

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

Los Angeles, CA

Tuesday, February 24, 2009

8:30 AM – 12:00 PM

Los Angeles Marriott Downtown
333 South Figueroa Street
Los Angeles, CA 90071

Workshop Faculty

Steven J. Deeks, MD

Associate Clinical Professor of Medicine
University of California San Francisco
San Francisco, California

Andrew R. Zolopa, MD

Associate Professor of Medicine
Director, Positive Care Program
Stanford University School of Medicine
Stanford, California

Who Should Attend

Experienced HIV clinical decision makers (physicians, nurse practitioners, physician assistants) 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 patients experiencing antiretroviral failure that consider current data on new drugs, new classes, and new assays
- Identify the elements of 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 may fit into the management of HIV-infected patients
- Examine the risk and activity and the resistance profiles of new and emerging antiretroviral drugs

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.

Registration

The registration fee is \$30. Fax or mail your complete registration form (below) with payment. Registration closes February 17, 2009. Registrations will be accepted on a first-come, first-served basis. Attendance is limited to 40 participants. Forms should be mailed or faxed to:

International AIDS Society-USA
425 California Street, Suite 1450
San Francisco, CA 94104-2120
Tel: 415-544-9400
Fax: 415-544-9402

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 made possible by educational grants from several commercial companies that are committed to supporting independent CME in the field of HIV/AIDS. Major grant support has been provided by: Bristol-Myers Squibb, Pfizer Global Pharmaceuticals, and Merck & Co., Inc.

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Workshop participant name: _____
 CFLS LA 2.24.09

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Workshop registrants are encouraged to submit their own difficult clinical cases for potential inclusion in the workshop discussion, using the form below. Please complete the form below, include resistance test results, and submit via email (tnichol@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, etravirine

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

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

Fusion inhibitor: enfuvirtide

CCR5 inhibitor: maraviroc

Integrase inhibitor: raltegravir

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: _____

