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## OVERVIEW OF HEALTH CARE LINKAGE, RETENTION AND ADHERENCE IN YOUNG PEOPLE LIVING WITH HIV IN BRAZIL.

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### BACKGROUND

After recommending treatment for all PLHIV in 2013, Brazil has progressively expanded ART's coverage. The HIV care cascade, a tool for decision-making in public health policies, shows results of interventions and helps to identify critical points to qualify health care for PLHIV. In 2016, 830,000 PLHIV were estimated in Brazil; of these 694,000 (84%) were diagnosed; 655,000 (79%) were linked to health services; and 563,000 (68%) were retained. Since then, there has been a decrease of untreated PLHIV in all ages, though the proportion of PLHIV aged 18-24 years without ART is 2.5 times higher compared to PLHIV over 60. One of the challenges of the Brazilian public system is to increase the number of young people adherent to ART, linked and retained in health services.

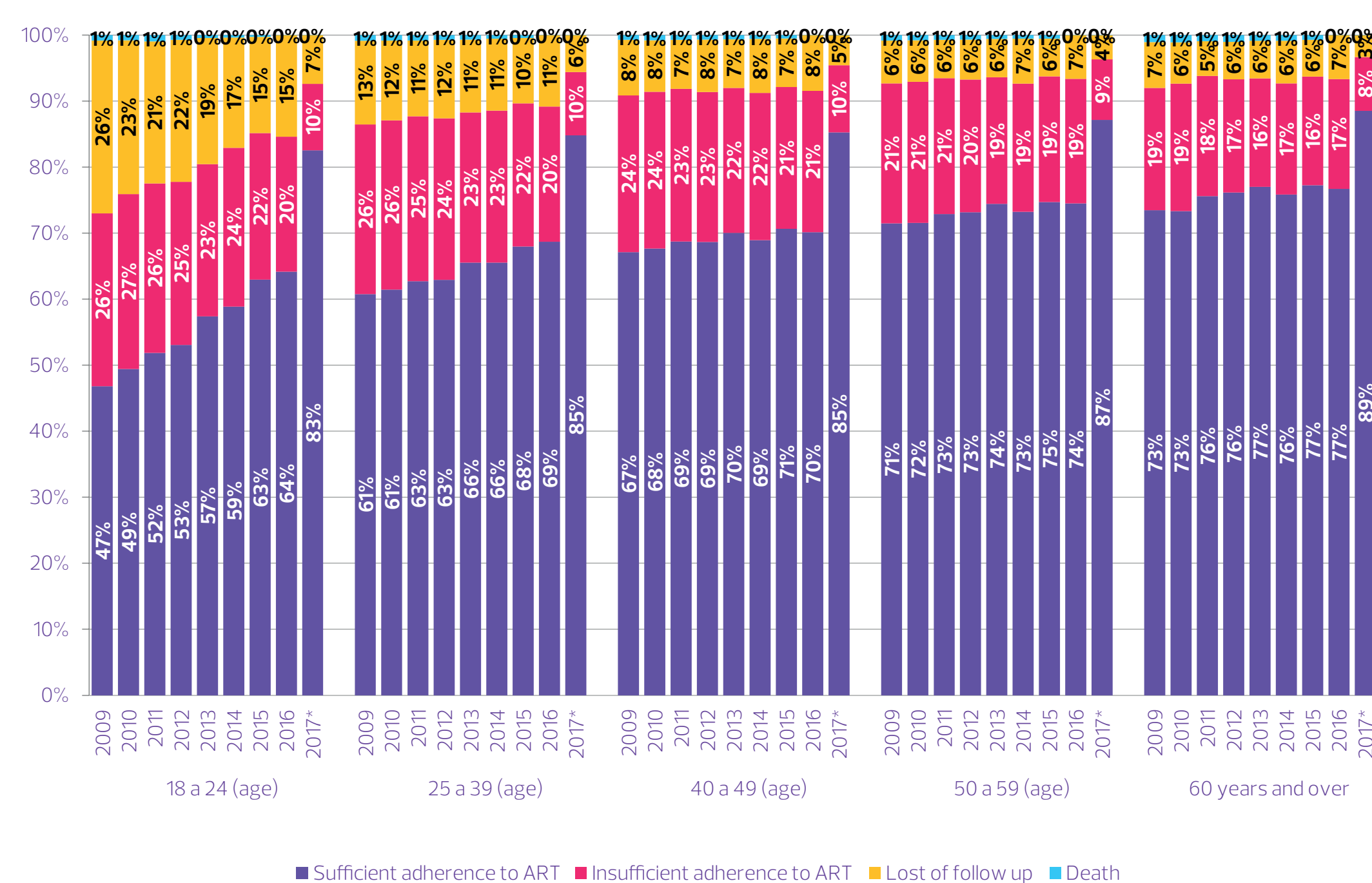
### MATERIALS AND METHODS

A cross-sectional study was carried out to estimate retention and adherence in PLHIV older than 18 years. The results were obtained by crossing data from SISCEL (a national laboratory system that shows individual CD4 count and HIV viral load results) and SICLOM (a national antiretroviral delivery control system) between 2009 and 2017 (first semester).

### RESULTS

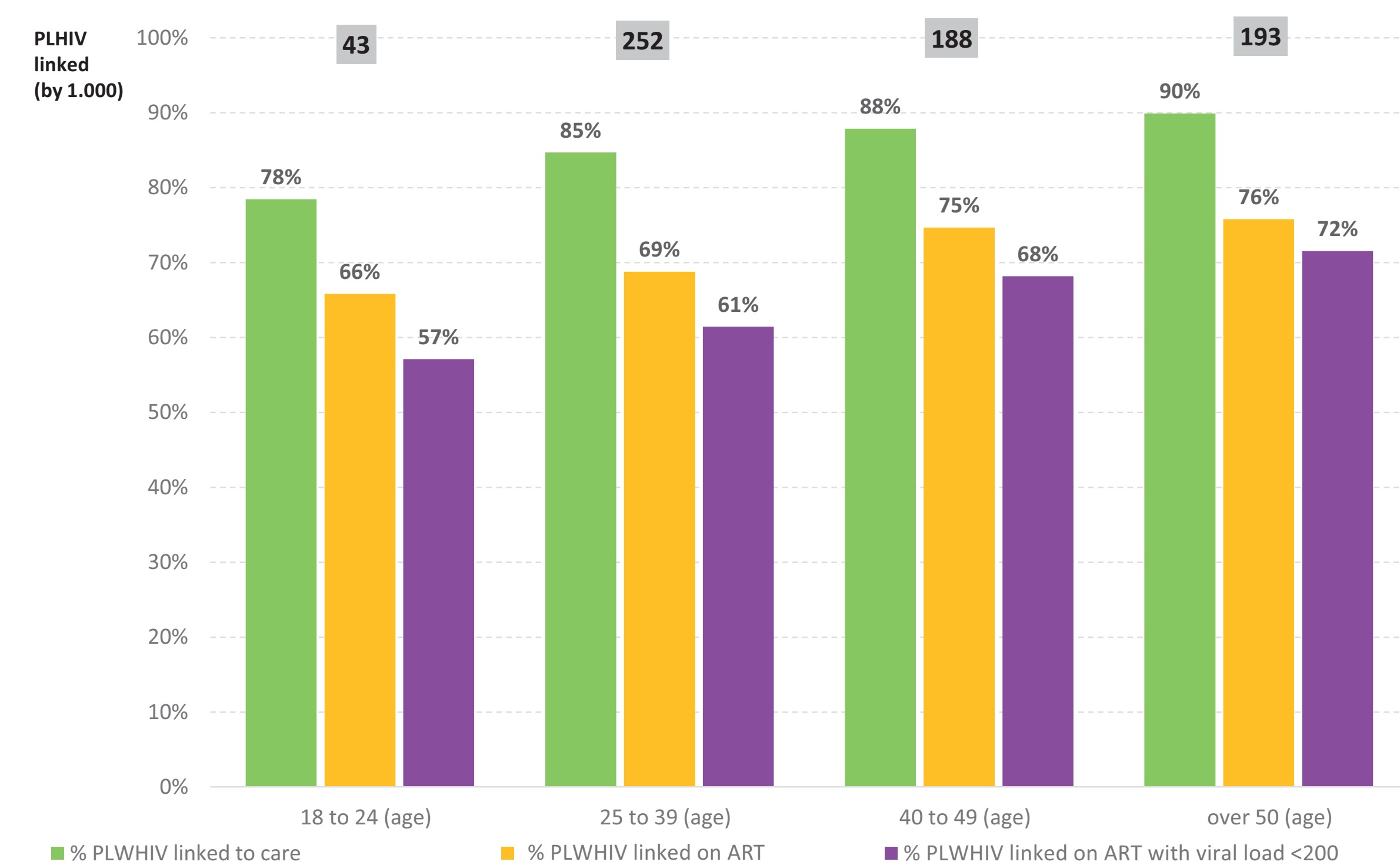
There is a progressive improvement in linking and retention in health care and in ART adherence of PLHIV aged 18-24 years between 2009 and 2017 is observed. Despite having the poorest adherence rates, young people showed a considerable improvement in sufficient adherence, which rose from 47% in 2009 to 64% in 2016, while the lost to follow up in this age group diminished from 26% to 15%.

Status of PLHIV aged 18 years and over with at least one delivery in the year, at the end of each year, related to art and death, by age, 2009-2017.



In 2016, approximately 43,000 young people were linked to health care, of which 78% were retained, 66% were on ART and 57% had suppressed HIV viral load. The proportion of PLHIV aged 18-24 in ART with VL<200 copies/mL is lower when compared to other ages.

HIV care cascade, calculated by proportion of PLHIV linked to health services, by age group. Brazil, 2016



Of PLHIV aged 18-24 who started ART in 2009, 52% were retained after 12 months; this rate has risen to 81% among those who started ART in 2015. A reduction in retention was observed in the period between 2 years and 5 years after the initiation of ART in this age group: 74% of those who started ART in 2014 remained retained, while 61% of those who started ART in 2011 remained retained.

### CONCLUSIONS

Despite the gradual improvement of the indicators analyzed in PLHIV aged 18-24, it is essential to strengthen actions directed to this age group, to increase access to health services and to ensure linkage and retention of young people, directly impacting on quality of life.