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HIV/AIDS

**Efficacy and safety of an efavirenz-containing regimen in the management of human immunodeficiency virus (HIV) in a psychiatric prison population**

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**Objectives:** The primary objective of our study was to evaluate whether an efavirenz-containing regimen was safe to continue in patients with underlying mood disorders or schizophrenia compared to patients without these disorders. Secondary objectives compared CD4 count and viral suppression at baseline and 12 months as well as the number of patients that had to switch from an efavirenz-containing regimen out of concern for worsening psychiatric effects.

**Methods:** We performed a retrospective study at the University of Illinois Hospital and Health Sciences System. The study examined patient data from January 2011 to December 2012 and included HIV-positive male adults over the age of 18 years who were incarcerated at a known psychiatric prison and treated in our multidisciplinary HIV telemedicine clinic. In addition, patients were required to be on an efavirenz-containing regimen. Baseline and demographic data were collected as well as psychiatric diagnosis, baseline CD4 count and viral load, CD4 count and viral load at 12 months, psychiatric tolerability of antiretroviral therapy (ART), and whether the patient had to switch ART based on psychiatric side effects.

**Results:** A total of 31 patients were included in this analysis. Seven patients had a mood disorder, 7 patients had schizophrenia, 2 patients had a combination of a mood disorder and schizophrenia, and 15 patients did not carry a psychiatric diagnosis. Of the 16 patients with a psychiatric diagnosis receiving an efavirenz-containing regimen, 1 patient with schizophrenia had to switch to other ART due to worsening of psychiatric symptoms. Two patients without a psychiatric diagnosis had to switch from an efavirenz-containing regimen due to CNS side effects. There was no statistically significant difference between the discontinuation rates between the two groups ( $p = 0.51$ ). Baseline CD4 count and viral load was 534 (range: 158-925 cells/mm<sup>3</sup>) and 19,497 (range: undetectable-283,763 copies/mL), respectively, in patients with a psychiatric diagnosis and 586 (range: 215-1186 cells/mm<sup>3</sup>) and 9,133 (range: undetectable-136,517) copies/mL in those without any psychiatric diagnoses. At 12 months, the CD4 count in patients with a mood disorder and/or schizophrenia increased to 603 (range: 258-1016 cells/mm<sup>3</sup>) and all patients had a viral load less than 75 copies/mL. At 12 months, the group without any psychiatric disorders had a CD4 count of 571 (range: 262-961 cells/mm<sup>3</sup>) and 13 out of 15 patients had a viral load less than 75 copies/mL.

**Conclusion:** Our small study showed no differences in CNS/psychiatric side effects between those with and those without underlying mood disorders/schizophrenia. Efavirenz-containing regimens appear safe and efficacious in patients with underlying mood disorders and/or schizophrenia in a predominantly psychiatric correctional setting under close supervision and follow-up.