

**Candidate instructions**

This station lasts 10 minutes.

Brian is a 43-year-old, heterosexual man who was diagnosed HIV positive 3 weeks ago and works as a civil servant. His CD4 count is 520 (28%) cells/ $\mu$ L. He is asymptomatic, and is uncertain about the necessity of starting antiretroviral therapy.

He is a non-smoker and has no family history of cardiovascular disease.

Your multidisciplinary team has discussed his case, and recommended that he start antiretroviral therapy.

**Baseline results:**

CD4 count 520 cells/ $\mu$ L; HIV RNA 102,000 copies/mL

Hepatitis C antibody negative

Hepatitis B surface antigen negative; core antibody negative; surface antibody negative

Creatinine 107  $\mu$ mol/mL; eGFR 69 mL/min/1.73m<sup>2</sup>

LFTs normal

Lipids normal

Resistance test: wildtype virus, subtype B

HLA B\*57:01 negative

Brian has had a recent STI screen which was negative and has had no sex since his last clinic visit.

**Please focus on the tasks below only:**

1. Explain the reasons why you would recommend cART.
2. Discuss the options available and your advice for a cART regimen.
3. Discuss monitoring and follow-up.
4. Answer any questions the patient may have.

Please note that marks are only awarded for how you perform the tasks set.

**Mark sheet**

Examiner:

Candidate number:

Station title: <b>Starting ART</b>			
Items	Marks:		
<b>Explains reasons why cART is recommended</b>			
<b>1</b> Current guidelines: ART is recommended at any CD4 count [1]; reference to START study [1]	<b>2</b>	<b>1</b>	<b>0</b>
<b>2</b> Explains risks of HIV progression with declining CD4 count		<b>1</b>	<b>0</b>
<b>3</b> Explains risks of OIs		<b>1</b>	<b>0</b>
<b>4</b> Increased risk of malignancy		<b>1</b>	<b>0</b>
<b>5</b> Increased risk of non AIDS events		<b>1</b>	<b>0</b>
<b>6</b> Explains that effective treatment eliminates the risk of transmission		<b>1</b>	<b>0</b>
<b>7</b> Benefits of treatment outweigh risks of side effects		<b>1</b>	<b>0</b>

**Note**

*In this example, this is the first of 4 categories on which the candidate is marked. These differ depending upon the type of question but generally come under the broad headings of 'patient history'; 'further management – including investigation and ART choice/side effects etc.'; 'monitoring and other issues (such as adherence)'; and patient 'understanding'.*

*It must be emphasised that this is only an example, and that there will be different categories for different questions. However, for all questions there will always be a broad range of aspects covered.*