

Management of antiretrovirals in Seniors - The importance of assisted treatment for adherence to treatment

20th International Workshop on Clinical Pharmacology of HIV, Hepatitis & Other Antiviral Drugs. May 14-16, 2019. Noordwijk, the Netherlands

Reported by Jules Levin

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Frazão de Aguiar, F.1, Costa, P.1, Neves, F.1, Duque, V.2, Cerejeira, J.2, Reis Marques, A.2, Almeida, F.3, Silva, A.3 1Fundação Portuguesa "a Comunidade Contra A SIDA", 2Hospital and University Center of Coimbra , 3Hospital Center of Oporto

Purpose of this project in Portugal includes: Provide nursing, psychological, social and legal support to be close to those people infected and affected by HIVIn HIV + seniors, it was particularly important to realize their real needs. The monitoring of SLWHIV and the identification of their needs leading to an effective increase in their quality of life led us to create the In.Porto.Me Solidary Office. Multidisciplinary support for PLWHIV was provided to 180 cases referenced initially and it was reflected in:

- Monitoring of health status through assisted medication, facilitating the understanding for effective therapeutic adherence;
- Psychosocial support provided by the psychologist and the social worker;
- Provision of nursing services in cases of users showing impaired mobility.

http://hivoutcomes.eu/case_study/portugal-in-porto-me-projet/

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Results

The focus of this study was to understand the interdependence between the relationship and therapeutic adherence. In the course of the project, the participants revealed that the fact that they are regularly followed, able to talk, get their doubts and realize what was being explained facilitated their adherence to antiretroviral treatment. Many have reported seeing the relationship between the effectiveness of treatment and the regularity and compliance of the medication (even when taking many other medications) only possible with this direct relationship and systematic monitoring and proximity assistance. In addition, switching from three tablets to a single shot facilitated. Another factor that seems important for the improvement of self-control and self-efficacy, autonomy and socialization of the participants was the psychological counseling and counseling where the psychopathological dimensions were worked out and improved.

Introduction

Associated with the aging of people living with HIV / AIDS are many other types of morbidity that need to be safeguarded. Medication prescribed for this population is not always fulfilled, either by forgetting, unwanted side effects or uncontrolled viral load. Medication management and adherence behavior to antiretroviral treatments are determinant for the efficacy of treatment and for the quality of life of these people, and assisted treatment is an important component in the care of the elderly who still live with shame and stigma associated with this disease.

Aims

Diagnose adherence to antiretroviral therapy in a convenience sample comprised of seniors enrolled in the Project In.Porto.Me I - Project for Screening and Promotion of Quality of Life of HIV + Seniors from Porto (N = 63) - Ref^a - PGG/015/2015 – Gilead Génese Program-Community. We carried out the analysis of the records made, in a data collection instrument developed for this project, during the home visits made by the person in charge of the medication / assay management and by the psychologist. This instrument included socio demographic, socio-communitarian data, drug-therapeutic regimen and therapeutic relationship and psychopathological dimensions.

Material and Methods

Of the 63 participants in the study, 27 were male and 36 were female between the ages of 67 and 88, with the majority living with their partner (married and / or union). We found that in Seniors Living With HIV there are some good practices conducive to therapeutic adherence: correct storage of medication (83%), compliance with medication prescription (72%), there were, however, aspects that may be improved: record of use of the drug (s) (87%); lack of support in medication compliance (78%); relationship between failure and therapeutic adherence (88%). Regarding the psychopathological dimensions, it was observed that the majority experienced episodes of anxiety (67%), depression (59%) and stigma associated with the disease (89%). Most (78%) isolate themselves from friends and even from the extended family.



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Conclusions

Seniors living with HIV/AIDS, especially the most vulnerable due to their economic situation/social isolation, referred to when accompanied and monitored in various biopsychosocial dimensions, consolidate the skills of self-control over HIV infection that favors the maintenance and/or increase of adherence to therapy, the adoption of healthy living habits and the improvement of their quality of life.



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