



## ADHERENCE TO ANTI-RETROVIRAL TREATMENT IN PATIENTS WITH HUMAN IMMUNODEFICIENCY VIRUS.

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### Background

The goal of antiretroviral therapy (ART) is to reduce a person's viral load to an undetectable level. Poor adherence to ART is the first cause of therapeutic failure in patients infected with human immunodeficiency virus (HIV)

### Purpose

The main objective of this study is to know the degree of adherence to ART and the factors that can influence on it.

### Material and methods

- ❖ A retrospective, observational and descriptive study of adherence in HIV over a twelve month period has been done. HIV patients under ART were included.
- ❖ To measure adherence, we used the following methods: The HIV viral load (VL) testing, the CD4 count and the dispensation record of our program. VL is considered undetectable if it was lower than 20 copies/ml.
- ❖ Adherence's data were calculated based on the units dispensed according to the days of treatment prescribed. Adherence was considered optimal when it was greater than 95%.
- ❖ Registered variables: sex, risk factors that could compromise adherence, analytical values (CD4 count, VL) and pills number.
- ❖ Data were collected from an electronic prescription program (Farmatools® v.2.6) and the computerized medical history, Mambrino XXI ®.

### Results

- ❑ 128 patients were analysed during the study period.
- ❑ 50% were being treated with one tablet, 32% with two tablets and 18% with three or more tablets.
- ❑ The 92% obtained an undetectable VL. 73% obtained a CD4 level higher than 500/microl.
- ❑ No relationship between CV or CD4 and adherence was found.
- ❑ Out of the total of patients under treatment, 92% were considered adherent and 8% had less than 95% of adherence.
- ❑ Risk factors that hindered adherence were: History of non-adherence (60%), lack of social support structures (50%), psychological distress (40%) and poor access to medication (30%).

### Conclusion

- The results obtained reflect a high adherence rate (>95%). The determination of analytical values such as CV and CD4, and the record of dispensations of each patient are methods for measuring adherence to ART.
- It is important to monitor those patients who may have risk factors that compromise adherence. The hospital pharmacist can help to improve adherence.