

What's New in the Guidelines

Updated: April 23, 2026

Reviewed: April 23, 2026

The [*Guidelines for the Prevention and Treatment of Opportunistic Infections in Children With and Exposed to HIV*](#) (Pediatric Opportunistic Infection Guidelines) document is published in an electronic format that can be updated easily as relevant changes in prevention and treatment recommendations occur.

The editors and subject-matter experts are committed to timely changes in this document because many health care providers, patients, and policy experts rely on this source for vital clinical information.

All changes are developed by the subject-matter groups listed in the document; changes in group composition also are posted promptly. These changes are reviewed by the editors and relevant outside reviewers before the document is altered. Major revisions within the last 6 months are as follows:

April 23, 2026

[Mycobacterium avium Complex Disease](#)

- Added linezolid, moxifloxacin, and bedaquiline as options for alternative therapy in children with severe symptoms or disseminated disease who need an alternative to rifabutin or a fourth drug as part of their treatment regimen.

[Varicella-Zoster Virus Disease](#)

- Added valacyclovir as preferred therapy in children aged ≥ 3 months with no or moderate immunosuppression diagnosed with uncomplicated herpes zoster or mild varicella.
- Clarified indications for passive immunization with varicella-zoster immune globulin (available as VariZIG) or intravenous immunoglobulin (or IVIG) after exposure to herpes zoster or varicella.

January 28, 2026

[Hepatitis C Virus Infection](#)

- Updated recommendations regarding breastfeeding in the setting of maternal HIV/hepatitis C virus coinfection to endorse shared clinical decision-making.

December 22, 2025

[Candida Infections](#)

- Updated information on the epidemiology of antifungal-resistant *Candida*, including *Candida auris*.

- Recommended posaconazole as an alternative therapy for fluconazole-refractory oropharyngeal candidiasis in children.
- Added isavuconazole as an alternative therapy for fluconazole-refractory esophageal candidiasis.
- Added information on the recommended management of *Candida* infections of the central nervous system.
- Emphasized the importance of antiretroviral therapy for all infants and children with HIV and candidiasis.

Human Papillomavirus Disease

- Updated the vaccine section to include information and recommendations on the nonavalent human papillomavirus (HPV) vaccine.
- Added a section on HPV vaccine efficacy.
- Expanded the section on treating HPV-associated warts, providing more detail on treatment considerations for children compared with considerations for older patients.

Pneumocystis Pneumonia

- Updated the age-specific criteria for discontinuing primary prophylaxis.
- Added guidance on *Pneumocystis jirovecii* pneumonia prophylaxis in breastfed infants with perinatal HIV exposure.
- Added intravenous pentamidine as an alternative regimen for primary prophylaxis.
- Added twice-daily dosing of atovaquone as an option for children aged 1 month to 12 years.

Toxoplasmosis

- Added information on the clinical manifestations of ocular toxoplasmosis.
- Updated the age-specific criteria for discontinuing and restarting primary and secondary prophylaxis.
- Updated the dosing recommendation for sulfadiazine secondary prophylaxis.
- Updated information on the preferred acute induction therapy regimen for treating acquired toxoplasmosis.