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Alcohol use and antiretroviral adherence among PLHIV in an ART centre of Kathmandu, Nepal

Upendra Dhungana

District Public Health Office, Nepal

Alcohol use is known to have higher prevalence among HIV infected individuals. Hazardous use of alcohol in many studies is negatively associated with the adherence to antiretroviral therapy. Use of alcohol and ART adherence among PLHIV is inadequately explored in Nepalese context. This study aimed at identifying the level of alcohol use and its relationship with adherence among PLHIV receiving ART.

Methods: A cross-sectional study was conducted among 205 PLHIV of age 18 years or more at the ART centre of Sukraraj Tropical and Infectious Disease Hospital Teku, Kathmandu who came to refill monthly medicine. Systematic random sampling technique was used to select the participants. Self-reported adherence questionnaire was used to get the level of adherence, Alcohol Use Disorder Identification Test (AUDIT) with five questions was adopted for screening the hazardous alcohol use. Those who took more than 95% of the prescribed doses were considered as adherent.

Results: Among all respondents, about one third were female, majority were from the age group 25-34 years, 37% used memory aid, about half experienced stigma and or discrimination, 20% had Injecting Drug Use (IDU) background. About 86% of the respondents were adherent to ART in four days recall. About one third of the respondents were alcohol users and among them, 40% had hazardous use of alcohol. Those having hazardous use of alcohol were four times (adjusted OR=4.603, 1.27-16.620) more likely to be non-adherent as compared to those who had not hazardous use of alcohol. Multivariate analyses adjusted ethnicity, Knowledge on dangers of non-adherence, subjective feeling of own health, use of memory aid, IDU background, treatment substitution and depression category.

Conclusions: Hazardous use of alcohol was independently associated with non-adherence. Screening at the start of the treatment and intervention targeting alcohol use may improve HIV outcomes in individuals with hazardous alcohol use.

udhungana@gmail.com