

Short term clinical disease progression in HIV-1 positive patients taking combination antiretroviral therapy: The EuroSIDA risk-score

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BACKGROUND

- Predicting HIV clinical progression using prognostic scores normally concentrates on predicting long-term clinical progression based on information known at starting cART
- It could be clinically more relevant to accurately assess the risk of clinical progression in the next 3 or 6 months at any time after starting cART, based on the laboratory results currently known

OBJECTIVES

- To develop a EuroSIDA risk-score to predict the short term risk of clinical progression (new AIDS or death)
- To validate this score in the Swiss HIV Cohort Study (SHCS)

PATIENTS (N=3338)

- Patients starting cART (defined as exactly 2 nucs, plus either a single PI, a ritonavir-boosted PI, NNRTI, or abacavir) with CD4/VL measured before starting cART
- Haemoglobin and BMI measured during follow-up

METHODS

- Poisson regression, all variables included as time-updated

THE EUROSIDA RISK SCORE

- 616 new AIDS/deaths during 18,203 PYFU
- CD4, rate of change of CD4, VL, BMI, level of anaemia, prior ARV treatment, and current ARV treatment were related to clinical progression
- EuroSIDA risk-score shown in Figure 1
- Example shown in Figure 2

A single unit increase in the current EuroSIDA risk-score was associated with a 2.70 times higher incidence of clinical progression (95% CI 2.57 – 2.85, p<0.0001)

The EuroSIDA risk-score was divided into 4 groups; <1.5, 1.5-2.99, 3-4.49 and ≥4.5. Figure 3 illustrates the chance of clinical progression within the next 3, 6 or 12 months after a clinic visit, within these 4 strata.

VALIDATION IN THE SHCS

- 4,700 patients from the SHCS satisfied the inclusion criteria and were included as the validation cohort

Figure 4 illustrates the incidence rates of new AIDS/death after stratification by current EuroSIDA risk-score in both EuroSIDA and the SHCS

In the SHCS patients, a single unit increase in the current EuroSIDA risk-score was associated with a 2.84 times higher incidence rate of clinical progression (95% CI 2.71–2.99, p<0.0001)

CONCLUSIONS

- Current CD4, viral load, level of anaemia, BMI, and rate of CD4 change were highly prognostic for new AIDS/death
- A risk-score was derived and validated on SHCS patients with good agreement
- A patient with a EuroSIDA risk-score of less than 1.5 had a 1 in 629 chance of disease progression within the next 3 months, compared to a chance of 1 in 12 for a patient whose EuroSIDA risk-score was over 4.5
- The EuroSIDA risk-score will be made publicly available on a website where relevant details can be entered and the score calculated without the need for clinicians to calculate the CD4 slope
- The EuroSIDA risk-score is highly clinically relevant for patient management, or for use as a surrogate endpoint in clinical trial design.

Figure 1

The EuroSIDA risk-score			
	<i>If current (latest)</i>		<i>If current (latest)</i>
+0	CD4 > 350/mm ³	+0.54	BMI ≤18
+0.61	CD4 201-350/mm ³	+0	BMI 18.1-25
+1.55	CD4 51-200/mm ³	-0.29	BMI > 25
+2.53	CD4 ≤ 50/mm ³		
		+0.48	CD4 slope<-25/mm ³ per 3 months
+0	Viral load < 500 copies/ml	+0	CD4 slope -25 to +25/mm ³ per 3 months
+0.15	Viral load ≥ 500 copies/ml	+0.20	CD4 slope> 25/mm ³ per 3 months
+0	No anaemia	+0	If ARV experienced prior to cART
+0.78	Mild anaemia	-0.34	If ARV naïve prior to cART
+2.05	Severe anaemia		
		+0	Taking any antiretrovirals
+0.024	x age (In years)	+1.24	Off all antiretrovirals

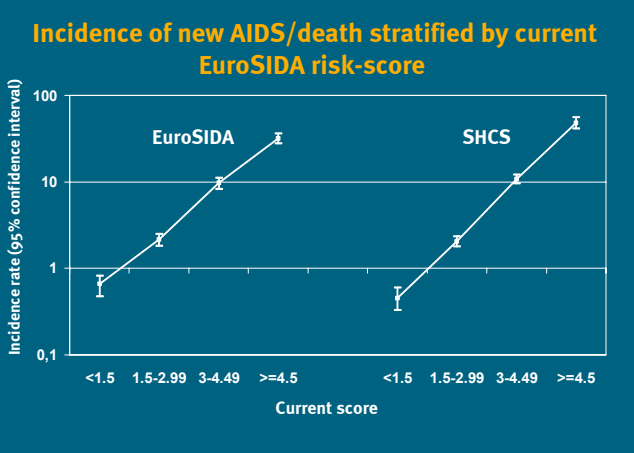
Figure 2

Example of EuroSIDA risk-score	
• 30 year old patient	
• Started cART from ARV naïve	
• Current CD4 count 400/mm ³ , viral load 50 copies/ml	
• Currently BMI of 22 and mild anaemia	
• CD4 slope increased by 15/mm ³ over the past 3 months	
• Currently taking cART	
EuroSIDA risk-score = 1.16	
0 (CD4 component)+ 0 (viral load component)+ 0.78 (mild anaemia) + 0 (BMI component)+ 0.024*30 (age)+ 0 (CD4 slope component)+ 0 (on cART)+ 0 (ARV experienced)	

Figure 3

Clinical progression according to EuroSIDA risk-score			
		Chance of New AIDS/Death	95% Confidence Interval
Within 3 months			
EuroSIDA	<1.5	1 In 607	1 In 477 to 1 In 834
Risk-score	1.5 – 2.99	1 In 185	1 In 161 to 1 In 218
	3.0 – 4.49	1 In 42	1 In 36 to 1 In 49
	≥ 4.5	1 In 13	1 In 12 to 1 In 15
Within 6 months			
EuroSIDA	<1.5	1 In 304	1 In 239 to 1 In 417
Risk-score	1.5 – 2.99	1 In 93	1 In 81 to 1 In 109
	3.0 – 4.49	1 In 21	1 In 18 to 1 In 25
	≥ 4.5	1 In 7	1 In 6 to 1 In 8
Within 12 months			
EuroSIDA	<1.5	1 In 152	1 In 120 to 1 In 209
Risk-score	1.5 – 2.99	1 In 47	1 In 41 to 1 In 55
	3.0 – 4.49	1 In 11	1 In 9 to 1 In 13
	≥ 4.5	1 In 4	1 In 3 to 1 In 5

Figure 4



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