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CP-032. PREVALENCE OF COMORBIDITIES AND EFFECT ON ART ADHERENCE IN HIV-INFECTED PATIENTS

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BACKGROUND

As people with HIV infection is aging, comorbidities and complications have increased and it could affect antiretroviral therapy (ART) adherence.

PURPOSE

To determine the comorbidities of patients with HIV infection, as well as to evaluate their contribution to ART adherence.

METHODS

A twelve-months retrospective observational study (January-December-2012) was conducted in HIV-infected patients who were being treated with ART.

Dependent variable: ART adherence

dispensing pharmacy records

Total n.of units dispensed/ Total n.of units needed×100

Simplified medication adherence questionnaire (SMAQ)

Independent variables: sex, age, HCV coinfection, transmission risk, CD4+ T-cell count, HIV viral load, ART naive, type of ART and comorbidities.

Polypathological patients: ≥chronic conditions

Good adherers: patients who took at least 90% of their prescribed ART

We performed an univariate logistic regression to determine the relationship between the comorbidities and the ART adherence.

RESULTS

536 patients

Sex: 80.2% men

Age: mean 47±7.1 years HIV-HCV coinfected: 49.2%

CD4+: 574,5 cells/mm³ (IQR:353,8-776,3) Viral suppression (<20 copies/ml): 73.5%

ART naive: 82.5%

NNRTI-based regimen: 40,3% PI-based regimen: 31.5%

Comorbidities	%
Dyslipidaemia	19.4
Neuropsychiatric disorders	14.7
Hypertension	13.2
Diabetes	5.6
Cardiovascular disease	5.2

Adherent patients: 86.2%

Polypathological patients: 51.9%

The variable polypathological patients showed statistically significant relationships with ART adherence:

OR=0,44 [0,26-0,74]; p=0,002

CONCLUSIONS

There is an important number of polyphatological HIV infected patients. Despite ART adherence is high, the presence of these comorbidities significantly reduces adherence.