

Prevalence and factors associated with virologic failure among people living with HIV (PLHIV) monitored in a decentralized health care facility

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Abstract

In Senegal, the decentralization of health care centres has contributed significantly to the intensification of ARV treatment. However, Care providers are still facing the treatment optimizing challenge. To determine the prevalence of virologic failures of PLHIV monitored in a decentralized Health care center and to determine associated factors. This is a cross-sectional descriptive and analytical study of PLHIV, aged 18 years and over, on first-line treatment, monitored onsite from February 1 to December 31st 2018. A data collection form was completed from medical records (clinical, immuno-virologic and evolutionary). Any VL > 1000cp/ml after 6 months of antiretroviral therapy (ART) was considered as virologic failure. Data were captured and analyzed using the 2002 EPI software. Chi2 test and the Fisher test were used to compare the proportions; a value of $p \leq 0.05$ was considered significance. 331 patients were treated with HIV-1 profile in 89% of cases. A proportion of 55% were married and 97% came from the rural areas. 80% were either not or poorly educated. The average age was 44 (Range: 15-76) with a F/M ratio of 3.4. At baseline, 56% were symptomatic at stage 3 or 4 of WHO. They had severe immunosuppression, an average CD4 count of 217 cells/mm³ (2, 946), the viral load was detectable in half of the patients with an average of 97000 cp/ml (100, 400000). The antiretroviral regimen combined 2 NRTIs with 1 NRTIs in 88% of cases. The average duration of follow-up was estimated at 60 months (12-204). The prevalence of virologic failure was 19%. This prevalence was associated with age less than 25 years ($p = 0.04$), late diagnosis (CD4 at baseline less than 200 cel/mm³ ($p = 0.002$), stage 3 or 4 WHO ($p = 0.04$) High viral load greater than 10000 ($p = 0.04$) at baseline.

Biography

Selly Ba is a Senegalese, physician-scientist specializing in Infectious Diseases (HIV and other STDs), Public Health and Epidemiology, medical statistics. Her main interest is the Management HIV in resource limited settings. Currently she is an HIV Technical advisor at Intrahealth International with as main spots to bring Technical assistance to DLSI (AIDS department) and CNLS (National HIV Council) in the planning, implementation and monitoring of Test and treat Strategy. She has been the Co-Investigator and Study Physician of numerous studies in the fields of HIV and HPV research. She has over 20 publications.



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