

MORTALITY AMONG HIV PATIENTS ON ANTIRETROVIRAL TREATMENT (ART) IN BALI, INDONESIA 2006-2014: INCIDENCE AND PREDICTORS

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BACKGROUND

Mortality among HIV patients remains a global health problem. Indonesia has had a significant increase in new HIV infections and AIDS-related deaths. Longitudinal mortality data among HIV patients are limited in Indonesian setting. Bali has the third highest HIV/AIDS case rate of all provinces in Indonesia. We explored incidence and predictors of mortality among HIV patients on ART attending a large district hospital (Badung General Hospital = BGH) in Bali.

METHODS

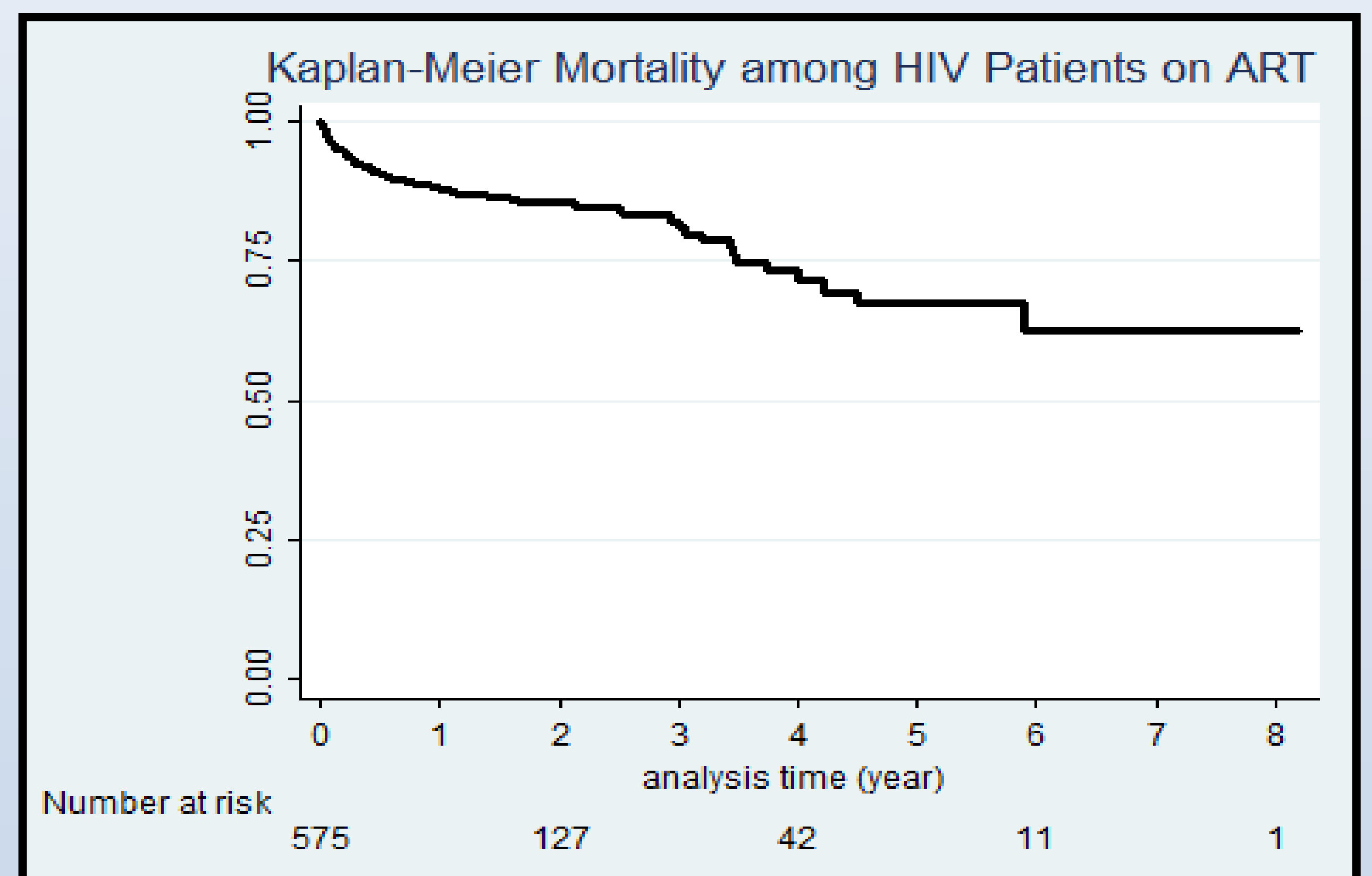
- This was a retrospective cohort study among 575 HIV patients in BGH and Bali Medica Clinic (BMC) between January 2006 and July 2014
- BMC is a satellite clinic of BGH who serve most MSM patients in this area
- We used secondary data from ART registers, ART national forms, and medical records
- Kaplan-Meier analysis was used to describe the mortality rate. Cox Proportional Hazard Model was used to identify predictors of mortality (socio-demographic factors, clinical parameters, type of ARV service,

RESULTS

Baseline characteristics of all patients and the independent predictors of higher risk mortality are described in Table 1.

Table 1 Baseline Characteristics and Multivariate Analysis of HIV patients on ART

Characteristics	n % (n= 575)	Multivariate Analysis aHR	p-value
Age (Median; IQR)	31; (26-38)		
Sex			0.001
Woman	110 (19.1)	1.00	
Man	465 (80.9)	3.77	
Transmission Risk			
Homosexual	232 (40.8)		
Heterosexual	322 (56.6)		
IDU	15 (2.6)		
Marital Status			
Married	165 (32.5)		
Single/Divorced	342 (67.5)		
Education			0.008
Higher Education	490 (85.2)	1.00	
Lower Education	85 (14.8)	1.98	
Treatment Supervisor			<0.001
Yes	241 (41.9)	1.00	
No	334 (58.1)	4.41	
Weight (Median; IQR)	55; (47-61)	0.96	0.003
CD4 count (Median; IQR)	128; (26-296)		
Clinical Stage			0.002
Stage I & II	307 (53.4)	1.00	
Stage III & IV	268 (46.6)	4.61	
Type of ARV services			0.033
Satellite (BMC)	234 (40.7)	1.00	
Prime site (BGH)	341 (59.3)	3.49	
ART policy			
Policy after 2012	413 (71.8)		
Policy before 2012	162 (28.2)		



- 76 patients died during eight years follow-up
- The mortality rate was 10.1/100 person-years (95%CI:8.0-12.6)
- Mortality rate was high in period after ART initiation with 35 (46%) dying in initial 3 months

CONCLUSION

The high mortality rate, particularly in ART first period highlights the importance to encourage early HIV diagnosis and prompt treatment; also can be completed with adherence support as a part of ART services to promoting adherence to ART.

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