

Sustaining quality while scaling up adolescent ART; findings from Zimbabwe's largest adolescent cohort

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Introduction

As Anti Retroviral Treatment (ART) programmes improve survival in early life the number of adolescents in need of ART will continue to increase. Programmes will need to scale up services which address the particular needs of adolescents Here we assess the experience of such scale up in a large urban adolescent patient cohort.

Methods

Between 2004 and 2010 9,390 adults and 2,014 adolescents commenced antiretroviral therapy (ART) at Mpilo OI ART clinic, Bulawayo; supported by Médecins sans Frontières (MSF), this was Zimbabwe's first functioning ART initiation site.

A package of specific activities for adolescents was implemented in order to provide comprehensive care including active defaulter tracing, a comprehensive, specific counselling programme and social activities operating outside the clinic, such as a youth club.

In this retrospective cohort analysis all persons aged ≥ 10 and < 19 years at ART initiation were classified as adolescents. Cox's proportional hazards model was used to calculate hazards and the log rank test to assess significance.

Results

Between 2004 and 2010 a six-fold increase in adolescent ART initiations occurred. (figure 1) 12 month adolescent loss to follow increased in the first 3 years of the programme, peaking at 7%, subsequently falling to below 5% by the end of the study period.

There was no significant difference between adult and adolescent hazard of death. (HR = 0.92, $p = 0.3793$) Loss to follow up was significantly higher in adults than adolescents. (HR = 1.92, $p < 0.0005$) (figure 2)

Conclusions

These results contrast other research, which generally show adolescent outcomes to be worse than those in adults. Outcomes in expanding programmes have also been shown to suffer elsewhere.

As more HIV positive children survive into adolescence, ART programmes must scale up services for this group; we show that good results are feasible with dedicated resources.

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Figure 1: ART initiations for adults and adolescents in Mpilo OI clinic Bulawayo between 2004 and 2010.

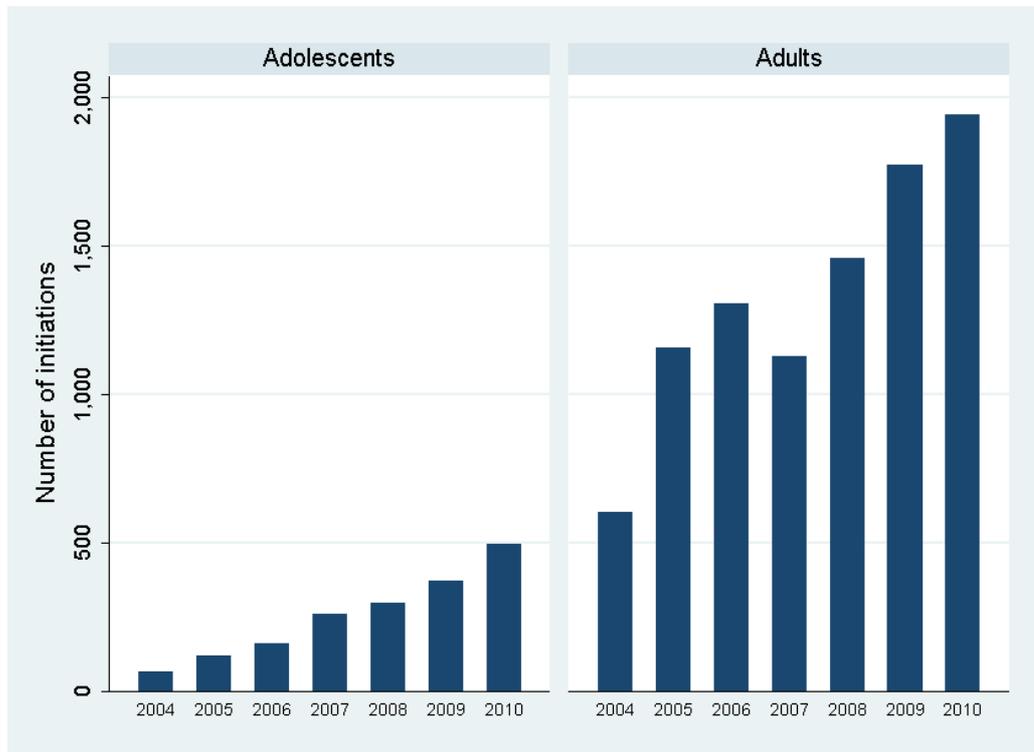


Figure 2: Kaplan Meir survival curve of time to loss to follow up in adults and adolescents who commenced ART at Mpilo OI, Bulawayo between 2004 and 2010.

