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Consulta de Atención Farmacéutica Patologías Víricas

CP-031. CONCURRENT USE OF CO-TREATMENT WITH ANTIRETROVIRALS REDUCES ADHERENCE TO HIV MEDICINES

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BACKGROUND

The life expectancy of HIV infected individuals has increased, and there are many patients with comorbidities and comedication, which could affect antiretroviral therapy (ART) adherence.

PURPOSE

To investigate the influence of the polypharmacy on ART adherence in patients with HIV infection, as well as to identify predictors of ART adherence.

METHODS

A single-center and retrospective study was conducted in HIV-infected patients which initiated treatment before January-2012. Follow-up period:12 months.

Dependent variable: ART adherence

- dispensing records of pharmacy´s program
- Morisky scale

Patients were considered adherent when they took ≥90% of prescribed ART in the last 12 months.

Independent variables: sex, age, CD4, transmission risk, CDC classification, ART naive, HIV viral load, number of hospital admissions, type of ART, comedications (≥5 prescriptions drugs) and risk of drug related problems (DRP) http://estudiopredictor.sefh.es/index.html

To determine the independent variables associated with adherence, we performed an univariate logistic regression and subsequently a multivariate analysis.

RESULTS

594 patients Sex: 80% men. Mean age 47 years.

Univariate analysis (p-value<0.05)	
Intravenous drug use (IDU)	≥1 hospital admission
AIDS-defining condition	PI-based regimens
ART naïve	High risk of DRP
Detectable viral load	Polypharmacy

Multivariate analysis	OR (IQR)	p-value
IDU	0.58 (0.34-0.99)	0.048
ART naive	9.94 (3.69-26.79)	<0.001
High risk of DRP	0.41 (0.24-0.69)	0.001
Polypharmacy	0.39 (0.22-0.68)	0.001

CONCLUSIONS

1. Although, ART adherence is high, polypharmacy significantly reduces adherence. Similar findings have been reported by other studies. This fact justifies the key role that the pharmacist can play in the adherence monitoring.
2. Furthermore, patients no-naive, IDU and with high risk of DRP are also associated with lower adherence.