

MEETING ABSTRACT

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Nurse-targeted care for HIV positive persons with CD4<100 improved time to ART initiation and retention in Uganda

Agnes N Kiragga^{1*}, Elizabeth Nalintya¹, Bozena Morawski², Joanita Kigozi¹, Benjamin J Park³, Jonathan E Kaplan³, David R. Boulware², David B Meya^{1,2,4}, Yukari C Manabe⁵

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Background

HIV testing and retention in care treatment are key strategies towards an AIDS free generation. Immediate treatment of HIV patients with the lowest CD4 T cell counts is critical given their high rates of pre-antiretroviral therapy mortality. We evaluated the impact of adding an additional nurse-counsellor on HIV outcomes among patients enrolled in care in 7 urban public clinics in Kampala, Uganda.

Methods

One additional research nurse per clinic was specifically tasked with identifying and tracking HIV-infected persons with CD4<100 cells/ μ L who were lost, and expediting ART initiation among patients enrolled after July 2012. Data were also retrospectively collected on all patients with CD4<100 cells/ μ L that registered at these clinics in the latter six months of 2011. We compared time from CD4 blood draw to ART initiation, frequency of CD4 testing and 6 month retention-in-care by time period. Analyses of categorical and continuous variables were conducted using X² and Mann-Whitney tests.

Results

A total of 258 patients in the 2011 cohort and 593 in the 2012 cohort completed 6 months from clinic registration. Median age of patients in both cohorts was 32 years and 55% were female. Median CD4 cells/ μ L [Interquartile, IQR] count in the 2011 cohort was 34 [13, 61] and 43 [19, 71] in 2012 ($p < 0.002$). Median days from CD4

blood draw to ART initiation reduced from 42 [IQR: 28, 56] in the 2011 to 33 [IQR: 21, 47] in 2012, $p < 0.001$. Six-month retention in care was 62.0% (160/258) in 2011 cohort compared to 75.9% (450/593) in 2012 ($p < 0.001$). Among the patients retained in care, 24.4% (39/160) received a CD4 count test at 6 months versus 53.3% (240/450) in the 2012 cohort.

Conclusion

The addition of one nurse per clinic to identify and follow severely immune-compromised new clinic patients with CD4<100 led to improved patient care and better outcomes. Funder: The study is an Implementation Science project funded by CDC.

Authors' details

¹Infectious Diseases Institute, College of Health Sciences, Makerere University, Kampala, 256, Uganda. ²Division of Infectious Disease and International Medicine, Department of Medicine, University of Minnesota, Minneapolis, MN, 55455, USA. ³Division of Global HIV/AIDS (DGHA), Center for Global Health (CGH), Centers for Disease Control and Prevention, Atlanta, GA, 30333, USA. ⁴School of Medicine, College of Health Sciences, Makerere University, Kampala, 256, Uganda. ⁵Division of Infectious Diseases, Department of Medicine, Johns Hopkins University School of Medicine, Baltimore, MD, 21205, USA.

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* Correspondence: agnes.kiragga@gmail.com

¹Infectious Diseases Institute, College of Health Sciences, Makerere University, Kampala, 256, Uganda

Full list of author information is available at the end of the article