

The last 30-years in HIV care

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HIV Care- The Last 30 Years

Linda Panton, NHS Lothian

Conflict of Interest

In relation to this presentation I declare that I have no conflict of interest

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A TIMELINE OF THE HIV STORY: 1984 - 2016

Illustrative Key Milestones and General Developments

1984 - 1988

DISCOVERY & EARLY STEPS



FIRST DIAGNOSTIC TEST

1988 - 1992

THE CRISIS & AWARENESS (STIGMA)



• WORLD AIDS DAY (1988)

• GLOBAL RESPONSE & ACTIVISM

1992 - 1996

RESEARCH BREAKTHROUGHS



CLINICAL TRIALS

- Major antiretroviral
- Focus on therapy and combination trials

HAART

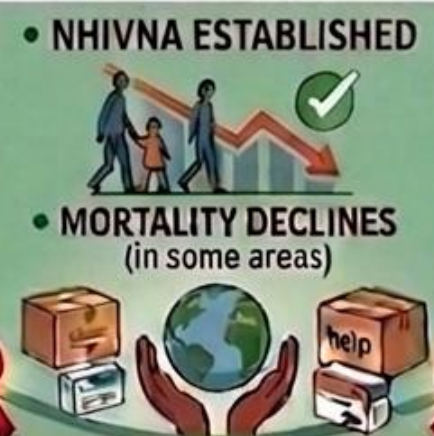
• PEAK AIDS DEATHS & DIAGNOSIS IN UK

(c. 1995)

• SEXUAL HEALTH AWARENESS & PREVENTION

1996 - 2006

SCALING TREATMENT & RESPONSE



• NHVNA ESTABLISHED

• MORTALITY DECLINES (in some areas)

OPPORTUNISTIC INFECTIONS

PNEUMOCYSTIS PNEUMONIA (PCP)

CYTOMEGALOVIRUS (CMV)

TUBERCULOSIS (TB)

KAPOSI'S SARCOMA (KS)

2006 - 2016

PREVENTION & TESTING



START STUDY RESULTS (2015)
CONFIRMED IMMEDIATE TREATMENT BENEFITS

U=U

NHVNA competencies

Single Tablet Regime

TASP

(Treatment as Prevention)

HIV ADVANCED NURSING CARE: 2017 - PRESENT

Key Milestones and General Developments

2017 to 2020

PrEP ADVANCEMENTS



- Expanded PrEP rollout (e.g., in UK)
- Prevention strategies for diverse populations

U=U ENDORSEMENT



- U=U validated in clinical care
- Communicating messages to all patients

NHIVNA ANNUAL HEALTH REVIEW



COVID-19 CHALLENGES



- Pandemic impact on HIV services
- Supply chain resilience
- Healthcare staff strain

90-90
90-90



4th 90: QUALITY OF LIFE

- Addition of 4th 90 (Quality of Life) to treatment cascade goals

2020 - 2022:

THE NEW PANDEMIC



VIRTUAL CLINICS

- Rapid adoption of tele-health



- Remote consultations & follow-ups
- Hybrid care models

SUPPORT & ADAPTATION

COVID SUPPORT



- Mental health focus
- Community outreach adaptations
- Vaccine information dissemination

2023 - PRESENT

INJECTABLE ARV



- Long-acting injectable treatment options expanding
- Clinic & muscle implementation



NHIVNA MODEL OF CARE



- holistic, nurse-led approach
- Patient empowerment
- Seamless care pathways
- Community integration

FUTURE

ZERO TRANSMISSION GOAL

U=U

- ELIMINATING PERSISTENT STIGMA



ZERO STIGMA TARGETS

- Ending discrimination in healthcare and community
- Expanding access to PrEP and care
- Innovation in prevention



Thank you to all the patients I have had the privilege of caring for and supporting throughout their journey, and for the respect and appreciation I have always received.

I also want to acknowledge those patients we lost while waiting for treatment. I remember them all—showing strength, dignity, and courage in facing an unknown illness and death, whilst often being ostracised by family, friends, and society. Their resilience will stay with me always.

Finally, thank you to my colleagues, past and present, for their support, dedication, and shared commitment to delivering the highest standard of HIV care. It has been a privilege to work alongside them



