

A COMPARISON OF DISEASE AND TREATMENT CHARACTERISTICS IN PEOPLE LIVING WITH HUMAN IMMUNODEFICIENCY VIRUS (HIV) ATTENDING COMMUNITY-BASED (CB) VERSUS HOSPITAL-BASED (HB) CARE SETTINGS IN WESTERN SYDNEY.

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Background/Purpose:

More effective and early initiation of antiretroviral therapy after HIV diagnosis has shifted care from hospital based (HB) to community based (CB) settings. The current assessment of screening, prophylaxis and therapy aims to describe the status of service delivery.

Approach:

This retrospective study compares patients presenting to Westmead Hospital (HB) and/or Western Sydney Sexual Health Centre (CB) from 2011 to 2016. Patient and disease characteristics, opportunistic infections, screening, prophylaxis and treatment variables were obtained from electronic and hard copy records. Summary data were analysed using descriptive statistics. Chi² test was used for comparison of categorical data. Two sample comparisons of parametric and non-parametric data were determined using T-test or Wilcoxon rank-sum tests respectively. Two-tailed p value <0.05 defined statistical significance.

Outcomes/Impact:

237 new patients with HIV presented to hospital, community or combined services in Western Sydney over six years (2011-2016), with 172 (73%) seen in CB, 50 (21%) HB and 15 (6%) HB/CB. World Health Organization (WHO) Stage 1 disease at diagnosis was recorded in 177 (75%) of the combined cohort. Median CD4 count at treatment in those with HIV diagnosis before 2014 (prior to guideline changes) was 298/ μ L (IQR 150, 472), compared to 393/ μ L (IQR 194, 612) from 2014 (p=0.03). Antiretroviral treatment was accessed within 6 weeks, in accordance with year-appropriate guidelines, in 65% of the cohort. Opportunistic infections (OI) and cancers were reported in 15% and 2.5% of patients, respectively. Screening for tuberculosis was more frequent in HB compared to CB (88% vs 71%; p=0.01) and comprehensive hepatitis serostatus (Hepatitis A, B & C) more frequent in CB (70% compared to 56%(p=0.06). There were gaps in Measles, Mumps and Rubella (MMR) serostatus and prophylaxis across both centres.

Innovation and Significance:

Data in this study provides a local profile of those seeking HIV care in Western Sydney and will inform future practice improvements.

Disclosure of Interest Statement

There are no disclosures of interest.