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Adherence to highly active antiretroviral therapy, in depressed peoples living with HIV/AIDS in Nigeria, West Africa

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Objectives: Non-adherence to antiretroviral therapy has serious consequences for prognosis and may lead to the development of resistant strains of the virus. Depressive disorders on the other hand, are a significant public health issue. They are prevalent, disabling, and often chronic, with a high economic burden to the society. This study determined the prevalence and effect of depressive disorders on Anti- Retroviral Therapy (ART) as well as factors responsible for non adherence.

Methods: This was a hospital based, cross sectional, descriptive study of three hundred adult HIV/AIDS patients attending the HIV clinic of Kwara State specialist hospital, Sobi, Ilorin, Nigeria, West Africa. Informed consent was obtained from the respondents. The PHQ-9 was administered to the respondents to screen for depression. Those who scored one and more were assessed clinically for depression. The severity of the depression was further classified as minimal, mild, moderate and severe. The three keys of social determinants of depression (SDS) were assessed and the association with depression sought. The CAGE questionnaire was used to assess alcohol misuse. Adherence was assessed using self-reporting method. Structured questionnaire was used to evaluate factors responsible for treatment adherence.

Results: One hundred and seventy (56.7%) satisfied the criteria for a depressive disorder using the PHQ-9 score. Depressive symptoms were strongly related to gender, below average year of schooling, poor economic status, low social cohesion, and stressful life events. The adherence rate to antiretroviral therapy was 81%. This represented those who ingested 95% or more of their drugs in the one week preceding the interview. Adherence was higher among non-alcoholics than current or ex-alcoholics. Forgetfulness, 37.1% and stigmatization, 18.2% were the major reasons proffered for non compliance with ART. Stigma had profound effect on the adherence.

Conclusion: Depressive disorder in PLWHA is associated with poor adherence to antiretroviral medication. Early identification and treatment of depression in such patients may improve antiretroviral medication adherence and treatment outcomes.

Biography

Shittu Rasaki Olatunji has completed his Bachelor of Medicine and Bachelor of Surgery (MB,BS), as well as Master of Public Health (MPH), at the University of Ilorin, Nigeria. He is a Fellow of the West African College of Physician (FWACP), Family Medicine. He is currently the Head of Department of Family Medicine and HIV/AIDS Clinic of Kwara State Specialist Hospital, Nigeria and Chief Medical Director of the prestigious Oorelope Hospital, Yakuba, Ilorin, Kwara State, Nigeria, which is National Health Insurance (NHIS) Accredited. He has published a lot of papers on HIV/AIDS including Oral Lesions, Dermatological Lesion, Depression, Internalized Stigma and Dermatology Quality of Life Impairments in reputable journals.

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