

TITLE

Concordance of self-reported and point-of-care biomarkers of alcohol use measures among older adults with HIV in middle-income countries, the Sentinel Research Network of IeDEA

PRESENTER

Melissa Stockton

AUTHORS

K.E. Lancaster¹, M. Stockton², J.A. Hahn³, T. Chanyachukul⁴, E. Kwobah⁵, H. Byakwaga⁶, P. Carrieri⁷, G. Murenzi⁸, H. Pera Ramirez¹⁰, A. Haas¹¹, A. Mandiriri¹², I. Marbaniang¹³, A. Jaquet¹⁴, A. Parcese²

INSTITUTIONS

¹The Ohio State University, Columbus, United States, ²University of North Carolina at Chapel Hill, Chapel Hill, United States, ³University of California San Francisco, San Francisco, United States, ⁴TREAT Asia/amfAR – The Foundation for AIDS Research, Bangkok, Thailand, ⁵Moi Teaching and Referral Hospital, Eldoret, Kenya, ⁶Mbarara University ISS Clinic, Mbarara, Uganda, ⁷Aix Marseille, France, ⁸Research for Development (RD Rwanda) and the Rwanda Military Hospital, Kigali, Rwanda, ⁹National Institute of Infectious Diseases Evandro Chagas-Oswaldo Cruz Foundation (INI/FIOCRUZ), Rio de Janeiro, Brazil, ¹⁰Instituto Nacional de Diagnóstico y Referencia Epidemiológicos, Secretaría de Salud, México City, Mexico, ¹¹Institute of Social and Preventive Medicine (ISPM), University of Bern, Switzerland, ¹²Newlands Clinic, Harare, Zimbabwe, ¹³BJ Government Medical College-JHU Clinical Research Site, Maharashtra, India, ¹⁴INSERM, Bordeaux, France

BACKGROUND: Measuring alcohol use is challenging within HIV care services, particularly in low resource settings. Self-measurements of alcohol use are rapid and inexpensive yet highly susceptible to mismeasurement. Understanding the concordance of point-of-care (POC) urine biomarkers and their concordance with self-report will inform strategies for alcohol use measurement in people with HIV (PWH) in low- and middle-income countries.

METHODS: We analyzed cross-sectional data from the International Epidemiology Database to Evaluate AIDS (IeDEA) Sentinel Research Network (SRN) cohort of PWH aged ≥40 years from HIV clinics within the Asia-Pacific, Central/Latin America, and Africa. We assessed concordance of self-reported alcohol use and POC urine ethylglucuronide (uEtG) testing (alcohol detectable at 100 ng/ml). We examined the associations between self-reported alcohol measures and uEtG using mixed-effect logistic regression models (age and sex (fixed) and clinic site (random)). We fitted 5 models of uEtG positivity: alcohol use frequency, number of drinks per week, binge drinking frequency, unhealthy alcohol use (AUDIT-C ≥3 for women, ≥4 for men), and possible alcohol use disorder (yes/no). (n=15 for men).

RESULTS: Of the 2059 participants, 46% (n=945) were men, 52% (n=1,067) reported drinking alcohol, and 20% (n=406) reported binge drinking. A total of 251 participants (12%) tested uEtG positive, with 140 (56%) reporting unhealthy drinking and 111 (44%) reporting binge drinking. Concordance of self-reported unhealthy alcohol use and uEtG was 82% (kappa=0.32) with differences of 87% (kappa=0.29; men: 75%; kappa=0.17). In multivariate models, all measures of self-reported alcohol use were associated with uEtG.

CONCLUSIONS: Though lower among men when compared to women, the overall concordance between self-reported urine POC biomarker was moderate. Alternative biomarkers with longer detection windows should be used to validate and augment self-reported measures. Further approaches for incorporating objective biomarkers should be explored for and interventional efforts addressing alcohol use among PWH in low resource settings.