

Terms of Reference

Estimation of Acquired HIV Drug Resistance in Nepal

1. Introduction

There are an estimated 5.2 million adults and children living with HIV in the Asia and Pacific by the end of 2017. Still, 27% of the total estimated people living with HIV (PLHIV) in the Asia and Pacific region are not aware of their HIV status. Only 53% and 45% of the total estimated PLHIV in the region are on antiretroviral therapy (ART) and have suppressed viral loads respectively. However, treatment coverage has been improved significantly over time in the Asia and Pacific region including Nepal. The treatment coverage among PLHIV is 53% (16428/31020, July 2018) which increased by two-fold in last 7 years (2011-2018). Therefore, assessment of status of viral load (VL) suppression and emerging burden of HIV drug resistance (HIVDR) among nationally representative sample of PLHIV receiving ART over time is extremely important to evaluate the performance of HIV programmes in maximizing viral suppression. In addition, findings of survey will inform the optimal selection and management of second-line therapies, and provide insight on the extent to which patients are switching therapies unnecessarily.

This is the first time that National Centre for AIDs and STD Control (NCASC) implementing national-level Acquired HIV Drug Resistance (ADR) survey in Nepal. ADR is HIVDR which emerges in response to drug selective pressure, and it may emerge even when optimal regimens are provided, and adherence is supported¹. In the near future NCASC will also plan for the transmitted HIVDR and pre-treatment HIVDR.

This ADR survey is planned to assess the following objectives:

- To estimate nationally representative VL suppression and levels /patterns of HIVDR in PLHIV who have been on ART for 12 (± 3) months and/or ≥ 48 months.
- To estimate nationally representative retention in treatment among PLHIV who have been on ART for 12 (± 3) months.

2. Survey Methodology

This survey uses a method known as a two-stage cluster design. In the first stage, NCASC already sampled a minimum of 20 (17 > 4 years vs ≤ 4 years) ART centres from a list of all ART centres in the country using

¹ Trotter AB, Hong SY, Srikanthiah P, Abeyewickrame I, Bertagnolio S, Jordan MR. Systematic review of HIV drug resistance in Southeast

Asia. AIDS Rev. 2013 Jul-Sep;15(3):162-70.

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probability proportional to size. In the second stage, a sample of eligible PLHIV will be recruited from each of the selected ART centres. NCASC will provide number of study participants to be enrolled in the survey per site. Patients included in the survey will have blood specimens collected for VL testing. Specimens with a VL of ≥ 1000 copies/mL will be genotyped to determine HIVDR status. ART counsellors will review the records to estimate retention among sample PLHIV.

3. Survey population and sample size

This survey will recruit 1400 PLHIV aged 16 years and above receiving ART at two different time points:

- Early timepoint – targeting PLHIV who have been on ART for 12 (± 3) months
- Late timepoint – targeting PLHIV who have been on ART for at least 48 months

4. Responsibilities/ Deliverables of Research Organisations

Some of the survey activities will be performed by the hired research organization which are described below:

- Incorporate the feedback of TWG and finalise the draft protocol developed by NCASC.
- Develop the training materials (training manual, PPT etc) to lab personnel and facilitate the training in coordination with the responsible NCASC and SCI staff.
- Facilitate in providing incentives to study participants, ART counsellors, lab personnel at Nepal Public Health Laboratory (NPHL) and sites.
- Facilitate (payment and necessary coordination) transportation of sample from Kathmandu to Bangkok.
- Write the introduction, methods and discussion section of the report and incorporate the feedback of TWG. Submit a final report.
- Produce PowerPoint and other necessary documents (press release, policy brief) for national dissemination.
- Contribute (hall rent, journalist fee, refreshment etc) in national dissemination of survey findings.

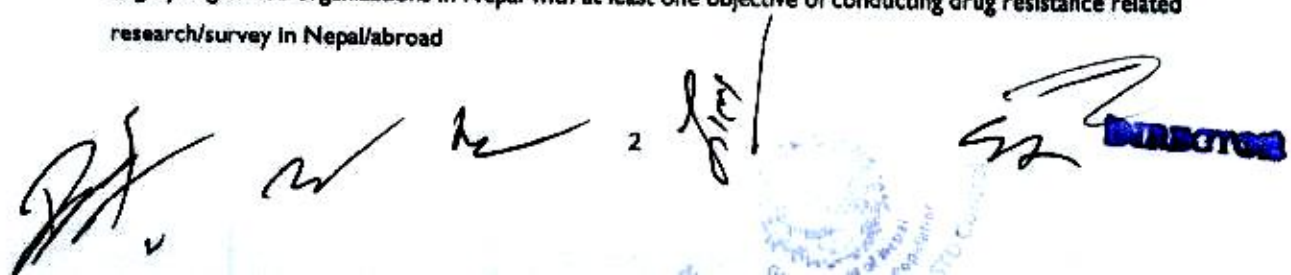
5. Technical requirements

Research organization should have the following experience:

- Experience in conducting clinical laboratory research or it will be an asset if the organization have prior experience in conducting drug resistance survey. Please submit the summary/ abstract of the relevant report or published papers.
- Proven technical capacity of the laboratory or experience in conducting research using own laboratory.

6. Administrative requirements

- Legally registered organizations in Nepal with at least one objective of conducting drug resistance related research/survey in Nepal/abroad



- Research organisations are required to submit attested copies (from notary) of all necessary legal status such as organisation registration/renew, audit report and tax clearance certificates.

7. Evaluation Criteria for EOI:

A selection committee will be formed and will evaluate each organization based on a total score of 100. The distribution of scoring criteria will be as follows:

- 1) Organization Profile (35 points)
- 2) Technical Capacity (40 points)
- 3) Experience of key professionals (25 points)

8. Notes

1. The details of the proposal on

- (a) Technical and
- (b) The budget plan will be further requested upon pre-qualified bidders ONLY.

2. National Centre for AIDS and STD Control (NCASC) hold all the rights to accept and/or reject bidding applications without notifying to bidders applied at any point before a formal contract is signed with the successful bidder.

3. Please read the TOR carefully and ensure all administrative and technical information and evidence demanded in the TOR and EOI Application Forms are provided as mentioned. The interested research organizations are requested to submit their Expression of Interest (EOI) to the following address:

The Director
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Phone: +977-1-4261653 Fax: +977-1-4261406
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