

# DELAYED HIV TREATMENT AND FACTORS ASSOCIATED



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## BACKGROUND AND IMPORTANCE

Clinical guidelines recommend starting antiretroviral therapy (ART) as soon as possible after HIV diagnosis

## AIM AND OBJECTIVES



- ✓ To analyse delay in treatment initiation over the past ten years
- ✓ To understand factors associated with delayed ART initiation

## MATERIAL AND METHODS

### Retrospective observational study

### Main variable

### Other variables collected



From January-2012  
to June-2022

Time from diagnosis  
to ART initiation  
(delay time)

- Age, sex, route of infection
- Health-care setting of diagnosis
- Antiretroviral therapy (ART)
- Baseline viral load (VL)
- CD4 cell count (CD4c)
- AIDS stage

Patients diagnosed with HIV  
infection in an integrated  
health area

### Statistical analysis

- ✓ Student's t-test
- ✓ Linear regression method  
(dependent variable: delay time)

SPSS®v.15.0.

## RESULTS

### 108 patients included



34 years (IQR 29.2-42.7), 76.9% men  
38.9% AIDS stage  
58.4% diagnosed in the hospital setting  
50.9% MSM



66,7% integrase-strand-transfer inhibitors (INSTI)  
13% non-nucleoside reverse-transcriptase inhibitors (NNRTI)  
20,4% boosted protease inhibitors (PI/b)

Median baseline logVL 4.63 (4.13-5.14) and CD4c 325 (95-500)

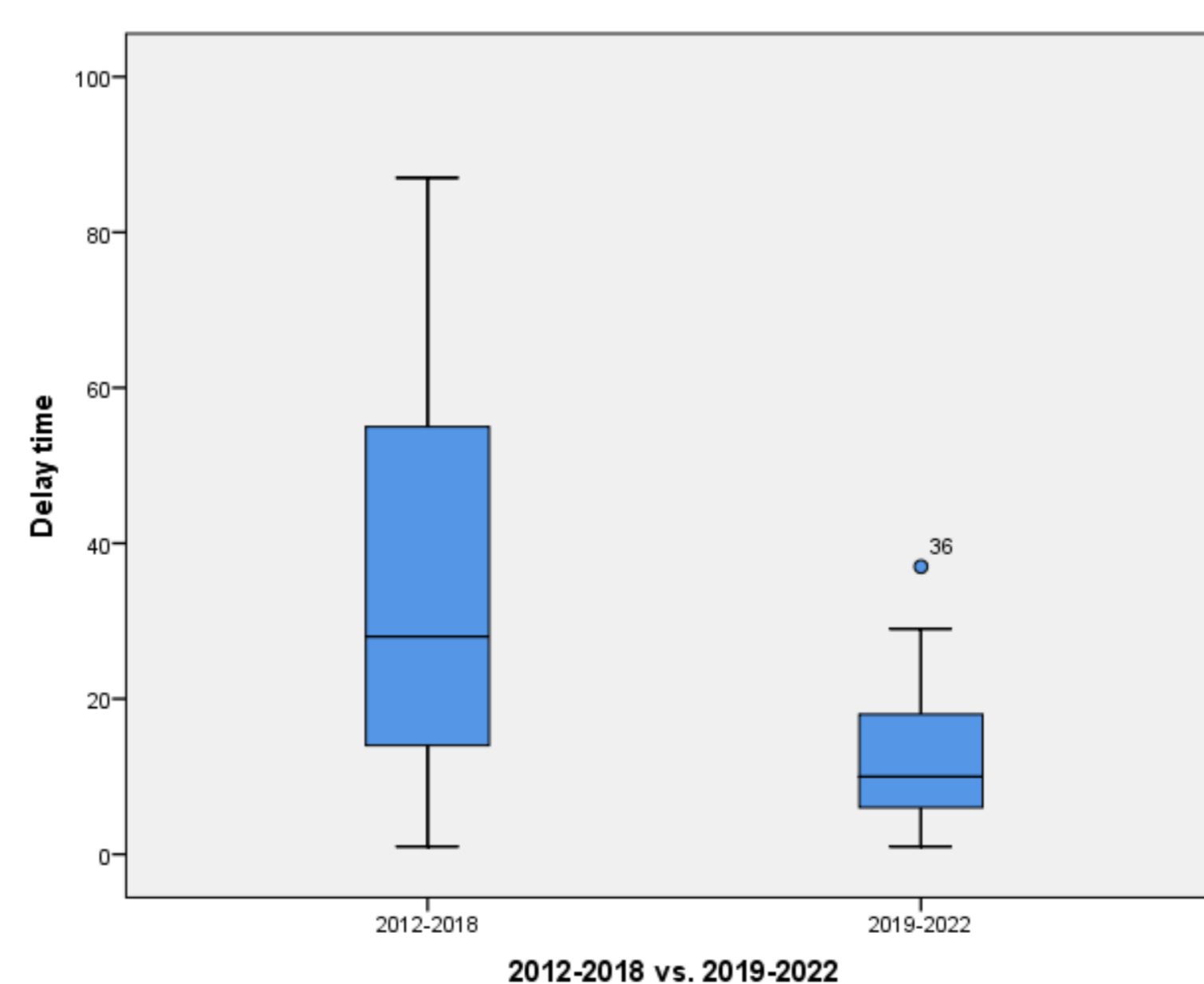
**Median delay: 21 days (IQR 9-55)**

Factors associated  
with delay

- **Baseline CD4c** (for every 100 CD4 increase, delay time extended by 2.29 days (95%CI 0.56 to 4.02; p=0.01)
- **Baseline logVL** -3.25 days (95%CI 1.57-8.08; p=0.18)
- **AIDS at diagnosis** -5.40 days (95%CI 3.30-14.10; p=0.2)
- **Use of INSTI or PI/b compared to NNRTI** -31.28 days (95%CI 7.85-54.71; p= 0.016)

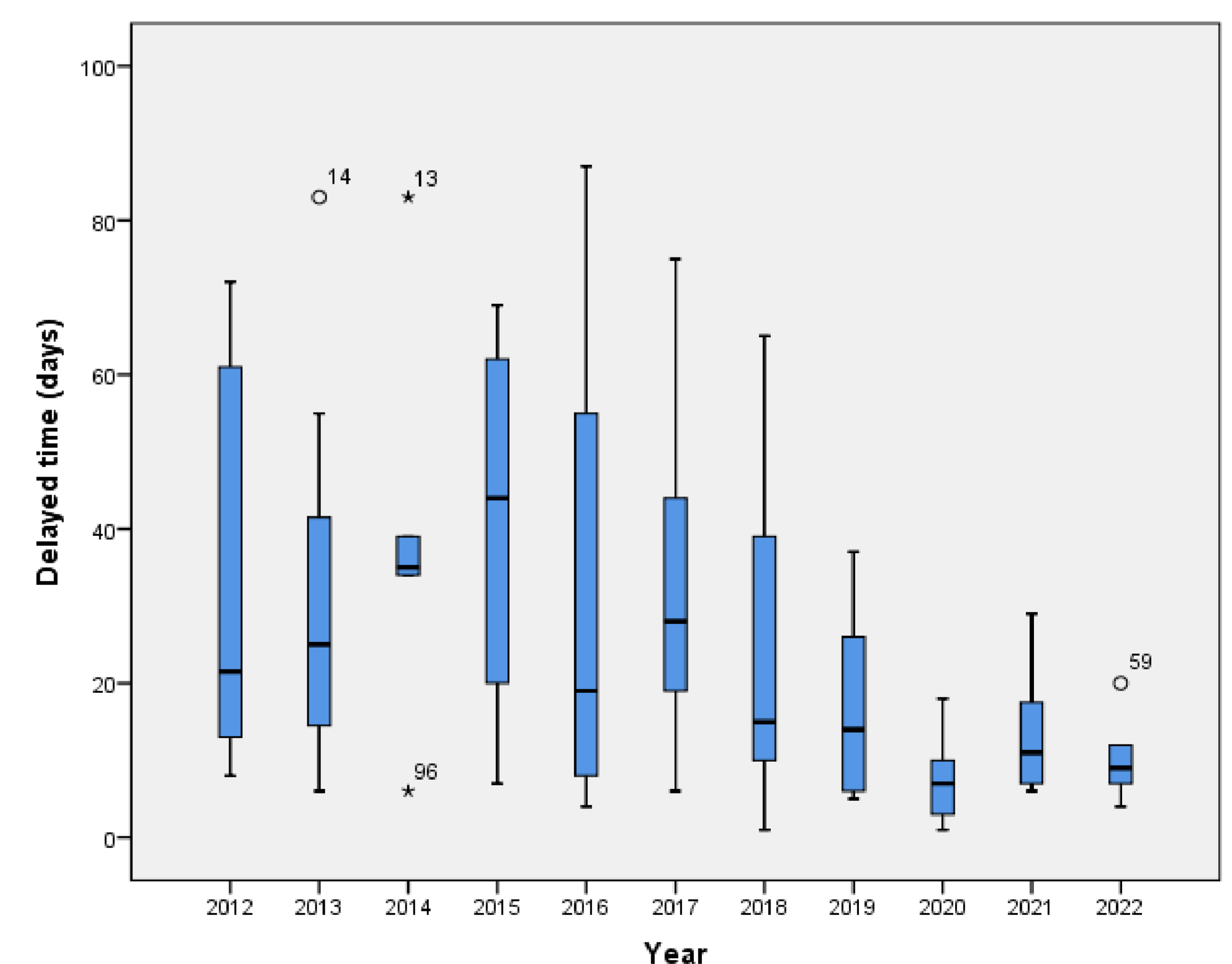
**2012-2018 vs. 2019-2022**

Delay was reduced by 20 days  
(95%CI 13.66 to 27.26; p<0,001)



**For each year of evolution**

Time to ART initiation was reduced by 3.05 days  
(95%CI 1.59-4.50; p<0.001)



## CONCLUSION AND RELEVANCE



- The delay to ART initiation has been significantly reduced in recent years.
- Factors related to the decrease in delay are lower CD4c, starting treatment with INSTI or PI/b vs. NNRTI and being within 2019-2022 vs. 2012-2018.



**4CPS-243**

J05- ANTIVIRALS FOR SYSTEMIC USE