Doherty
Director
Global HIV, Hepatitis and STI Programmes
and other interested parties
World Health Organization

January 15, 2025

Dear colleagues,

On behalf of the Eurasian Community for Access to Treatment (ECAT), we would like to thank the WHO for leading the process of updating the Consolidated Guidelines on HIV prevention, testing, treatment, service delivery, and monitoring. Based on feedback from our members, we would like to share the following topics, recommendations, and ideas, which have been collected from experts, activists, community groups, civil society, and non-governmental organizations in the EECA region:

1. We kindly ask WHO to prioritize recommendations related to the use of long-acting injectables both for HIV treatment and prevention, such as lenacapavir and cabotegravir.
2. Based on reports from our country partners, the roll-out of dolutegravir (DTG) for the first and second line in the EECA region has been associated with the tendency to limit the procurement and use of other options. Due to this, young healthcare professionals lack knowledge about treatment regimens based on other drugs. We kindly ask WHO to include a more detailed language related to the use of other integrase inhibitors (such as raltegravir and bictegravir) and non-nucleoside reverse transcriptase inhibitors (such as doravirine) in the updated version of the consolidated guidelines, with a focus on the need to adapt the antiretroviral therapy to the needs of each patient.
3. Our monitoring and analysis of the HIV drug procurement in the EECA show an increase in the use of the generic combination of dolutegravir/ tenofovir alafenamide/emtricitabine, which is a more expensive combination than dolutegravir/tenofovir disoproxil/lamivudine. In the light of the data about clinically significant weight gain associated with the combination of DTG and TAF, we kindly ask WHO to develop a position describing the clinical importance of DTG/TAF/FTC in relation to other regimens and summarizing the added value and disadvantages of this combination.
4. We kindly ask WHO to develop a recommendation regarding the dolutegravir/lamivudine dual therapy given its wider use in the clinical practice across the EECA region. If the data is not sufficient, we ask you to communicate what data is lacking for WHO to include this combination in the consolidated guidelines.
5. We kindly ask WHO to expand and update the section related to HIV and mental health, with a focus on the recent scientific data in this field, co-management of HIV and mental health therapy, and coordination between the HIV and mental health services, taking into account the regional context.

We look forward to receiving your reply and hope to continue and strengthen our cooperation in achieving the SDG goals on healthcare. If requested, we would be happy to nominate members of ECAT to participate in the development of the updated guidelines as part of our contribution to this process.

Respectfully,

Aleksey Mikhailov
ECAT Coordinator



Denis Godlevskiy
Regional coordinator ITPC EECA

