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TITLE

Sociodemographic and HIV care correlates of substance use and symptoms of mental disorders among PWH aged and middle-income countries in the Sentinel Research Network of leDEA

PRESENTER

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BACKGROUND: Symptoms of mental disorders and hazardous substance use (HSU) are common among people with associated with poor HIV care outcomes. Research into common mental disorders (CMDs) and HSU among PWH in low income countries (LMIC) remains limited.

METHODS: We analyzed baseline data from the International epidemiology Databases to Evaluate AIDS (leDEA) Sentinel Network cohort of PWH aged ≥40 years on ART at eight HIV clinics in Brazil, Côte d'Ivoire, India, Kenya, Mexico, Rwanda Zimbabwe. We estimated the prevalence of hazardous alcohol use (HAU) (AUDIT-C =3 for women, =4 for men) and hazardous drug use (HDU) (ASSIST >3 for cannabis, cocaine, amphetamines, inhalants, sedatives, hallucinogens, or opioids), as well as symptoms of depression (PHQ-9 =10), anxiety (GAD-7 =10), and post-traumatic stress disorder (PTSD) (PCL-5 =33). Log binomial mode association between sociodemographic and HIV care characteristics and HSU and symptoms of CMDs.

Table 1. Prevalence of HSU and symptoms of CMDs

n (%)	Total (n=2074)	Men (n=956)	Women (n=1118)
Depression	304 (15)	109 (11)	195 (17)
Anxiety	215 (10)	92 (10)	123 (11)
PTSD	129 (6)	63 (7)	66 (6)
Hazardous alcohol use	409 (20)	257 (27)	152 (14)
Hazardous drug use	74 (4)	69 (7)	5 (0.4)

RESULTS: Of 2,074 participants, the prevalence of HAU and HDU was 20% and 4%, respectively (Table 1). The prevalence symptoms of CMDs varied by sex, age, marital status, education, and income, as well as HIV care characteristics (Table 2). The prevalence of depressive symptoms was higher among women than men (PR: 1.5, 95% CI:1.2-1.9) while the prevalence of HAU (PR: 0.5, 95% CI:0.3-0.8) and HDU (PR: 0.50, 95% CI:0.31-0.80) was lower among women than men.

Table 2. Prevalence ratios of sociodemographic and HIV care characteristics with HSU and symptoms of CMDs

Characteristic	Depression PR (95% CI)	Anxiety PR (95% CI)	PTSD PR (95% CI)	HAU PR (95% CI)	HDU PR (95% CI)
50+ years old (Ref: 40-49)	0.86 (0.70-1.05)	0.77 (0.60-0.99)	0.73 (0.52-1.02)	0.81 (0.68-0.97)	0.51 (0.31-0.80)
Female (Ref: Male)	1.51 (1.22-1.88)	1.14 (0.89-1.48)	0.90 (0.64-1.25)	0.51 (0.42-0.61)	0.31 (0.21-0.45)
Married/Partnered (Ref: Not married/partnered)	0.55 (0.44-0.68)	0.59 (0.45-0.77)	0.47 (0.33-0.67)	0.97 (0.82-1.15)	0.71 (0.51-1.00)
≥Secondary education (ref: ≤Primary)	0.89 (0.72-1.10)	0.95 (0.73-1.23)	1.22 (0.86-1.74)	1.44 (1.19-1.74)	5.4 (3.1-9.1)
≥\$80 Monthly income (Ref: <80)	0.80 (0.65-0.99)	1.11 (0.85-1.45)	1.02 (0.73-1.44)	1.60 (1.22-2.09)	6.1 (3.8-9.8)
10+ years on ART (Ref: <10 years)	1.05 (0.85-1.30)	1.02 (0.78-1.31)	0.94 (0.67-1.31)	0.67 (0.56-0.80)	0.81 (0.61-1.07)
Never diagnosed with AIDS (Ref: Ever)	0.89 (0.72-1.09)	0.69 (0.54-0.89)	0.90 (0.64-1.27)	1.04 (0.86-1.24)	0.71 (0.51-1.00)

CONCLUSIONS: Routine screening and treatment for CMDs and HSU among PWH in LMICs are urgently needed, with particular attention for groups more vulnerable to mental or substance use disorders.

