

THE IMPACT OF COVID-19 EPIDEMIC ON HIV CARE IN CROATIA

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Background

HIV care in Croatia is centralized and all people living with HIV (PLWHIV) are treated at the University Hospital for Infectious Diseases (UHID) in Zagreb; the hospital pharmacy also dispenses antiretrovirals (ART). In response to the initial phase of the COVID-19 pandemic a lockdown has been imposed between 16th March to 27th April 2020. UHID became the central hospital for treatment of COVID-19 in the Zagreb area. We aim to quantify the impact of COVID-19 epidemic on HIV care at UHID.

Materials and methods

We reviewed data from all interactions of PLWHIV with the HIV treatment center from February 3rd till June 28th 2020. The following was analyzed: phone interactions, office visits, number of viral load (VL) tests performed and interactions that resulted in dispensing ART. Data on HIV care was extracted from the local database and periods March-June 2018, 2019 and 2020 were compared.

Results

The COVID-19 epidemic in Croatia started on February 25th. The major increase in confirmed COVID-19 cases happened from 16th to 22nd March when 205 cases were confirmed and the peak of outbreak was recorded from 30th May to 5th April when the number of cases was 469. HIV care office visits declined for >50% in March compared to February (average 46 vs. 22.5 per week, respectively). An average of 8.5 shipments of ART per week were made in February and 31 shipments per week in March. The maximum number of ART shipments (N=45) and phone consultations (N=415) were made in a week of epidemic acceleration (16th to 22nd March). There were fewer viral load measurements in March-June 2020 compared to 2019 and 2018 and fewer newly HIV-diagnosed persons entered care in 2020 (Figure).

Conclusions

During the first phase of COVID-19 outbreak a transition from face-to-face communication to mainly telephone consultations was observed. Fewer VL measurements were done and a drop in newly diagnosed persons entering care was observed.

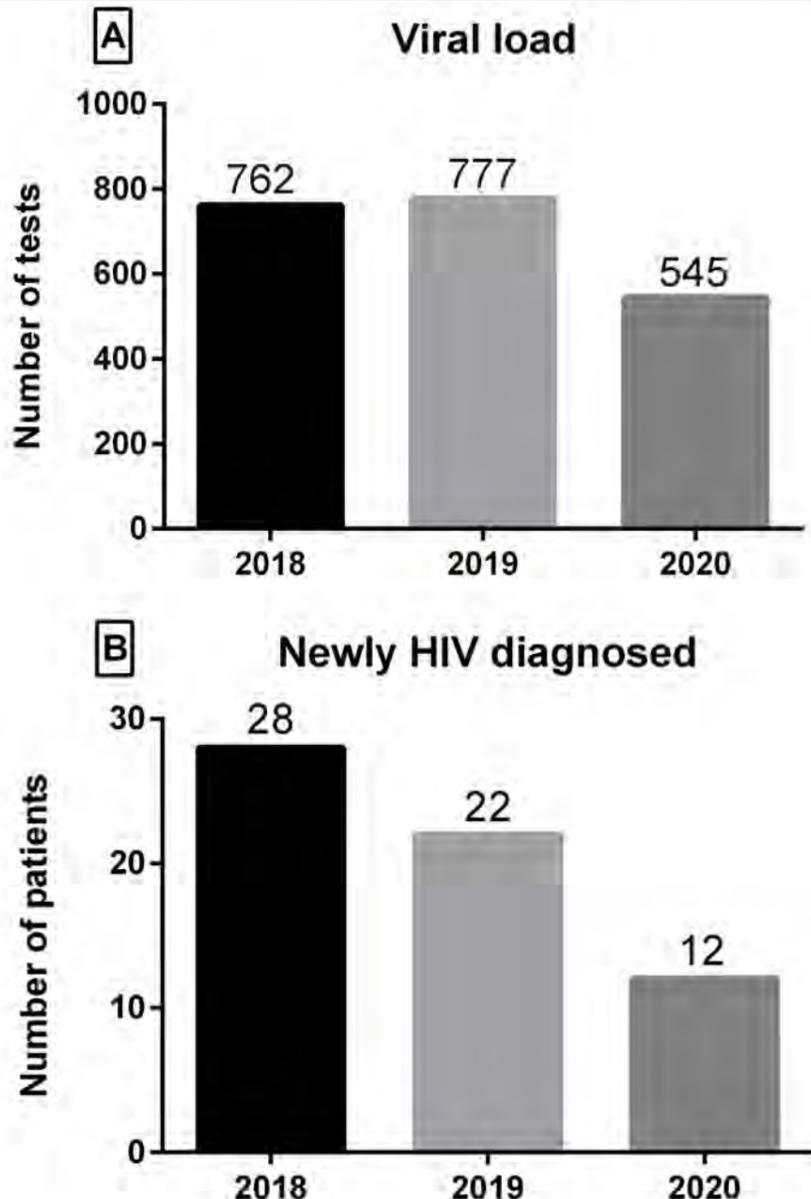


Figure. Number of viral load measurements (A) and persons newly diagnosed with HIV (B) in the period March-June 2018, 2019 and 2020.