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ePoster Viewing

Virology: AIDS and HIV infection

TB/HIV co-infection among individuals attending Moscow tuberculosis clinic, Russia

M. Nosik¹, I. Rymanova², S. Sevostyanihin², N. Sergeeva², K. Ryzhov³, A. Sobkin²

¹I.I. Mechnikov Research Institute for Vaccines and Sera, Moscow, Russia

²G.A. Zaharyan Moscow Tuberculosis Clinic- Department for treatment of TB patients with HIV infection, Moscow, Russia

³I.I. Mechnikov Research Institute of Vaccines and Sera- Department of Virology, Moscow, Russia

Objectives: Tuberculosis (TB) alongside with HIV-infection is still one of the major public health issues worldwide. The risk of developing TB in persons with compromised immune systems, such as people living with HIV is 12-20 times greater than among those without HIV infection. Approximately 20% of deaths among people with HIV are due to TB. The problem of TB and TB/HIV co-infection is a growing problem in Russia which has the 11th highest burden of TB and the 9th highest burden of HIV-infection in the world. Early TB/HIV diagnosis and treatment can reduce a person's risk of dying by 50%. The goal of the work was to study TB incidence rate among HIV-positive individuals in order to evaluate the effectiveness of early TB testing.

Methods and Materials: Over the period of 2013 a retrospective cohort study was conducted among 102 patients with TB/HIV co-infection who attended the Moscow Tuberculosis Clinic and who agreed to participate in the study. Epidemiological, clinical, microbiological data was collected.

Results: The majority of the patients was male (71%) and 63% of those were IDUs; median age 36,3 years. Among the women median age was 38,9 years and 81% were infected via heterosexual route. Most patients had disseminated pulmonary tuberculosis in the phase of infiltration/ decay (37,5%) and infiltrative TB (32,9%); 29,6% patients had tuberculosis of intrathoracic lymph nodes. Out of 102 individuals diagnosed with TB/HIV co-infection 68(67%) of patients prior to being diagnosed with TB were known to be infected with HIV; of which only 20(29%) patients were on HAART. Although they all had the severe symptoms the patients did not seek medical assistance. Of those patients 54% had CD4<200cell/ml and viral load 581.828-2.449.491 copies/mL. Twenty nine (33%) patients attended Clinic for TB treatment and were unaware of their HIV-positive status. On the time of TB diagnosis they had Stage IV of HIV-infection. Five patients diagnosed with TB/HIV-infection refused to undergo HAART and left the clinic.

Conclusion: TB incidence rate among HIV-positive individuals is rather high (67%) which indicates insufficient effectiveness of programmes for early TB testing. Reinforcement of TB diagnosis is necessary among HIV-infected individuals. Also the patients' refusal to undergo medical treatment remains a persistent problem and shows the poor knowledge about the importance of earlier access to HIV/ TB treatment. It is urgently needed to increase HIV/ TB education among all groups of population.