

Putting the Heart Back Into HAART: The Role Of HCP-Patient Engagement in Improving Health Outcomes Among Persons Living with HIV in Canada

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Addressing gaps in care: the role of patient-provider communication

- Even with highly active antiretroviral therapy (HAART), people living with HIV (PLHIV) still have several unmet needs.
- Good engagement between healthcare providers (HCP) and PLHIV can help address unmet needs that negatively impact health-related quality of life.
- We investigated HCP-PLHIV discussions and explored associations with health outcomes among PLHIV in Canada.



Approach: study population, measures, and analysis



Study population

Convenience sample of 120 PLHIV on treatment in Canada surveyed over the web as part of the 2019 Positive Perspectives Study.

Mean age (SD), 38.3(12.1) years

Women, 25.8%

Diagnosed during 2017-19, 30.8%

Reporting viral suppression, 64.2%



Self-rated health

Those who rated their physical, mental, sexual, or overall health, respectively, as “Good” or “Very good” were classified as having optimal health on that domain.



Treatment satisfaction

Response of “Satisfied”/“Very satisfied” to the question “Overall, how satisfied are you with your current HIV medication?”



Treatment concerns

Participants provided information on duration of diagnosis, emotional challenges with their HIV treatment, and things they would consider as a priority if starting treatment today.



Self-efficacy/barriers to communication

The survey rated participants’ comfort discussing specific issues with HCPs as well as reasons for communication hesitancy.

HCP-patient engagement (low, moderate, high), was modified from the Observing Patient Involvement scale.



Data analysis

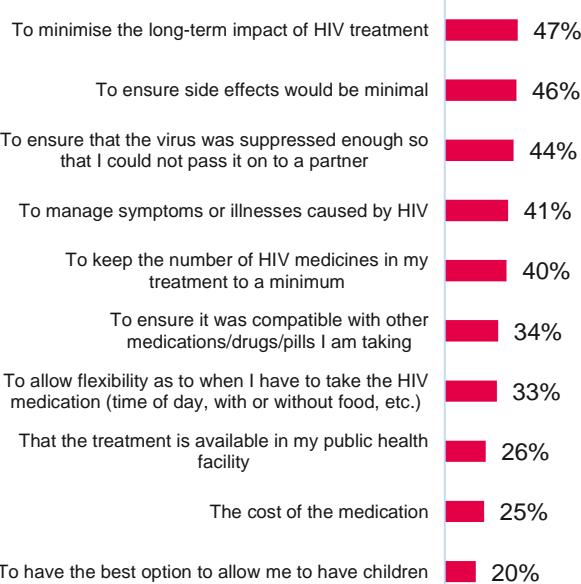
Data were summarized with percentages.

Statistical comparisons were performed with Chi-squared tests at $p < 0.05$

Key findings: a snapshot of patient priorities and HCP communication



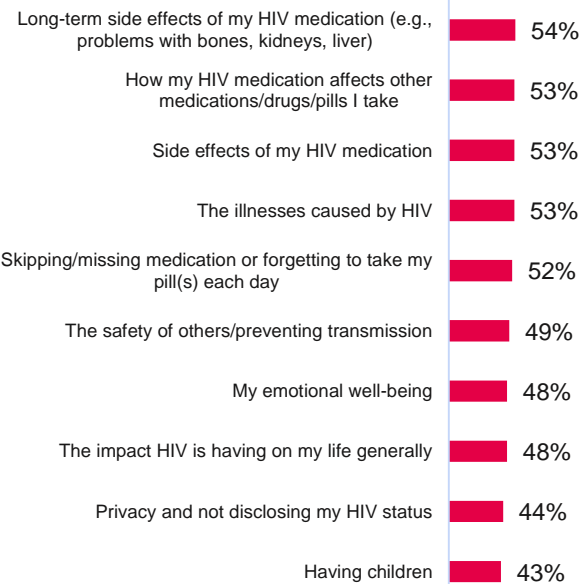
• What do PLHIV prioritize the most after at least 1 year after diagnosis?



"imagine that you were starting HIV treatment today. Other than ensuring that it is effective, what would be your most important considerations?" (Denominator: those diagnosed for 1+ years, n = 111).



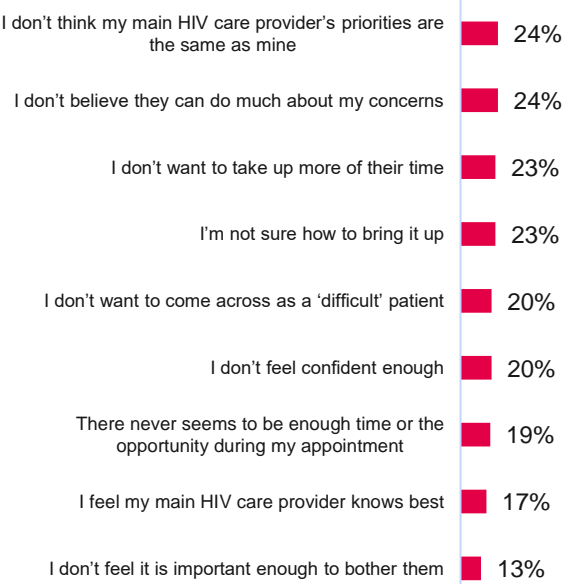
• How comfortable are PLHIV discussing specific treatment priorities with their HCPs?



If it were a concern of yours, to what extent would you feel comfortable raising each of the following with your main HIV care provider? Responses of "Comfortable"/"Very comfortable". (Denominator: all participants, n = 120).



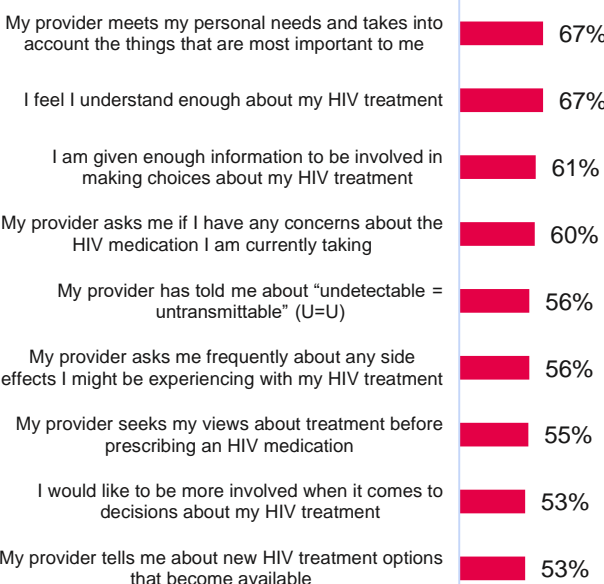
• What stops PLHIV from discussing their treatment priorities with their HCPs?



"Why, if at all, would you feel uncomfortable raising concerns with your main HIV care provider?" Select all that apply. (Denominator: all participants, n = 120).

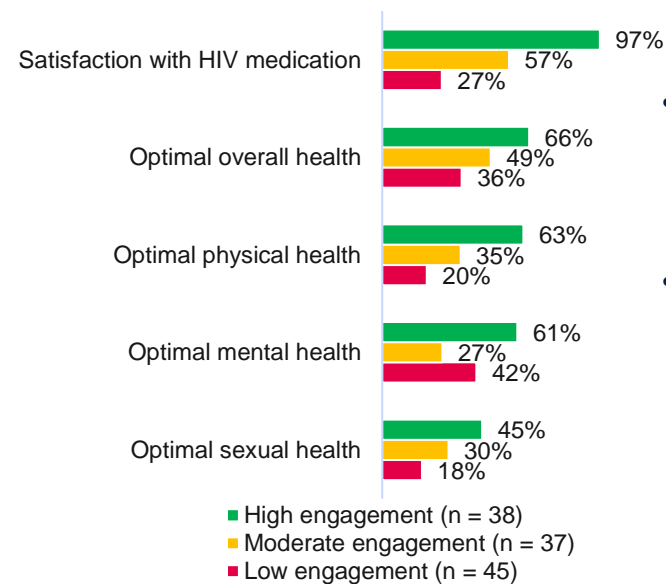


• To what extent do PLHIV feel engaged by their HCPs?



To what extent do you agree or disagree with each of the following statements? Responses of "Agree"/"Strongly". (Denominator: all participants, n = 120).

There are good outcomes when HCPs put the heart back into HAART



Prevalence of positive outcomes, stratified by extent of HCP communication/engagement with people living with HIV

- Positive health-related outcomes increased with increasing HCP-patient engagement (low[n=45], moderate[n=37], high[n=38]).
- These outcomes included greater prevalence of optimal self-rated health on all assessed domains as well as higher treatment satisfaction

8X

Number of times that PLHIV who felt their HCP took their concerns to heart and prioritized matters important to them were more likely than those without such perception to report they were satisfied with their HIV medication (82.5 [66/80] vs 10.0% [4/40], p<0.001)

Prevalence ratios for reported ART satisfaction among people living with HIV, stratified by whether participants perceived that their HCP took their concerns to heart

In summary...



Increasing patients' engagement in decision making was significantly associated with health-related outcomes.



Yet, many PLHIV reported gaps in their communication with their HCPs. Close to half were not comfortable discussing specific issues. Various barriers were reported



By engaging more fully with their patients, HCPs can better understand their unmet needs and develop treatment plans that enhance their overall wellbeing