



## Analysis of the antirretroviral treatment adherence

E. Fernández Díaz, I. Loizaga Díaz, Z. Pérez España, S. Vallinas Hidalgo, F.J. Goikolea Ugarte, M.J. Yurrebaso Ibarreche.

Hospital Universitario Basurto, Pharmacy Service, Bilbao, Spain.

**Objectives**: To evaluate ART adherence in our hospital's HIV patient cohort and its effect on the efficacy of ART; as well as to determine the effect of several treatment-dependant factors.

Methods: Period of time: July to November 2011

Population: HIV patients taking ART who came to the infectious diseases outpatients.

Adherence to treatment(%): difference between units of medicines that should have been dispensed and units that were recorded in the Pharmacy service as having been dispensed in the last year.

Collected variables: sex, age, daily number of tablets, dose regimen (QD, BD), ART combination (NRTI, NNRTI, PI/r), adherence and viral load (VL).

Adherent patient =adherence ≥90%. The ART was considered effective when VL was ≤50 copies/mL.

## Results:

N=835, 566 men (67.9%), 268 women (32.1%)

•Mean age= 46.7±8 years

Mean Adherence= 92.2 ±11.3%

Adherent patients= 76.3%

Mean tablets/day: adherent patients= 3.2

non-adherents= 3.7

Dose Regimen: QD= 80.2% and BD= 72.2%

Efficacy of ART: 89.5% of adherent patients

70.1% of non-adherent patients

2NRTI+NNRTI

PI/r

2NRT i+ NNRTI

DART combinations

95 Adherence

Conclusion: The success of the ART is considerably higher in adherent patients (89.5%) than in non-adherents patients (70.1%).

Simplifying the ART (QD, fewer tablets) is a strategy able to increase the number of adherent patients. Monotherapy with Pl/r improves the adherence to ART.

