

Publications from the ART-LINC of leDEA collaboration

Title	Author	Journal	Link
Prioritising prevention strategies for patients in Antiretroviral Treatment Programmes in Resource-Limited Settings.	ART-LINC of leDEA study group	AIDS Care	In press
Mortality associated with discordant responses to antiretroviral therapy in resource-constrained settings.	ART-LINC of leDEA Study Group	J Acquir Immune Defic Syndr. 2010 Jan 1;53(1):70-7.	Abstract
Cost-effectiveness of preventing loss to follow-up in HIV treatment programs: a Côte d'Ivoire appraisal.	ART-LINC of leDEA Study Group and CEPAC International Investigators	PLoS Med. 2009 Oct;6(10):e1000173	Abstract
Accuracy of WHO CD4 cell count criteria for virological failure of antiretroviral therapy	ART-LINC of leDEA Study Group	Trop Med & Int Hlth, 2009 Oct; 14(10) : 1220-5	Abstract
Switching to second-line therapy antiretroviral therapy in resource-limited settings: Comparison of programmes with and without access to viral load monitoring.	ART-LINC of leDEA Study Group	AIDS. 2009 Sep 10;23(14):1867-74.	Abstract
Mortality of HIV-Infected Patients Starting Antiretroviral Therapy in Sub-Saharan Africa: Comparison with HIV-Unrelated Mortality	ART-LINC of leDEA Study Group	PLoS Med. 2009 Apr 28;6(4):e1000066.	Abstract
Electronic medical record systems, data quality and loss to follow-up: survey of antiretroviral therapy programmes in resource-limited settings.	ART-LINC of leDEA Study Group	Bull World Health Organ. 2008, 86 (12): 939-947.	Abstract
Long-term immunologic response to antiretroviral therapy in low-income countries: a collaborative analysis of prospective studies.	ART-LINC of leDEA Study Group	AIDS. 2008 Nov 12;22(17):2291-302.	Abstract
Early loss of HIV-infected patients on potent antiretroviral therapy programmes in lower-income countries.	ART-LINC of leDEA Study Group	Bull World Health Organ. 2008 Jul;86(7):559-67.	Abstract
Antiretroviral therapy in resource-limited settings 1996 to 2006: patient characteristics, treatment regimens and monitoring in sub-Saharan Africa, Asia and Latin America.	ART-LINC of leDEA Study Group	Trop Med Int Health. 2008 Jul;13(7):870-9.	Abstract
Reply to Colebunders and Caluwaerts.	Brinkhof, MW and Egger, M	Clin Inf Dis 2008;46 (1May): 1482.	No Abstract
Determination of the Incidence of Tuberculosis in Low-Income Countries.	Colebunders, R and Caluwaerts, S	Clin Inf Dis 2008;46 (1May): 1482.	No Abstract
Gender and the Use of Antiretroviral Treatment in Resource-Constrained Settings: Findings from a Multicenter Collaboration.	ART-LINC of leDEA Study Group	J Womens Health (Larchmt). 2008 Jan-Feb;17(1):47-55.	Abstract
Tuberculosis after initiation of antiretroviral therapy in low-income and high-income countries.	ART-LINC of leDEA and ART-CC groups	Clin Infect Dis. 2007 Dec 1;45(11):1518-21.	Abstract
Discordant responses to potent antiretroviral treatment in previously naive HIV-1-infected adults initiating treatment in resource-constrained countries: the antiretroviral therapy in low-income countries (ART-LINC) collaboration	ART-LINC of leDEA Study Group	J Acquir Immune Defic Syndr. 2007 May 1;45(5):52-59.	Abstract
Mortality of HIV-infected patients in low-income countries (letter).	Brinkhof, MW et al.	Lancet 2006; 368: 2207-8.	No Abstract
Mortality of HIV-1-infected patients in the first year of antiretroviral therapy: comparison between low-income and high-income countries.	ART-LINC and ART-CC groups	Lancet 2006;367:817-24.	Abstract
Cohort Profile: Antiretroviral Therapy in Lower Income Countries (ART-LINC): international collaboration of treatment cohorts.	ART-LINC study group	Int J Epidemiol. 2005 Oct;34(5):979-86.	Abstract

Several additional papers have recently been submitted for publication