

# The Full 360

## HIV REMAINS A MAJOR HEALTH ISSUE

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HIV remains a major public health issue around the world. In regions where ART is available, the global aspiration has been to achieve viral suppression.<sup>1</sup>

### THE TREATMENT TARGET <sup>1</sup>



diagnosed



on treatment



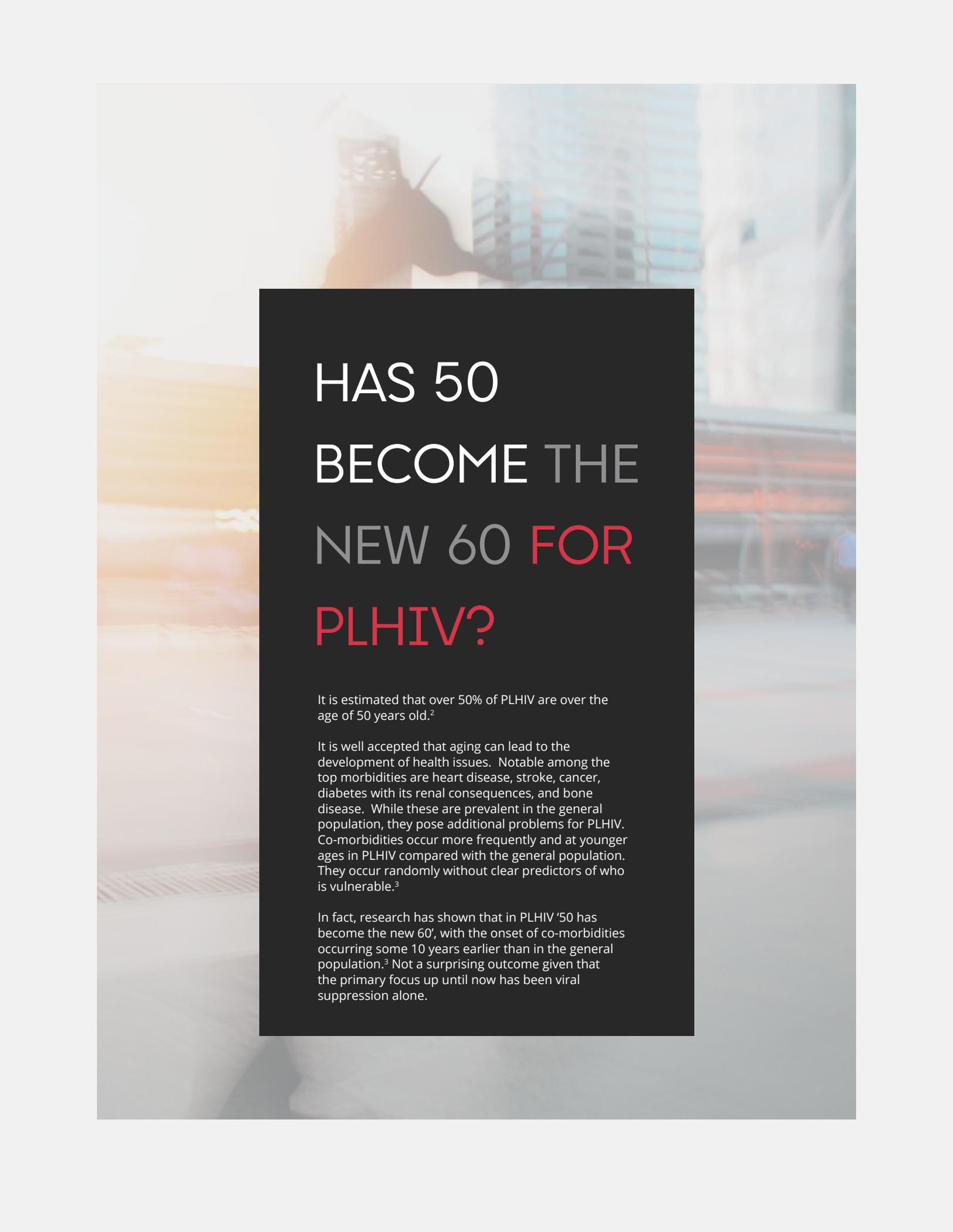
virally suppressed

**NOW THE QUESTION IS,  
WHAT'S NEXT? ARE WE DONE?**

**CAN WE DO BETTER?**

Globally, there remains much work to be done to achieve and sustain viral suppression. At the same time, long-term health gaps still exist between PLHIV relative to the general population.

For those reasons, **HIV must remain a health priority.**



# HAS 50 BECOME THE NEW 60 FOR PLHIV?

It is estimated that over 50% of PLHIV are over the age of 50 years old.<sup>2</sup>

It is well accepted that aging can lead to the development of health issues. Notable among the top morbidities are heart disease, stroke, cancer, diabetes with its renal consequences, and bone disease. While these are prevalent in the general population, they pose additional problems for PLHIV. Co-morbidities occur more frequently and at younger ages in PLHIV compared with the general population. They occur randomly without clear predictors of who is vulnerable.<sup>3</sup>

In fact, research has shown that in PLHIV '50 has become the new 60', with the onset of co-morbidities occurring some 10 years earlier than in the general population.<sup>3</sup> Not a surprising outcome given that the primary focus up until now has been viral suppression alone.

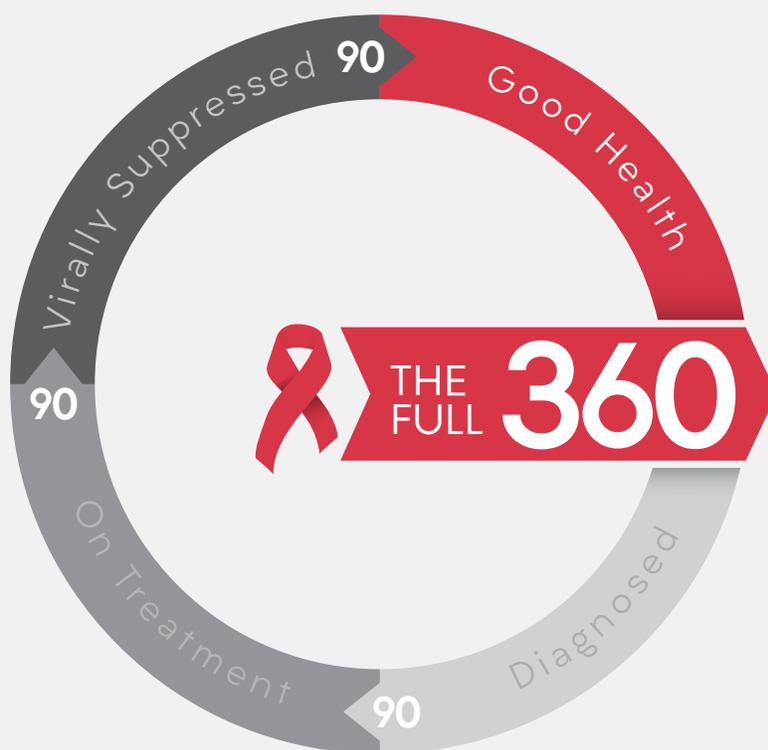
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# A New Aspiration for the Unmet Need: Viral Suppression AND Lifelong Good Health

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The time is right to focus on **going THE FULL 360 and Lifelong Good Health as an important part of the end goal. The time is right to focus on** the whole person, not just the virus.

INTRODUCING....



**The aspiration of The Full 360** is to achieve an overall health status for PLHIV that is as good as, or perhaps even better than, the general population. It is a CALL TO ACTION to focus on PLHIV and Good Health, such that HIV and the virus do not have to be the focus of daily living.

The Full 360 Good Health vision still starts with appropriate diagnosis (90% diagnosed), leading to rapid initiation of treatment (90% on treatment) and early viral suppression (90% suppressed), with additional focus on lifelong good health as the ultimate goal (90% Good Health).

<b>THE TRADITIONAL VIEW</b>		<b>THE NEW VIEW</b>	
<b>How we talk about it:</b>			
HIV		People living with HIV	
<b>Primary Focus:</b>			
The virus		The whole person	
<b>The Goal:</b>			
Viral suppression <sup>1</sup>		Viral suppression & lifelong good health	
<b>The Outcome:</b>			
Co-morbidities occurring 10 years earlier than in the general population <sup>3</sup>		Health status aligned to or better than the general population	
<b>Life:</b>			
HIV dominates day-to-day living <sup>4</sup>		HIV becomes just a part of day-to-day living	
<b>The Common Vision:</b>			
90-90-90 <sup>1</sup>		<b>The Full 360</b>	

## Good Health is a Big Lofty Goal and starts with... Controlling what is Controllable

The cause of co-morbidities is multi-factorial, with some contributors being controllable, and others less so. Ideally a person living with HIV could easily make lifestyle modifications, such as smoking cessation that would enhance good health. Unfortunately, change can be very challenging and takes significant effort on the part of the individual as well as the support network around him or her. And even then with somewhat limited success.

What is more controllable overall, are choices associated with HIV treatment that can also contribute to, or help to avoid, the development of co-morbidities.<sup>5</sup> There are important choices to be made from Day 1 that best support Good Health. While the overall population with HIV is aging, the majority of newly diagnosed patients are between 25-34 years old, with decades of life ahead of them.<sup>1</sup> Making choices that will ensure long-term viral suppression AND good health from Day 1 will give them the best chance of living a long, healthy life. And stop the spread of virus.



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1. UNAIDS. Ending AIDS: Progress Towards the 90-90-90 Targets. Global AIDS Update 2017. Available at: [http://www.unaids.org/sites/default/files/media\\_asset/Global\\_AIDS\\_update\\_2017\\_en.pdf](http://www.unaids.org/sites/default/files/media_asset/Global_AIDS_update_2017_en.pdf) (Accessed September 2018).
2. Wing EJ. HIV and aging. *Int J Infect Dis* 2016;53:61-68.
3. Guaraldi G, et al. Premature Age-Related Comorbidities Among HIV-Infected Persons Compared With the General Population. *Clin Infect Dis HIV/AIDS* 2011;53:1120-1126.
4. Duracinsky M, et al. The development of PROQOL-HIV: an international instrument to assess the health-related quality of life of persons living with HIV/AIDS. *J Acquir Immune Defic Syndr* 2012;59:498-505.
5. U.S. Department of Health and Human Services. Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the use of antiretroviral agents in adults and adolescents living with HIV. Available at: <https://aidsinfo.nih.gov/contentfiles/lvguidelines/adultandadolescentgl.pdf>. (Accessed September 2018).