

# Perception of Spanish HIV Physicians' towards diagnosis and management of neuropsychiatric comorbidities in people with HIV

P084

Perez Valero, I.<sup>1</sup>; Blanch Andreu, J.<sup>2</sup>; Martínez Chamorro, E.<sup>2</sup>

<sup>1</sup>Hospital Universitario La Paz, Madrid, Spain; <sup>2</sup> Hospital Clínic, Barcelona Spain;

## Background

The degree of compliance of clinical guidelines recommendations for diagnosing and managing neuropsychiatric comorbidities (NPC) in people with HIV (PWH) is unknown in our setting.

## Objective

- Examine the opinion, knowledge, and attitudes of non-psychiatrists who care for HIV+ patients concerning the management of psychiatric pathology.
- Evaluate possible differences between physicians in the management of psychiatric pathology in relation to their sex, age, years of care activity, healthcare environment.

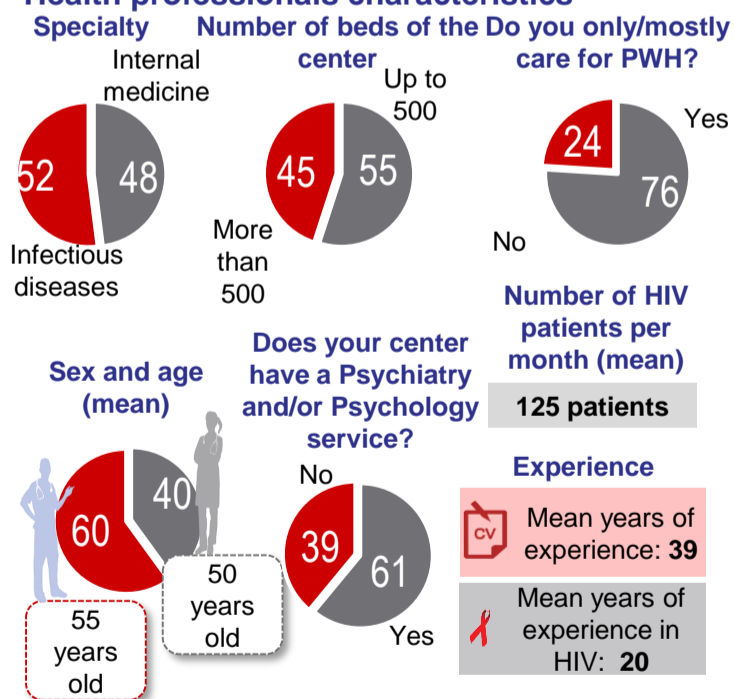
## Methods

We designed and validated a structured 20 minutes interview for HIV physicians to evaluate compliance of clinical recommendations for diagnosing and managing NPC in PWH and identify gaps for improvement. This interview was completed by March 2020 by a geographically representative sample of Spanish HIV physicians. Through closed questions, physicians were asked about:

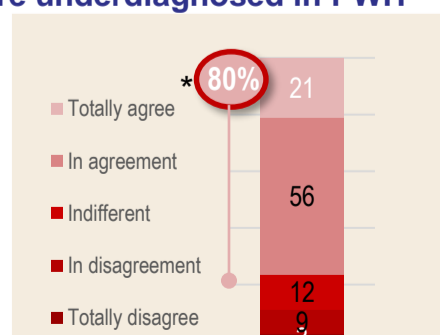
- how they perceive the impact of NPC
  - their ability to identify NPC
  - thoughts on initial management should be
  - knowledge of neuropsychiatric disorders
- Physicians included in the study must have:
- have more than four years of experience
  - be responsible of the treatment and follow-up of the patient
  - have more than 50 HIV+ patients per month.

## Results

### Health professionals characteristics



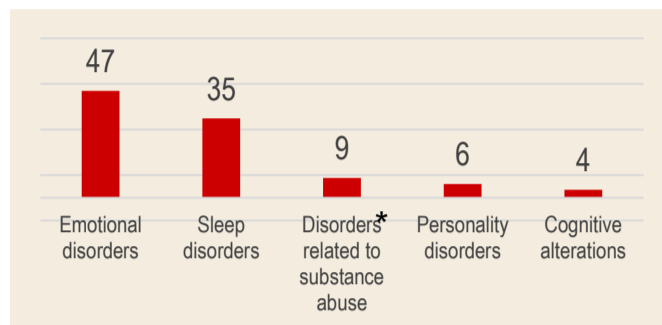
### NPC are underdiagnosed in PWH



\* Health professionals who had a psychiatry and psychology professional dedicated to HIV reported to be totally agree with the underdiagnosis of PWH (27% vs. 11%, significant difference between health professionals with or without psychiatry and/or psychology service, respectively)

## Results (cont'd)

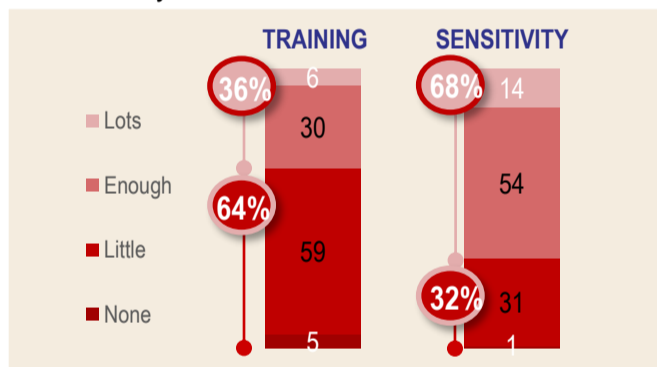
### Most frequent CNS manifestations reported in clinical practice



- What are the most frequent CNS manifestations reported in your clinical practice?
  - \* Health professionals who had a psychiatry and psychology professional dedicated to HIV and worked in big centres reported the underdiagnosis of disorders related to substance abuse (14% vs. 0%, significant difference between health professionals with or without psychiatry and/or psychology service, and 17% vs. 2%, significant difference between health professionals working on centers ≤500 beds and >500 beds, respectively)

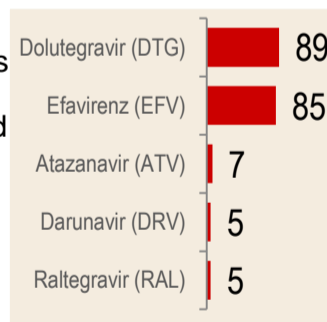
### Training and sensitivity for the detection of NPC in HIV patients

- Most of the physicians reported to have little or no training to detect NPC but having the sensitivity to detect them.

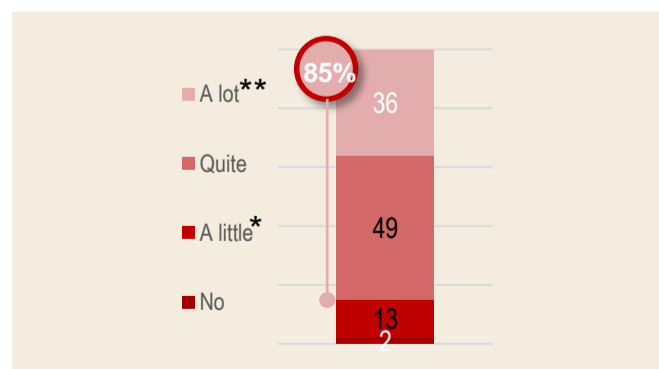


### Antiretroviral drugs associated with the appearance of NPC

- Most of the physicians reported DOLUTEGRAVIR and EFAVIRENZ as the treatments most frequently associated with NPC.

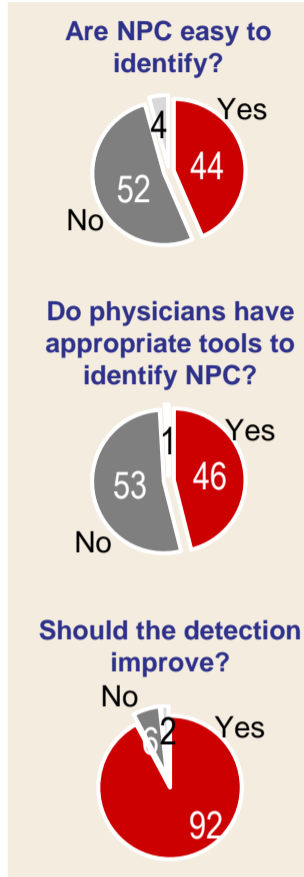


### The choice of treatment is conditioned by the toxicity profile of antiretroviral drugs



- \* Health professionals who had a mean number of PWH over 110 patients reported to condition a little the choice of treatment due to its toxicity profile (20% vs. 5%, significant difference between health professionals treating >110 HIV patients and those who treat ≤ 110, respectively)
- \*\* Women health professionals reported to condition a lot the choice of the antiretroviral treatment due to its toxicity profile (48% vs. 29%, significant difference between health professionals according to sex: female vs. male, respectively)

### Identification of NPC in PWH



Health professionals with more than 50 years of age reported being easy to identify (52% vs. 32%, significant difference between health professionals >50 and ≤ 50 years old, respectively)

Health professionals considering that improvement of detection of NPC in PWH was not necessary were mainly dedicated to PWH (8% vs. 0%, significant difference between health professionals mainly dedicated to PWH and health professionals who were not mainly dedicated to PWH, respectively)

## Conclusions

- According to the health professionals consulted:
  - NPC are underdiagnosed in PWH
  - Emotional and sleep disorders are the most frequent NPC
  - Even though without proper training, health professionals have the sensitivity to detect NPC in PWH.
  - DOLUTEGRAVIR and EFAVIRENZ are the treatments most frequently associated with NPC
  - The toxicity profile of the antiretroviral drugs condition the choice of the treatment
  - The detection of NPC in PWH is not easy
  - Health professionals do not have appropriate tools to identify NPC in PWH
  - The detection of NPC in PWH must improve

## Acknowledgments

We extend our thanks to all the health professionals consulted for their implication and good willingness to contribute to this study.

## Disclosures

This work was supported by Gilead Sciences.

