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Uganda

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 and Adolescents](#)
 - [Adolescents and Children 10 - 14.9 Years and Greater than 35kg](#)
 - [Adolescents and Children 10 - 14.9 Years and less than 35kg](#)
 - [Adolescents and Children 3 - 9.9 Years or less than 35kg](#)
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 - [Pregnant Women and Infants](#)
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-  [National Guidelines for HIV Treatment in Uganda \(PDF / 1 MB\)](#)
 -  [Addendum to the National Antiretroviral Treatment Guidelines \(PDF / 2 MB\)](#)
 -  [National Guidelines for the Prevention of Mother to Child Transmission of HIV in Uganda \(PDF / 5 MB\)](#)

Adults and Adolescents

Year Issued:

2013 Guidelines and 2011 Addendum

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

ART should be initiated in all individuals with HIV with CD4 greater than 350 cells/mm³ and less than or equal to 500 cells/mm³ regardless of clinical stage. However, priority should be given to individuals with advanced forms of disease (Clinical Stage 3 & 4) or CD4 less than 350 cells/mm³

ART should be initiated in all individuals with HIV regardless of WHO Clinical Stage or CD4 in the following situations:

- HIV and active TB disease
- HIV and HBV co-infection with evidence of severe chronic liver disease
- HIV+ partner in serodiscordant couples
- HIV+ persons who are considered as MARPs in the hotspots (Commercial Sex Workers, Fisher folks and Truckers)

Regimen Options:

First Line:

2 NRTI and 1 NNRTI

Preferred: TDF + 3TC + EFV

Second Line:

After failure on TDF + 3TC, use AZT+3TC

Third Line:

Darunavir+Raltegravir+2NRTI

First Line:

Alternatives:

AZT + 3TC + EFV

AZT + 3TC + NVP

Second Line:

After failure on AZT+3TC, use TDF + 3TC

Third Line:

Darunavir+Raltegravir+2NRTI

First Line:

TDF + 3TC + NVP

D4T use as 1st line should be discontinued because of its well recognized metabolic toxicities.

Second Line:

After failure on TDF + 3TC, use AZT+3TC

Third Line:

Darunavir+Raltegravir+2NRTI

Reference:

The Integrated National Guidelines on Antiretroviral Therapy, Prevention of Mother to Child Transmission of HIV and Infant & Young Child Feeding 1st EDITION (2011) The Republic Of Uganda Ministry Of Health Addendum To The National Antiretroviral Treatment Guidelines (2013)

Adolescents and Children 10 - 14.9 Years and Greater than 35kg

Year Issued:

2013 Addendum and 2011 Guidelines

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

All children less than 15 years of age should be initiated on ART irrespective of CD4 count and WHO clinical staging.

Regimen Options:

First Line:

Preferred:

TDF + 3TC + EFV

Second

Line:

AZT+3TC+ATV/R

Third Line:

Darunavir+Raltegravir+2NRTI

First Line:

Alternatives:

AZT + 3TC + NVP

AZT + 3TC + EFV

Second

Line:

ABC+3TC+LPV/r

Third Line:

Darunavir+Raltegravir+2NRTI

Reference:

The Integrated National Guidelines on Antiretroviral Therapy, Prevention of Mother to Child Transmission of HIV and Infant & Young Child Feeding 1st EDITION (2011) The Republic Of Uganda Ministry Of Health Addendum To The National Antiretroviral Treatment Guidelines (2013)

Adolescents and Children 10 - 14.9 Years and less than 35kg

Year Issued:

2013 Addendum and 2011 Guidelines

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

All children less than 15 years of age should be initiated on ART irrespective of CD4 count and WHO clinical staging.

Regimen Options:

First Line:

Preferred:

ABC + 3TC + EFV

Alternatives:

ABC + 3TC + NVP

Second Line:

AZT + 3TC + LPV/r

Third Line:

Darunavir+Raltegravir+2NRTI

First Line:

Alternative: AZT + 3TC + EFV

Second Line:

ABC +3TC +LPV/r

Third Line:

Darunavir+Raltegravir+2NRTI

Reference:

The Integrated National Guidelines on Antiretroviral Therapy, Prevention of Mother to Child Transmission of HIV and Infant & Young Child Feeding 1st EDITION (2011) The Republic Of Uganda Ministry Of Health Addendum To The National Antiretroviral Treatment Guidelines (2013)

Adolescents and Children 3 - 9.9 Years or less than 35kg

Year Issued:

2013 Addendum and 2011 Guidelines

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

All children less than 15 years of age should be initiated on ART irrespective of CD4 count and WHO clinical staging.

Regimen Options:

First Line:

Preferred options:

ABC + 3TC + EFV

Alternatives:

ABC + 3TC + NVP

Second Line:

AZT+3TC+LPV/r

Third Line:

Darunavir+Raltegravir+2NRTI

First Line:

Alternative: AZT + 3TC + EFV

Second Line:

ABC+3TC+LPV/r

Third Line:

Darunavir+Raltegravir+2NRTI

Reference:

The Integrated National Guidelines on Antiretroviral Therapy, Prevention of Mother to Child Transmission of HIV and Infant & Young Child Feeding 1st EDITION (2011) The Republic Of Uganda Ministry Of Health Addendum To The National Antiretroviral Treatment Guidelines (2013)

Children less than 3 Years

Year Issued:

2013 Addendum and 2011 Guidelines

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

All children less than 15 years of age should be initiated on ART irrespective of CD4 count and WHO clinical staging.

Regimen Options:

First Line:

Preferred option

ABC + 3TC + NVP

Second Line:

AZT+3TC+LPV/r

Third Line:

Darunavir+Raltegravir+2NRTI

First Line:

Alternatives:

AZT + 3TC + NVP

Second Line:

ABC+3TC+LPV/r

Third Line:

Darunavir+Raltegravir+2NRTI

First Line:

Alternative: ABC + 3TC + LPV/r

Second Line:

AZT+3TC+(EFV or NVP)

Third Line:

Darunavir+Raltegravir+2NRTI

First Line:

Alternative: AZT + 3TC + LPV/r

Second Line:

ABC+3TC+(EFV or NVP)

Third Line:

Darunavir+Raltegravir+2NRTI

Reference:

The Integrated National Guidelines on Antiretroviral Therapy, Prevention of Mother to Child Transmission of HIV and Infant & Young Child Feeding 1st EDITION (2011) The Republic Of Uganda Ministry Of Health Addendum To The National Antiretroviral Treatment Guidelines (2013)

Pregnant Women and Infants

Year Issued:

2013 Guidelines and 2011 Addendum

HIV/TB Co-Infection Addressed:

Yes

Criteria for Treatment:

For programmatic and operational reasons, all pregnant and breastfeeding women with HIV should initiate ART as lifelong treatment

Regimen Options:

First Line:

Once daily fixed dose combination of

TDF+3TC+EFV

recommended for pregnant including 1st trimester and breast feeding women for PMTCT.

- Infants of mothers receiving ART and are breastfeeding should receive 6 weeks of infant prophylaxis with daily NVP
 - If infants are receiving replacement feeding they should be given 6 weeks of daily NVP
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Reference:

The Integrated National Guidelines on Antiretroviral Therapy, Prevention of Mother to Child Transmission of HIV and Infant & Young Child Feeding 1st EDITION (2011) The Republic Of Uganda Ministry Of Health Addendum To The National Antiretroviral Treatment Guidelines (2013)

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