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Characterization of treatment failure in HIV positive patients in the Colombian Caribbean region

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Abstract

Background: Treatment failure in patients receiving antiretroviral therapy against human immunodeficiency virus (HIV) is always a concern. Objective: To examine the correlates associated with treatment failure in patients living in the Colombian Caribbean city of Barranquilla, an aspect that was poorly studied in this region. Methods: Treatment failure (TF) was evaluated in a cross-sectional study from virological, immunological and clinical standpoints. Results: It was established that 29.5% of patients under highly active antiretroviral therapy (ART) could be considered in TF. Among those, virological failure was most frequent (20.9%), followed by immunological- (14.0%) and clinical failure (4.7%). In patients showing lack of adherence to the treatment, the likelihood of suffering from treatment- and virological-failure were respectively increased by 6.67-fold and 12.19-fold, compared with patients showing good adherence. Although there was no statistically significant association, TF tended to be more frequent in young adults, in patients with low income and, low level of education. When ART regimens were compared, there was no apparent difference in TF between regimens based on non-nucleoside reverse transcriptase inhibitors and those based on protease inhibitors. This is very important in the context of recent ART strategies, such as early-initiated ART, aimed at achieving long-term infection control. Conclusions: Is confirmed the importance of treatment adherence to avoid TF and further highlights the importance of educating HIV-infected patients in all parts of the world, especially those individuals with a lower socio-economic status.

Keywords

HIV, aids, adherence, failure, Colombia.