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Cameroon

The following provides a summary of specific guidelines from the country's national guidance strategy. Use the jump links in yellow to access details on first-, second-, and third-line treatment regimens by patient population, in accordance with the WHO guidelines. This summary can be downloaded or e-mailed to yourself or a colleague. The original country guidance document can also be found below the jump links for download.

Patient Population [Download summary page as PDF](#) [E-mail this page](#)

Suggest Updates

- [Adults](#)
 - [Adolescents 10 - 19 Years \(35kg or more\)](#)
 - [Adolescents \(Weighing less than 35kg\)](#)
 - [Children 3 - 10 Years](#)
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-  [Directives Nationales de Prevention et de Prise en Charge du VIH au Cameroun \(2014\) \(PDF / 2 MB\)](#)
 -  [Guide National de Prise en Charge des Personnes Vivant Avec le VIH/SIDA - Cameroun \(2012\) \(PDF / 2 MB\)](#)

Adults

Year Issued:

2014

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

Start ARV therapy in any patient:

- WHO Stages 1 or 2 or CDC classifications A and B if the rate of CD 4 is less than 500/mm³. However patients with CD4 less than or equal to 350 are favored
- WHO Stages 3 or 4 or CDC classification C, regardless of CD4 count
- Co-infected HIV/HBV regardless of the rate of CD4 count
- The seropositive partner of a serodiscordant couple
- HIV-infected members of key populations (sex workers, MSM, IDU) regardless of CD4 count
- Pregnant women regardless of CD4 count

Regimen Options:

First Line:

Preferred regimen: TDF + 3TC (or FTC) + EFV

Second Line:

AZT + 3TC + LPV/r (or ATV/r)

Third Line:

Proven cases of failure of 2nd line ART must be managed at specialized reference centers and should be guided by the resistance profile (genotyping). Third line regimens typically include a 2nd generation PI (Darunavir/ritonavir), a 2nd generation NNRTI (Etravirine), and/or an integrase inhibitor (Raltegravir or Dolutegravir).

First Line:

Alternative first line regimens: AZT + 3TC + EFV (or NVP)

Second Line:

TDF + 3TC (or FTC) + LPV/r (or ATV/r)

Third Line:

Proven cases of failure of 2nd line ART must be managed at specialized reference centers and should be guided by the resistance profile (genotyping). Third line regimens typically include a 2nd generation PI (Darunavir/ritonavir), a 2nd generation NNRTI (Etravirine), and/or an integrase inhibitor (Raltegravir or Dolutegravir).

First Line:

Alternative first line regimens: TDF + 3TC (or FTC) + NVP

Second Line:

AZT + 3TC + LPV/r (or ATV/r)

Third Line:

Proven cases of failure of 2nd line ART must be managed at specialized reference centers and should be guided by the resistance profile (genotyping). Third line regimens typically include a 2nd generation PI (Darunavir/ritonavir), a 2nd generation NNRTI (Etravirine), and/or an integrase inhibitor (Raltegravir or Dolutegravir).

Reference:

Directives Nationales De Prevention Et De Prise En Charge Du Vih Au Cameroun (2014) Guide national de prise en charge des personnes vivant avec le VIH/SIDA – Cameroun (2012)

Adolescents 10 - 19 Years (35kg or more)

Year Issued:

2014

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

- Any child greater than 60 months with a clinical stage III or IV or CD4 less than 500 cells/mm³

Regimen Options:

First Line:

TDF + 3TC (or FTC) + EFV

Second

Line:

Not specified

Third Line:

Not specified

Reference:

Directives Nationales De Prevention Et De Prise En Charge Du Vih Au Cameroun (2014) Guide national de prise en charge des personnes vivant avec le VIH/SIDA – Cameroun (2012)

Adolescents (Weighing less than 35kg)

Year Issued:

2014

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

- Any child greater than 60 months with a clinical stage III or IV or CD4 less than 500 cells/mm³

Regimen Options:

First Line:

Preferred regimen: ABC + 3TC + EFV

Second Line:

Not specified

Third Line:

Not specified

First Line:

Alternatives:

ABC + 3TC + NVP

AZT + 3TC + EFV or NVP

Second Line:

Not specified

Third Line:

Not specified

Reference:

Directives Nationales De Prevention Et De Prise En Charge Du Vih Au Cameroun (2014) Guide national de prise en charge des personnes vivant avec le VIH/SIDA – Cameroun (2012)

Children 3 - 10 Years

Year Issued:

no date

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

Any child less than 60 months, HIV-infected should be on antiretroviral treatment regardless of the CD4 count or the clinical stage.

Regimen Options:

First Line:

Preferred regimen: ABC + 3TC + EFV

Second Line:

Not specified

Third Line:

Not specified

First Line:

Alternatives:

ABC + 3TC + NVP

AZT + 3TC + EFV or NVP

Second Line:

Not specified

Third Line:

Not specified

Reference:

Directives Nationales De Prevention Et De Prise En Charge Du Vih Au Cameroun (2014) Guide national de prise en charge des personnes vivant avec le VIH/SIDA – Cameroun (2012)

Children Under 3 Years

Year Issued:

no date

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

- Any child less than 60 months, HIV-infected should be on antiretroviral treatment regardless of the CD4 count or the clinical stage.
- Any child less than 18 months with presumptive diagnosis of HIV infection

Regimen Options:

First Line:

Preferred first line regimen:

ABC + 3TC + LPV/r

AZT + 3TC + LPV/r

Second Line:

AZT + 3TC + NVP

ABC + 3TC + NVP

Or ABC (or AZT) + ddl + LPV/r

Third Line:

Not specified

First Line:

Alternative first line regimen:

ABC + 3TC + NVP

AZT + 3TC + NVP

Second Line:

AZT + 3TC + LPV/r

ABC + 3TC + LPV/r

Or ABC (or AZT) + ddl + LPV/r

Third Line:

Not specified

Reference:

Directives Nationales De Prevention Et De Prise En Charge Du Vih Au Cameroun (2014) Guide national de prise en charge des personnes vivant avec le VIH/SIDA – Cameroun (2012)

HIV Positive Pregnant and Lactating Women

Year Issued:

no date

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

Should be started in all HIV-positive pregnant or nursing women as soon as the HIV status is known.

Regimen Options:

First Line:

TDF+3TC+EFV should be continued at least for the duration of risk of transmission of HIV from mother to child and preferably for life.

Alternative protocols:

If TDF intolerance: AZT+3TC+EFV

If EVF intolerance: TDF + 3TC + NVP or TDF + 3TC + LPV/r

If the pregnant woman was sensitized to NVP during a previous pregnancy: TDF + 3TC + LPV/r

Second Line:

Not specified

Third Line:

Not specified

Reference:

Directives Nationales De Prevention Et De Prise En Charge Du Vih Au Cameroun (2014) Guide national de prise en charge des personnes vivant avec le VIH/SIDA – Cameroun (2012)

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