

CO-MORBIDITIES IN A SAMPLE OF HIV-POSITIVE ADULTS IN COLOMBIA. SUB-ANALYSIS OF PATIENTS YOUNGER THAN 50 YEARS.



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OBJECTIVES

- To characterize HIV diagnosed patients <50 years, attending two HIV care programs.
- To describe the most frequent comorbidities among people <50 years with HIV diagnosis that are in two HIV healthcare programs.

MATERIALS AND METHODS

- This is a sub-analysis of an Observational, retrospective study. Medical records that met the inclusion criteria in two HIV care programs were selected. Descriptive statistics were performed to summarize the clinical and demographic patients characteristics.

RESULTS

- From 669 medical records that were reviewed, 83,8% (561) were from patients <50 years (median age: 30.7 years), of these patients, 28.88% (162) were female, 20.86% (117) were overweight and 15.33% (86) were obese.
- Almost 70% had at least one co-morbidity and 25.50% (140) received non-HIV treatment medications. Figure 1 shows the most frequent comorbidities reported in this group of patients.
- Regarding the risk factors for any comorbidity in this population and the associated conditions, the most frequent reported were alcohol intake, tobacco history and drug abuse history (Figure 2).

Fig 1. Most frequent comorbidities in patients living with HIV younger than 50 years.

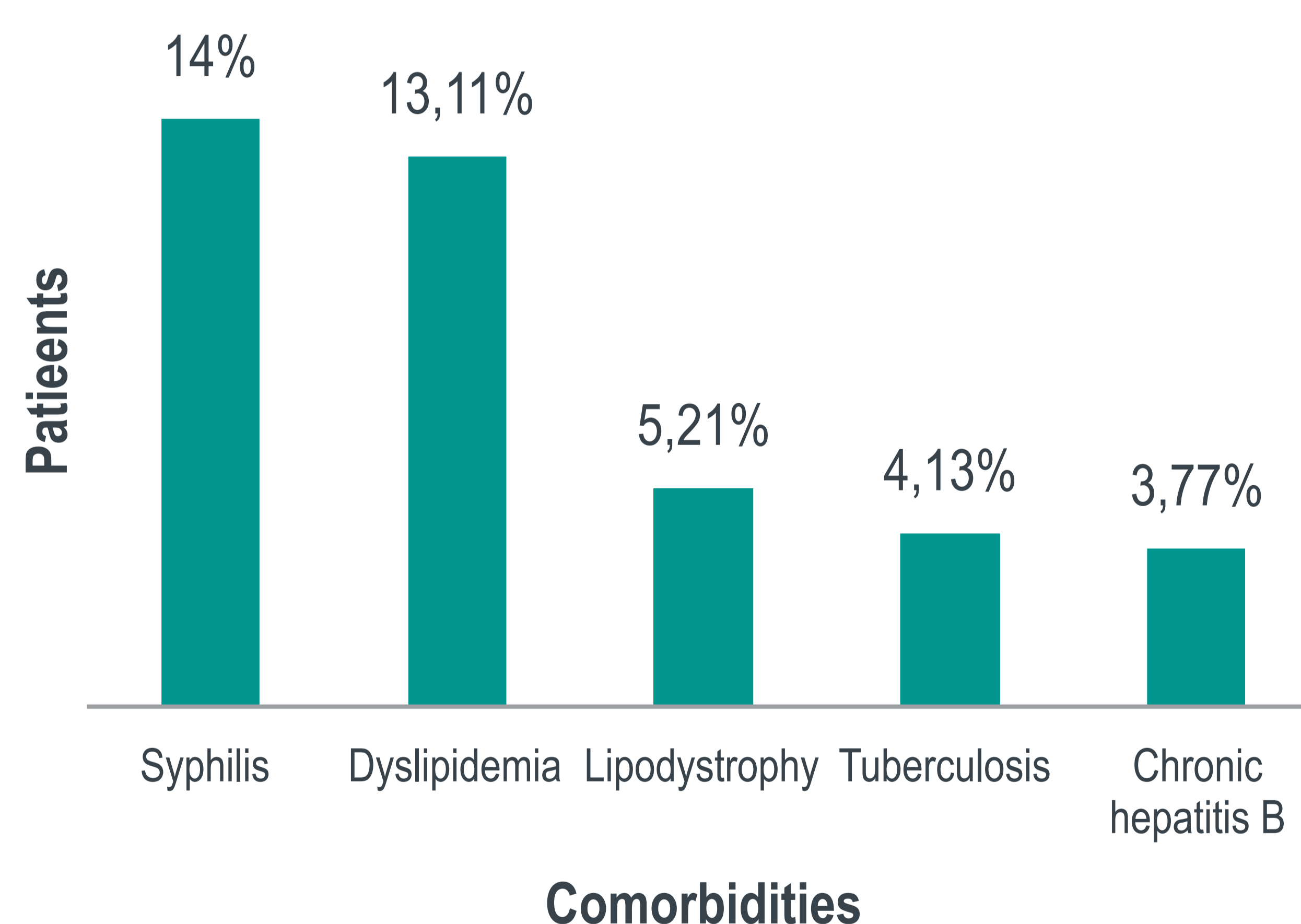
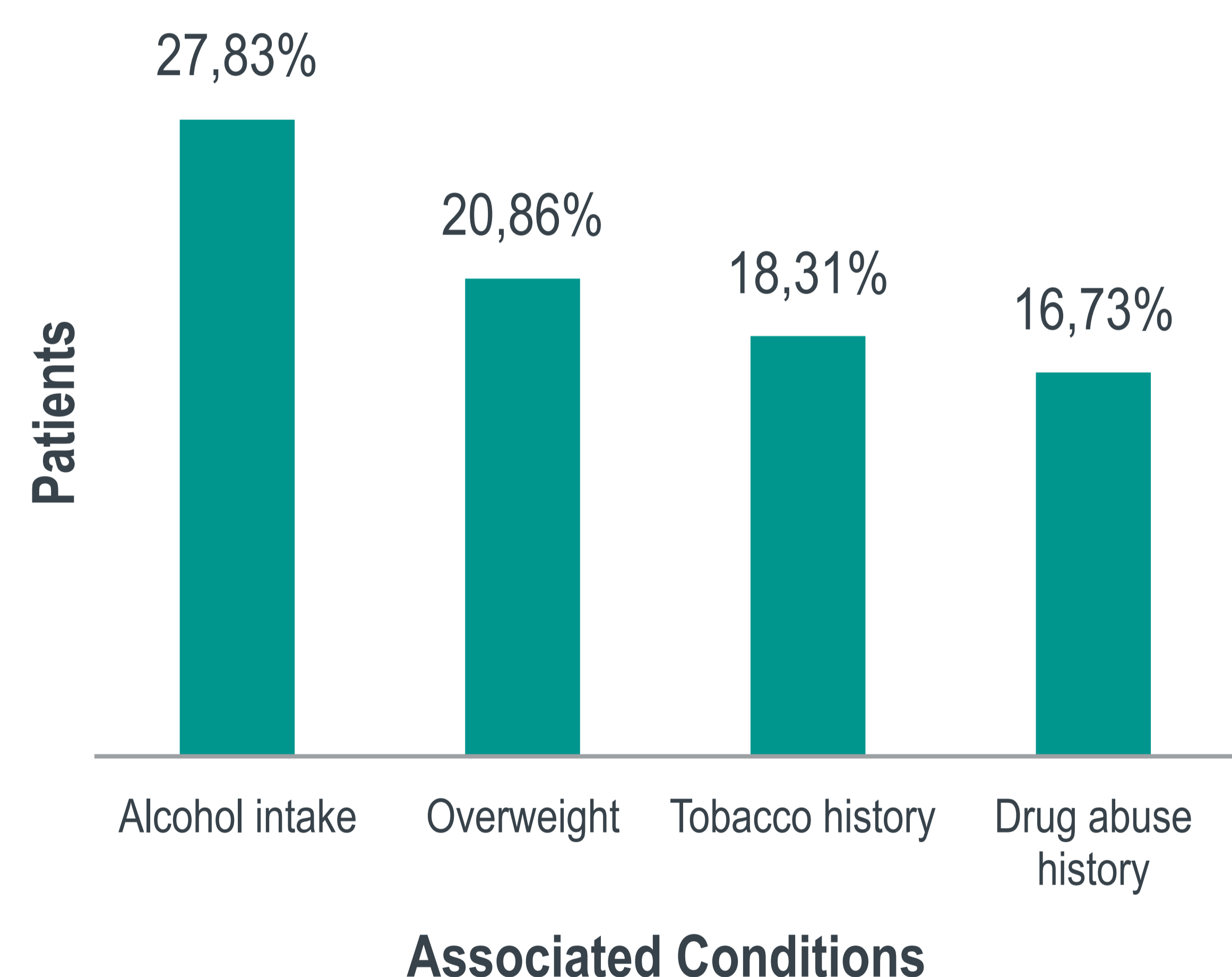


Fig 2. Most frequent associated conditions in patients living with HIV younger than 50 years.



CONCLUSIONS

This is one of the first studies to assess comorbidities of HIV patients in Colombia in the population younger than 50 years. It is relevant that in this group of age, more than a half of the population have co-morbidities that imply a potential reduction in their quality of life and the use of medications that can potentially interact with ART, despite improvements in survival resulting from the proper use of ART.

HIV programs in Colombia should consider an integral management of patients younger than 50 years to identify co-morbidities and establish the adequate treatment.

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