

**An Intensive Workshop on Antiretroviral Strategies:
New Drugs, Antiretroviral Failure, and Resistance Testing**

San Francisco, CA

Wednesday, May 30, 2007
1:00 pm to 4:30 pm
345 Stockton Street, San Francisco, CA 94108

Workshop Faculty

Steven J. Deeks, MD
Associate Clinical Professor of Medicine
University of California San Francisco
San Francisco, CA

Andrew Zolopa, MD
Associate Professor of Medicine
Director, Positive Care Program
Stanford University School of Medicine
Stanford, CA

Who Should Attend

Experienced HIV clinical decision makers (MDs, DOs, NPs, PAs) caring for HIV patients with a working knowledge of HIV disease management.

Overview and Assessment of Needs

Expert faculty will speak in a small-group interactive setting on timely and clinically relevant issues in HIV disease management such as:

- Management strategies for antiretroviral failure
- Role of resistance testing to determine treatment options for patients with multiple drug resistance mutations
- Role of new drugs in failure regimens

Rapid advances in these areas require the ongoing attention of practitioners involved in HIV medicine. The course will address the implications of this information on strategies for antiretroviral therapy.

Learning Objectives

Upon completion of the workshop, participants will be able to:

- Design appropriate treatment strategies for patient experiencing virologic failure that consider current data on new drugs, new classes, and new assays
- Identify the elements that make up an effective salvage regimen
- Compare and contrast the benefits and limitations of genotypes and phenotypes
- Explain the effective use of tropism assays and how they will fit into the management of HIV-infected patients
- Examine the risk and activity and the resistance profiles of new and emerging antiretroviral drugs
- Design appropriate treatment strategies for the subset of HIV-infected patients experiencing immunologic failure

Registration

The registration fee is \$65. Fax or mail your complete registration form (below) with payment. Registration closes on May 23. Attendance is limited to 40 participants.

CME Accreditation Statement

The International AIDS Society–USA is accredited by the Accreditation Council for Continuing Medical Education to sponsor continuing medical education for physicians.

Credit Designation Statement

The International AIDS Society–USA designates this educational activity for a maximum of 3.25 *AMA PRA Category 1 Credits*.[™] Physicians should only claim credit commensurate with the extent of their participation in the activity.

Conflicts of Interest

Information regarding conflicts of interest is obtained from all parties with control over the activity content (ie, Board of Directors, workshop development committee, workshop leaders, and IAS-USA staff), and any conflicts of interest of those parties are resolved prior to the activity being delivered.

Funding

This activity is funded by the International AIDS Society–USA. No commercial support will be provided.

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Antiretroviral Failure and Resistance Test Interpretation: Advanced Workshop

Wednesday, May 30, 2007

Grand Hyatt San Francisco on Union Square
345 Stockton Ave
San Francisco, CA 94108

IASUSA number (if known)

First Name MI Last Name

Title/Position

Institution/Organization

Primary Academic Degree: MD DO
 Other _____

Specialty

Mailing Address Work Home

City State Zip

Phone Work Home Fax Work Home

E-Mail Address (for registration confirmation only)

Do you work for a commercial company? Yes No

IF YES, NAME OF COMPANY

Currently, for how many HIV-infected patients do you have? _____

How many years have you been involved in HIV Care? _____

Will you be attending the CME course on May 31? Yes No

REGISTRATION FEES

Full payment must accompany this form. For additional registrants, please photocopy this form.

\$65 \$ _____

If you wish to include a
donation please indicate \$ _____
here

Total: \$ _____

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Make checks or money orders payable to International AIDS Society-USA.

Charge to my credit card: VISA Mastercard American Express

Card Number (VISA, Mastercard, or AMEX)

Exp Date

Authorized Signature on Card

Name on Card

Please mail or fax this registration form and payment to:
International AIDS Society-USA

Course Workshop Registration - SAN FRANCISCO

425 California Street, Suite 1450

San Francisco, CA 94104-2120

Phone (415) 544-9400; Fax (415) 544-9402

Workshop participant name: _____

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San Francisco workshop registrants are encouraged to submit their own difficult clinical cases by May 10 for potential inclusion in the workshop discussion, using the form below. Please complete the form below, include resistance test results, and submit via email (bwilson@iasusa.org) or fax (415-544-9401).

Date of patient review: _____

Resistance test: genotype, phenotype, pheno GT Date of Test: _____

ARV treatment when tested: _____

Adherence assessment: Score: _____ Excellent, Good, Fair, Poor Date: _____

Most recent viral load: _____ Date: _____ Most recent CD4+: _____ Date: _____

Viral load before ARV: _____ Date: _____ Highest viral load recorded: _____ Date: _____

Lowest CD4+: _____ Date: _____ ARV history: high confidence, low confidence

Past Resistance Tests: 1) _____ 2) _____ 3) _____

Past Detected Mutations: NRTI: _____

NNRTI: _____ PI: _____

ARV past history	Date started...ended	Reason discontinued
Regimen 1: _____;	_____;	_____
Regimen 2: _____;	_____;	_____
Regimen 3: _____;	_____;	_____
Regimen 4: _____;	_____;	_____
Regimen 5: _____;	_____;	_____
Regimen 6: _____;	_____;	_____
Regimen 7: _____;	_____;	_____
Regimen 8: _____;	_____;	_____

Exposure to: (circle all that apply)

NRTIs: abacavir, didanosine, emtricitabine, lamivudine, stavudine, tenofovir, zalcitabine, zidovudine

NNRTIs: delavirdine, efavirenz, nevirapine

PIs: amprenavir, atazanavir, indinavir, fosamprenavir, lopinavir/ritonavir, nelfinavir, ritonavir, saquinavir, tipranavir

Fixed-dose combinations: abacavir/lamivudine, emtricitabine/tenofovir, lamivudine/zidovudine, lamivudine/zidovudine/abacavir

Fusion Inhibitor: enfuvirtide

Investigational/Expanded access drugs: _____

Confounders (circle): neuropathy, pancreatitis, dyslipidemia, elevated lft's, lipoatrophy, CNS symptoms, hyperlactatemia, lactate acidosis, depression, anemia, neutropenia, TB, HBV, HCV,
Other: _____

Allergy history: _____

ARV drug intolerance: _____

Patient refuses: _____

Recommendation: _____

Next clinic visit: _____ Next retro visit: _____