

EFFECT OF TREATMENT COMPLEXITY ON TREATMENT PERSISTENCE IN HIV PATIENTS

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Background

The complexity of highly active antiretroviral treatment (HAART) may be one of the main causes of discontinuation to HAART. Martin et al. in 2007 developed a score which calculate complexity index considering number of pills taken per day, dosing schedule, dosage form and any specific instructions related to drug use.

Objective

To determine the influence of treatment complexity on medication persistence in HIV naive patients

Material and Methods

- Study design: retrospective observational study.
- ❖Inclusion criteria: HIV naive patients who started HAART between January/2012 and December/2013 in a secondary hospital.
- Variables collected: Demographics

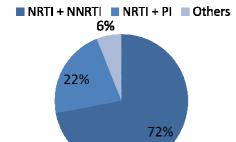
 - Antiretroviral therapy
 - Medication regimen complexity index (George J et al, 2004)
 - Persistence to HAART. Duration of time from initiation to discontinuation of therapy
- Statistical analysis: Kaplan-Meier method was performed using SPSS 20.0 program.

Results

N = 68

Variable Frequen		
Sex (% male)	53	
Age, n (SD)	37 (± 10)	
Patientes who discontinued treatment n (%)	treatment n (%) 36 (53)	
Median overall persistence (weeks)	55 [95% CI: 37-73]	

Antiretroviral therapy



	NRTI+NNRTI	NRTI +PI	р
Complexity index	2.1 ± 0.5	4.4 ± 0.5	<0.001
Persistence (weeks)	57 [95% CI: 54-60]	28 [95% CI 23 to 34]	0.006

NRTI: nucleoside reverse transcriptase inhibitor NNRTI: non-nucleoside reverse transcriptase inhibitor PI: protease inhibitors

Conclusion

Patients treated with less complex antiretroviral treatment are significantly more persistent to HAART.