

Importance of screening for depression in people living with HIV in Ukraine

G. Momotyuk¹, Y. Lopatina¹, H. Kalandiia², A. Zakowicz³

AHF Ukraine¹, Kyiv City Narcology Clinical Hospital "Socioterapy"², AHF Europe³

Background

People living with HIV (PLHIV) are more likely to have depression, impacting quality of life, retention in care, and possibly impairing health outcomes. In Ukraine, routine depression screening for PLHIV is not widely used and mental care initiatives for PLHIV are rare.

Methods

A cohort of 976 HIV positive patients with positive depression screening result was studied between May 2018 and August 2019 to investigate distribution of depression. Patients were screened for anxiety and depression and were referred to psychiatrist. 31 patients with depression and VL >1,000 were selected for follow-up on treatment response one year after depression treatment. Univariate and bivariate analysis were performed. Logistics regression was used to assess odds of patients being injecting drug users and having delayed ART initiation (≥one year).

Results

Most patients who underwent depression screening were on ART (82.61%)(Table1). Of those 355 with depression (Table 2), 86 (24.23%) received no related treatment, more women were depressed (61,97%, p <.0001). Among people with positive depression screening result who were referred to psychiatrist, 19.9% did not have access to proper consultation and also had unavailable CD4 (p <.0001). People using drugs had higher odds (OR 1.351, CI 1.040; 1.755) of delayed ART. Of 31 people, who were selected for follow-up on treatment response, 20 had suppressed VL to <1,000 in one year.

Conclusions

Results underline the need to support early ART initiation for PLHIV with mental disorders and addiction in Ukraine, where attention towards the issue is currently low. Focus should be placed on training and motivating medical personnel on depression screening in routine HIV care in Ukraine with a focus on PLHIV who delay treatment initiation.

Table. 1 Description of study population

	N (* mean)	% (* SD)
Depression		
No depression	355	36,37
No diagnosis	334	34,22
	287	29,41
Gender		
Female	448	45,9
Male	528	54,1
Age		
18-24 years	14	1,43
25-34 years	188	19,26
35-50 years	657	67,32
>50 years	117	11,99
CD4 counts		
<=200	297	30,43
200-350	164	16,8
>350	386	39,55
NA	19	13,22
ART		
On ART	798	82,61
Not on ART	168	17,39

Table 2. Characteristics of HIV positive patients with depression

	Study population (n=976)	Depression diagnosis (n=355)	p
Gender			
Female	448 (45,9%)	220 (61,97%)	0,0001
Male	528 (54,1%)	135 (38,03%)	
Delayed ART initiation			
ART same year	360 (36,89%)	157 (44,23%)	
ART delay= 1 year	87 (8,91%)	37 (10,42%)	
ART delay > 1 year	349 (35,78%)	124 (34,93%)	
No ART/no data on ART initiation	180 (18,44%)	37 (10,42%)	
Late presenters			
No (CD4>350)	461 (54,43%)	161 (49,09%)	0,0401
Yes (CD<350)	386 (45,57%)	167 (50,91%)	
Treatment access for mental disorder			
Yes	554 (6,76%)	269 (75,77%)	0,0001
No	422 (43,24%)	86 (24,23%)	