



National AIDS Committee Jamaica
" Keeping People and Communities Healthy"

FINANCIAL HARDSHIP EXPLAINS POOR ARV ADHERENCE IN TANZANIA

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Sacrificing health care for other needs and paying for one's own antiretrovirals (ARVs) each independently raised the risk of poor treatment adherence 20 times in Tanzania. Disclosing one's HIV status to family and friends protected against virologic failure.

Tanzanian and US researchers asked 150 adults treated for at least 6 months to complete a structured questionnaire and adherence survey. They defined virologic failure as a viral load above 400 copies/mL.

Twenty-three people (16%) reported incomplete adherence. Multivariate statistical analysis pinpointed two factors that independently raised the risk of poor adherence at the following adjusted odds ratios (AOR):

- Sacrificing health care for other needs: AOR 19.8, $P < 0.01$
- More months taking self-funded therapy: AOR 23.5, $P = 0.04$

Among 48 people (32%) with virologic failure, self-reported poor adherence more than tripled the risk of failure (AOR 3.6, $P = 0.03$). The proportion of months taking self-funded therapy inflated the risk of failure 13 times (AOR 13.0, $P = 0.03$).

People who disclosed their HIV status to family members or others had a 90% lower risk of virologic failure (AOR 0.10, $P = 0.04$).

The link between disclosure and lower risk of failure, the authors speculate, "may be a result of multiple factors, including social stigma, adherence coaching, and social isolation and depression."

The researchers propose that "efforts to provide free antiretroviral therapy and to promote social coping may enhance adherence and reduce rates of virologic failure."

Source: <http://www.iasociety.org/Default.aspx?pageId=5&elementId=10587>

Habib O. Ramadhani, Nathan M. Thielman, Keren Z. Landman, Evaline M. Ndosu, Feng Gao, Jennifer L. Kirchherr, Rekha Shah, Humphrey J. Shao, Susan C. Morpeth, Jonathan D. McNeill, John F. Shao, John A. Bartlett, John A. Crump. Predictors of incomplete adherence, virologic failure, and antiviral drug resistance among HIV-infected adults receiving antiretroviral therapy in Tanzania. *Clinical Infectious Diseases*. 2007;45:1492-1498.