

Background

- Routine monitoring of people living with HIV (PLHIV) taking antiretroviral therapy (ART) is essential to improve the quality of care;
- The Guinea Ministry of Health with Solthis International NGO conduct supervisory visits to all public HIV facilities to strengthen access to care, treatment dispensation and quality of reported data;
- From March to December 2014, 373 Ebola Viral Disease (EVD) probable or confirmed cases were reported in Conakry health district (WHO 2015), among them about 52% have dead and more than 60 cases were health care workers;
- Donka national hospital (DNH) is the largest HIV facility in Guinea and is the only isolation and treatment center for EVD patients in Conakry;
- Factors such as fear of EVD contamination and death of health care workers reportedly affected health-seeking behavior and operation of health services;
- The indirect effects of EVD outbreak on the continuum of care in HIV facilities is unknown in Guinea.

Objectives

- To describe ART-patients attendance at DNH during the year 2014;
- To assess the indirect impact of the EVD outbreak on the continuum of care of PLHIV taking ART at DNH.

Methods

- Prescriptions of ART-patients attending the pharmacy unit of DNH during January to December 2014 were reviewed to gather following informations: unique patient identification code, gender, date of subsequent follow-up visits, age at each visit, date of scheduled visit, ART initiation during the study period, antiretroviral regimens;
- Among ART-patients attending the pharmacy unit to provide ART, we defined as:
 - defaulter: ART-patient who did not attend the last scheduled visit at least x days since a given time point. In order to perform sensibility analysis, we considered three threshold values above which a patient is considered as defaulter: x=70, 80, or 90 days. «Active in care» is defined as ART-patient who is not defaulter;
- To assess the indirect effect of EVD outbreak, we:
 - calculated following indicators: number of first visit, duration between two subsequent visits, duration between the visit and the next scheduled visit, number of «active in care», the rate of defaulters, and the risk to be defaulter;
 - and tested the trend of these indicators during the EVD outbreak period in Conakry health district using the Spearman's rank correlation test. We defined the EVD outbreak period as the time between March to December 2014.
- Stata 11.0 was used for analyses.

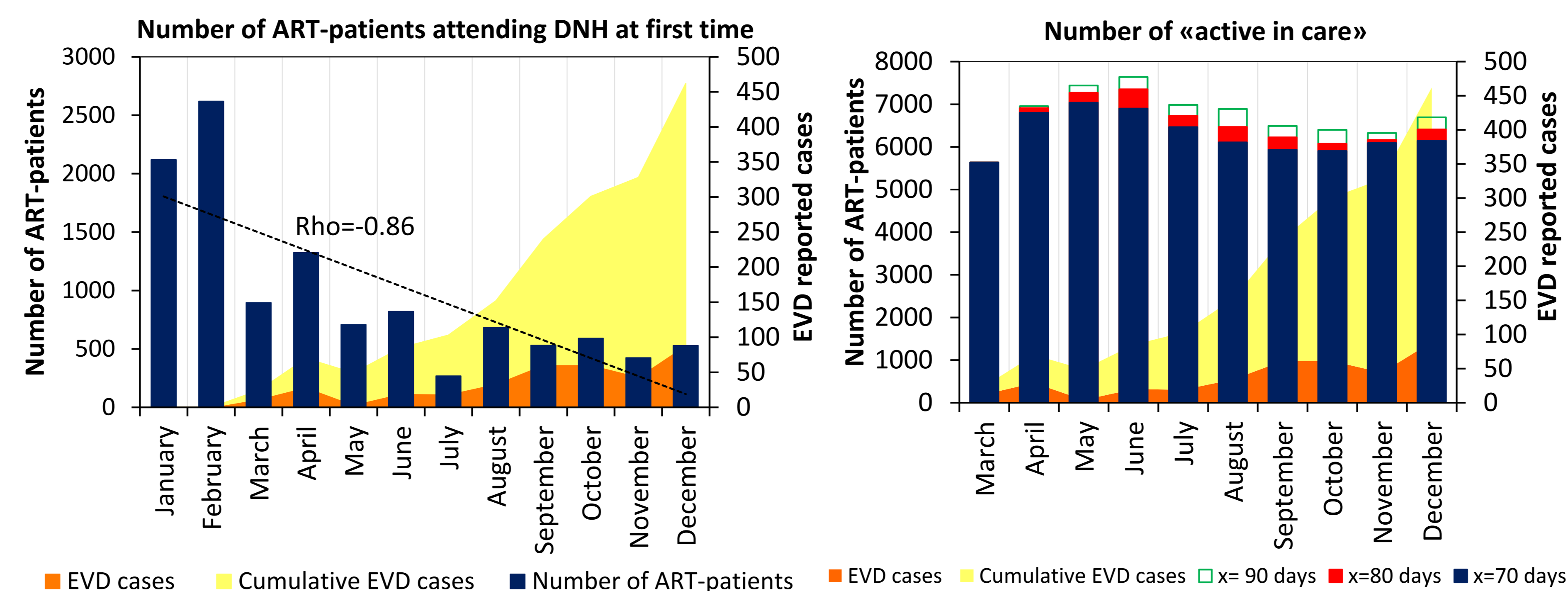
Results

Characteristics of ART-patients attending Donka National Hospital during January to December 2014

	N=11511
Gender, women, % (n)	63% (7250)
Age	
Median age (in year) (IQR)	37 (30-46)
<=15 years, % (n)	3% (292)
>15 years, % (n)	97% (8350)
Time between two subsequent visits (in day), median (IQR)	60 (36-63)
Time between the visit and the next scheduled visit (in day), median (IQR)	60 (57-61)
Follow-up duration (in day) per patient, median (IQR)	32 (0-215)
Number of visits per patient, median (IQR)	2 (1-4)

Common ART regimens:
 ■ AZT+3TC+NVP (52%)
 ■ TDF+3TC+EFV (29%)

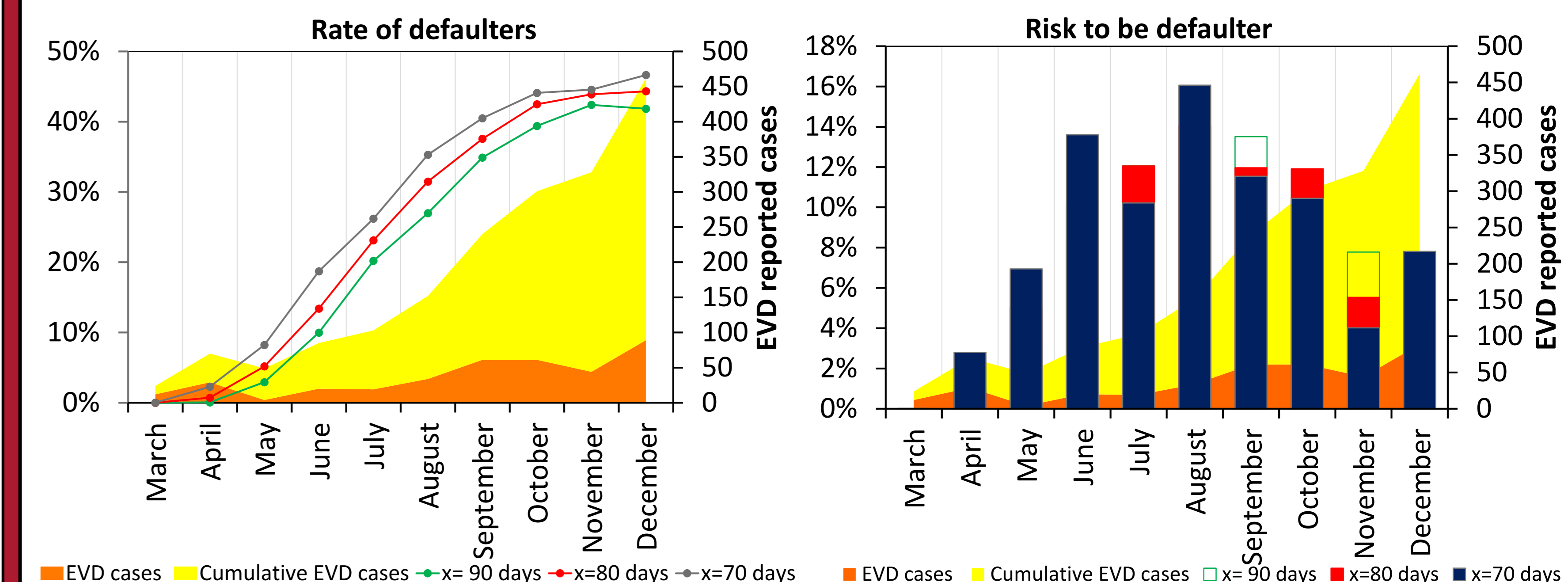
Number of ART-patients attending Donka National Hospital during January to December 2014 compared to EVD cases reported in Conakry health district (WHO data)



Monthly number of ART-patients attending the pharmacy unit for the first time during the study period declined significantly over time ($p=0.0003$).

When the length of time $x=80$ or 90 days, the number of «active in care» declined significantly from June to December ($p<0.05$). This period corresponds to the midst of EVD outbreak in Conakry health district.

Defaulters among ART-patients attending Donka National Hospital during January to December 2014 compared to EVD cases reported in Conakry health district (WHO data)



Regardless of the length of time x , the rate of defaulters rose from 0-2% to 42-47% between April to December ($p<0.0001$).

Regardless of the length of time x , the highest risk to be defaulter was during the midst of the EVD outbreak.

Conclusion

- This is the first study that evaluates the indirect impact of EVD outbreak on the continuum of care among ART-patients in Guinea;
- We found that: i) the number of «active in care» and the number of ART-patients attending DNH at the first time during the year 2014 decreased significantly over time, particularly in the midst of EVD outbreak; and ii) about 42-47% of ART-patients attending DNH during the year 2014 were defaulters at the end of December 2014;
- The results of this study suggest that health-seeking behavior of patients with chronic disease such as HIV has been negatively affected during EVD outbreak.
- New strategies are needed, not only to stop EVD outbreak, but also to limit its indirect effects on the continuum of care. For example, therapeutic education needs to be strengthened and adapted according to patient's request.