

STATUS OF THE *GUIDELINES*

135. Given the recent data presented in Vancouver and elsewhere, are these *Guidelines* still up-to-date?

Dr Volberding: The IAS-USA Panel *Guidelines* are definitely not out of date. While the field of HIV medicine is changing rapidly and there are an increasing number of theoretical concepts that can now be tested in clinical trials, the *Guidelines* reflect a substantial shift to the earlier and more aggressive antiretroviral therapy, including the routine use of information provided by HIV RNA assays. The *Guidelines* are more "aggressive" than most current clinical practice in the US and some of the drugs recommended are not even available in many other countries. While there are certainly physicians, patients, and investigators who personally believe in an even more aggressive approach, the Panel's recommendations are well-grounded in available clinical trial data, published and still unpublished, and in reasonable inference from information on HIV pathogenesis. Of course, these *Guidelines* are not permanent and revisions and updates are planned. Newer drugs will need to be considered as data on their clinical roles become available and clinical experience with existing

combinations may enable more certainty in recommending specific treatment strategies. The Panel is confident that following its recommendations will result in improved management of HIV infection and that the *Guidelines* allow a reasonable degree of flexibility needed for individualized treatment planning.

Dr Carpenter: The *Guidelines* are based on the most up-to-date available data from controlled clinical trials of antiretroviral drugs, as modified by the most recent studies of the kinetics of HIV viral replication in humans and its alteration by antiretroviral drugs. Since there are clearly areas in which our knowledge is far from complete, the *Guidelines* provide flexibility in presenting a range of reasonable approaches in several areas (eg, when to initiate antiretroviral therapy and what to start with).

As noted in the *Guidelines* report and as discussed above, the Panel is committed to continually monitoring the results of clinical and pathogenetic studies, and to updating the *Guidelines* as these data warrant. This publication is intended to discuss the *Guidelines* and address many of the questions around their implementation.