Impact of immigration on diagnosis and prognosis of HIV in Catalonia and the Balearic Islands: The PISCIS Cohort

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BACKGROUND

□ HIV infection remains a major public health concern.

In Catalonia and in Spain there have been an increase of new HIV diagnosis among migrants

Late presentation is a main concern

☐ Migration and late presentation

□ There is a lack of studies about late presentation





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OBJECTIVES

- 1. To calculate migrant status percentage of new HIV diagnosis enrolled into the PISCIS Cohort and its evolution over the period 2004-2011.
- 2. To describe socio-demographic, clinical, and epidemiological characteristics among migrants, and compare them with natives
- **3**. To determinate late presentation percentage in migrants and natives and compare its evolution trough the study period.
- 4. To identify socio-demographic, clinical, and epidemiological characteristics of late presenters among migrants.
- 5. To determine prognosis, defined as progression to AIDS/death.









Methods PISCIS Cohort

Open multicentric observational cohort study (14 hospitals)
Inclusion criteria:

- patients VIH +
- aged \geq 16 years
- newly attended in the participating centers
- Dataset updated until Dec2011:
 - N=14,675 HIV infected patients
 - 73.726 person-years of follow-up

Records of demographic, clinical, laboratory and treatment data









Methods Study population

 New HIV diagnosis between 2004 and 2011 were analyzed (4708 patients).

Variables definitiom

Migrants: born outside Spain and classified in different regions (Latin-America, West Europe and East Europe, Sub-Saharan and North Africa, North America, Asia and Others)

□ Late presentation/advanced HIV disease









Methods Other variables

HIV transmission group: MSM, heterosexual men, heterosexual woman, IDU and others

Educational level: illiteracy, primary education not finished, primary education finished, secondary education finished, and upper studies

Other variables: socio-demographic (day of birth, gender), follow-up variable (date of loss to follow up), employment status employed, unemployed), period (2004-2007, 2008-2011), Hepatitis B and C virus infection, and clinical outcomes (AIDS or death).









Methods Statistical analysis

□ Median values and interquartile ranges, and percentages.

□ Pearson's chi-squared test for categorical variables and Kruskal–Wallis test

□ Logistic regression models

Survival analysis techniques

Kaplan-Meier estimator and long-rank test.

Cox regression models









Results





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Comparison beetwen natives and migrants

Gender







Cat







Age



Age



Comparison between natives and migrants

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Transmission group

Educational level



Comparison between natives and migrants









Comparison beetwen natives and migrants

Lost to follow up











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Results



Figure 4: Graphic of advanced HIV disease percentage by migrant status and year











Comparison among migrants

Gender



Age





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Comparison among migrants

Transmission group

Educational level



<u>R</u>isk factors associated with late presentation among migrants



• Adjusted Odds Ratio for advanced HIV disease







<u>R</u>isk factors associated with late presentation among migrants



Adjusted Odds Ratio for advanced HIV disease





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<u>R</u>isk factors associated with advanced HIV disease



Adjusted Odds Ratio for advanced HIV disease





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Risk factors associated with advanced HIV disease



▲ Adjusted Odds Ratio for advanced HIV disease





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Kaplan-Meier survival estimates for AIDS /death and for death in migrants and natives

Figure 6: Kaplan-Meier survival estimates for AIDS or death by migrant status





Figure 7: Kaplan-Meier survival estimates for death by migrant status







Cox model for AIDS or death at follow up among migrants



Adjusted Hazard Ratio (AIDS/death)





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Cox model for AIDS or death at follow up among migrants



Adjusted Hazard Ratio (AIDS/death)





CONCLUSIONS

□ This is one of few studies on migration and new HIV diagnosis which considers factors associated with both late presentation and prognosis.

Most results are similar to other studies

The better outcomes reported for migrants in this study may be attributable to bias in the differential loss to follow-up and under-ascertainment of deaths in migrants.

□ This highlights the key importance of access to data sources beyond those used in traditional surveillance systems.





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