

Improvements in all cause mortality across Europe 2002-2007 and regional differences in incidence of deaths from AIDS and non-AIDS

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Introduction

- Previous studies have documented improvements in survival after introduction of cART¹⁻³
- Uptake of cART in Eastern Europe remains low⁴ and trends in mortality in Eastern Europe not well described
- cART regimens have improved over time⁵ and fewer patients live with low CD4 counts
- Increasing trend of mortality from non-AIDS associated causes⁶

¹Mocroft et al, Lancet 1998;352:1725. ²Mocroft et al, Lancet 2003;362:22. ³Egger et al et al, BMJ 1997;315:1194. ⁴Towards Universal Access; UNAIDS 2009. ⁵Lampe et al, Arch Int Med 2006;166:521.

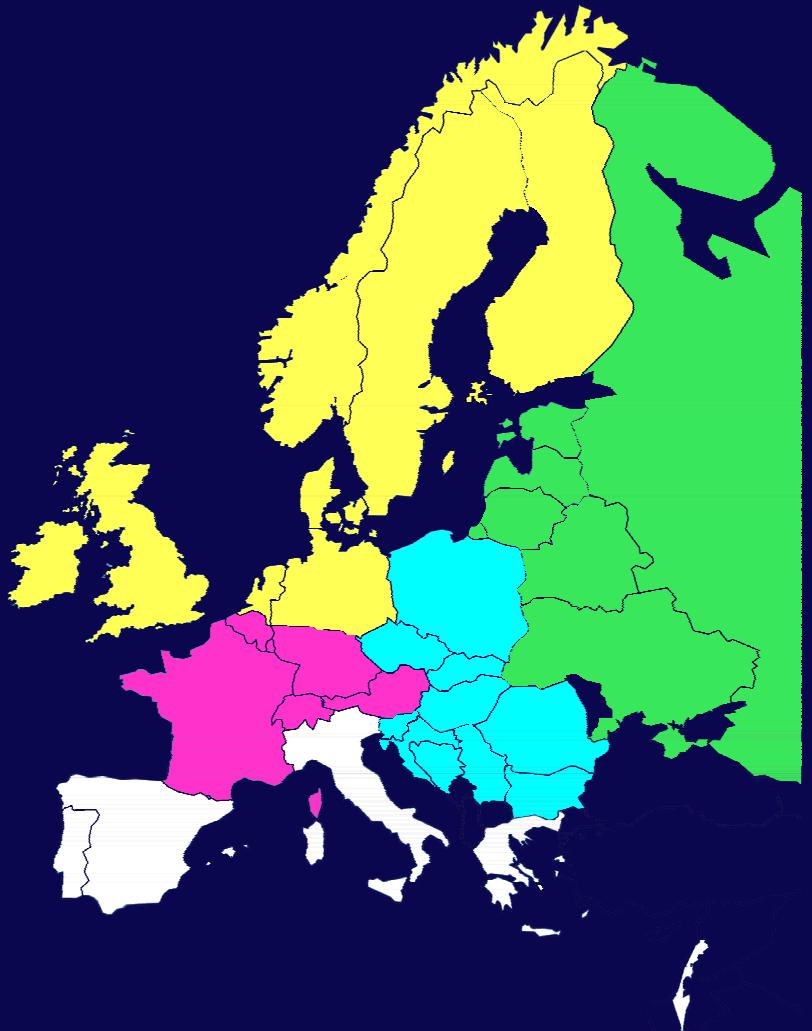
⁶Lewden et al, JAIDS 2008; 48:590.

Aims

- Determine changes in mortality 2002 – 2007
 - AIDS mortality
 - Non AIDS mortality
- Compare regions of Europe

The EuroSIDA study

- Longitudinal cohort study initiated in 1994 of 16599 HIV-infected patients from 103 centres in 35 countries across Europe, Israel and Argentina
- Study collects wide range of clinical and demographic data (see www.cphiv.dk).



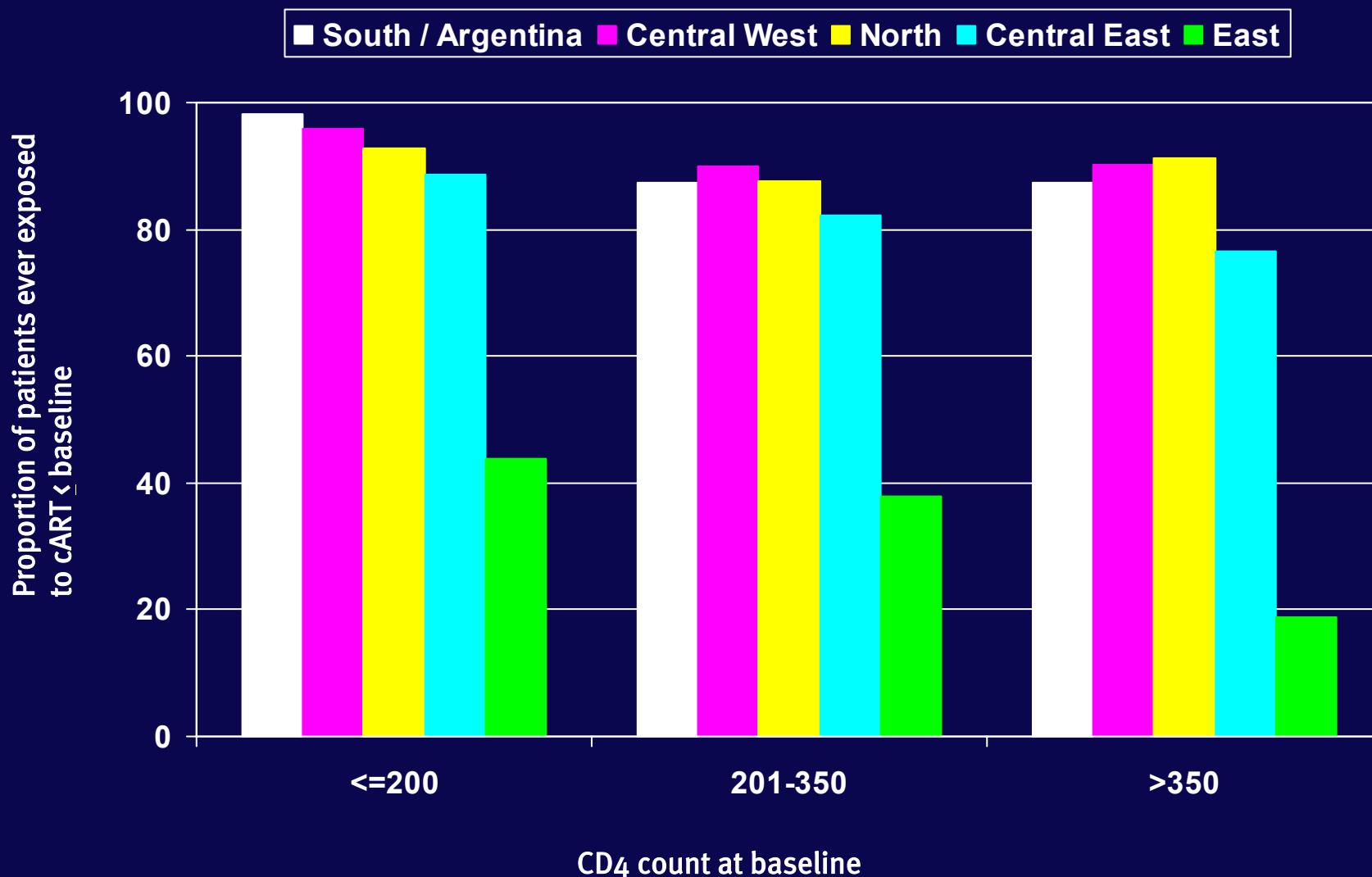
Methods

- Patients with prospective follow-up after 1 January 2002
- Baseline – later of 1 January 2002 or recruitment to study
- Follow-up censored on 1 January 2008
- Incidence rates of AIDS and non-AIDS mortality
- Poisson regression to investigate trends over time and differences between regions

Characteristics of 10799 patients

	South	C West	North	C East	East
<i>N (%)</i>	<i>3258 (30)</i>	<i>2613 (24)</i>	<i>2552 (24)</i>	<i>1201 (11)</i>	<i>1169 (11)</i>
Male	72	77	82	71	61
White	93	70	85	96	99
IDU	29	14	11	29	52
AIDS	28	34	34	24	18
VL < 500	62	70	73	65	28
<i>Median</i>					
CD4 nadir	183	150	130	161	339
CD4	437	432	410	371	420
Age	40	42	43	35	29
Baseline	Jan 02	Jan 02	Jan 02	Jan 02	June 05

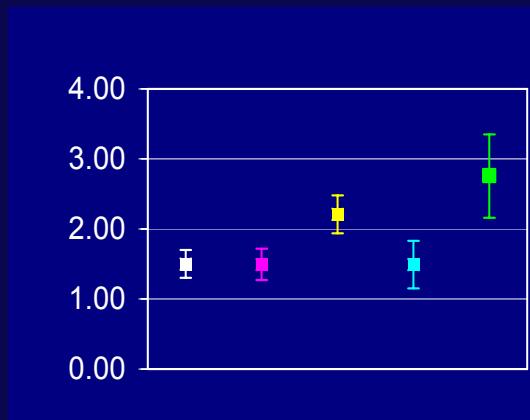
Initiation of cART at or before baseline



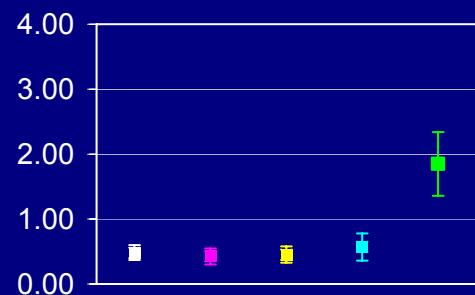
Summary of Events

South C West North C East East

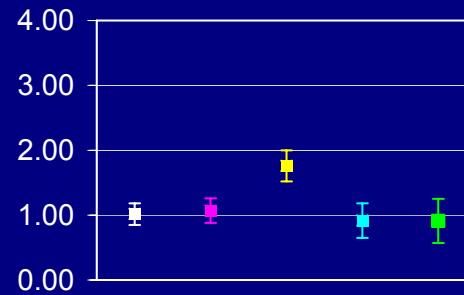
789 deaths
44671 PYFU
IR 1.77 (1.64 – 1.89)



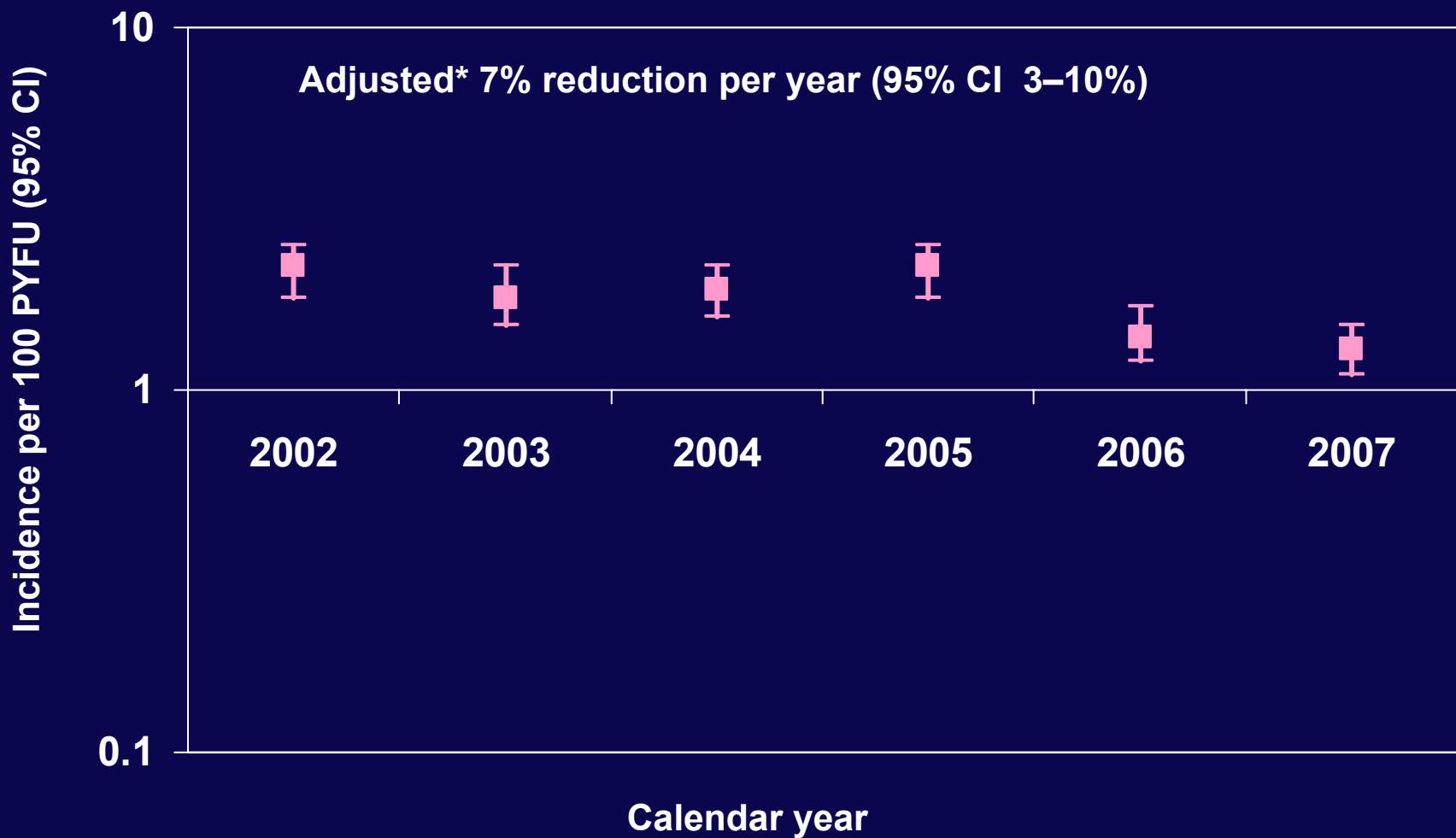
251 AIDS deaths
IR 0.56 (0.49 – 0.63)



538 non-AIDS deaths
IR 1.20 (1.10 – 1.31)



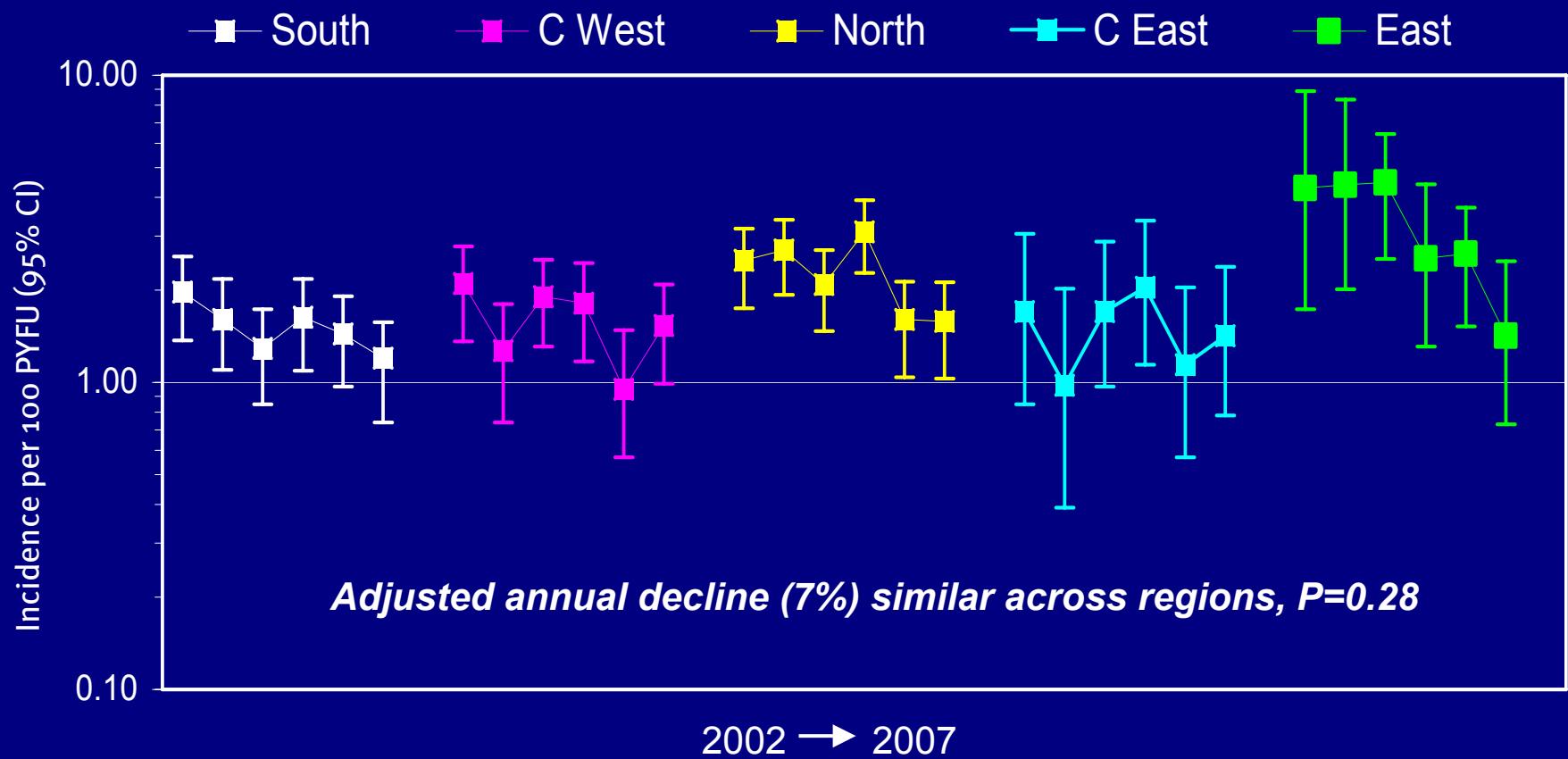
All cause mortality 2002-2007



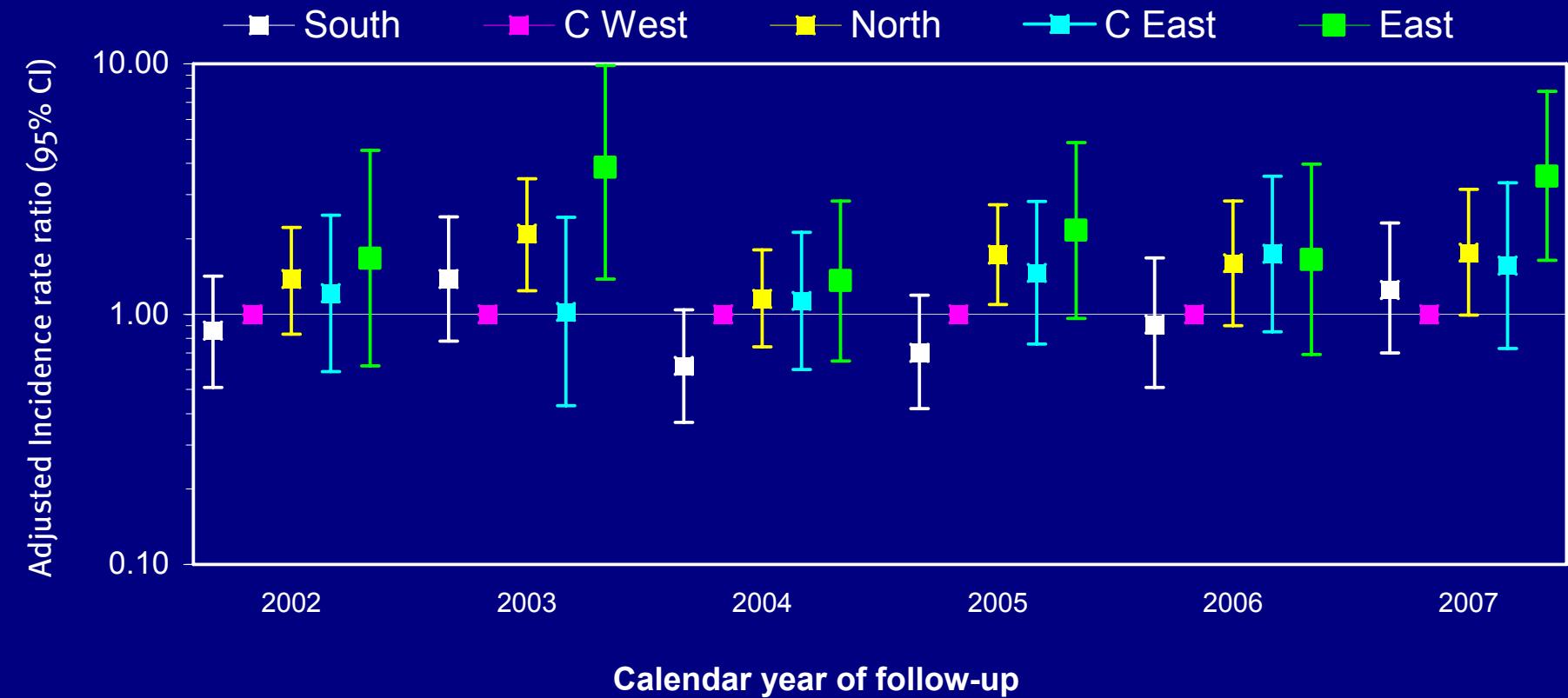
Adjusted for gender, ethnic origin, HIV exposure group, age, CD4 nadir, hepatitis B and C status*, AIDS diagnosis*, CD4* and viral load*, starting any antiretrovirals*, starting cART* and anaemia* (*time-updated).

All cause mortality 2002-2007

Stratified by region



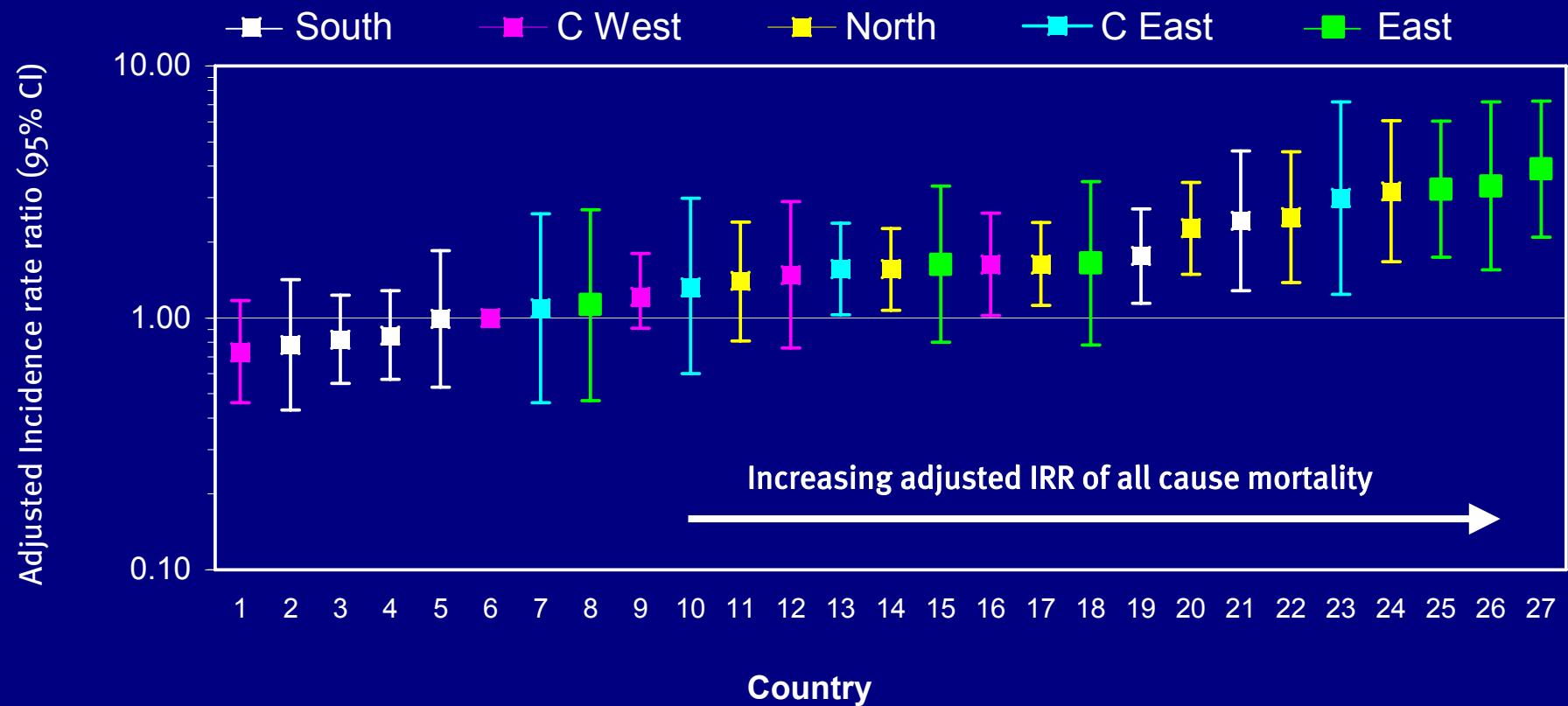
All cause mortality 2002-2007 Stratified by region



Adjusted for gender, ethnic origin, HIV exposure group, age, CD4 nadir, hepatitis B and C status*, AIDS diagnosis*, CD4* and viral load*, starting any antiretrovirals*, starting cART* and anaemia* (*time-updated).

All cause mortality 2002-2007

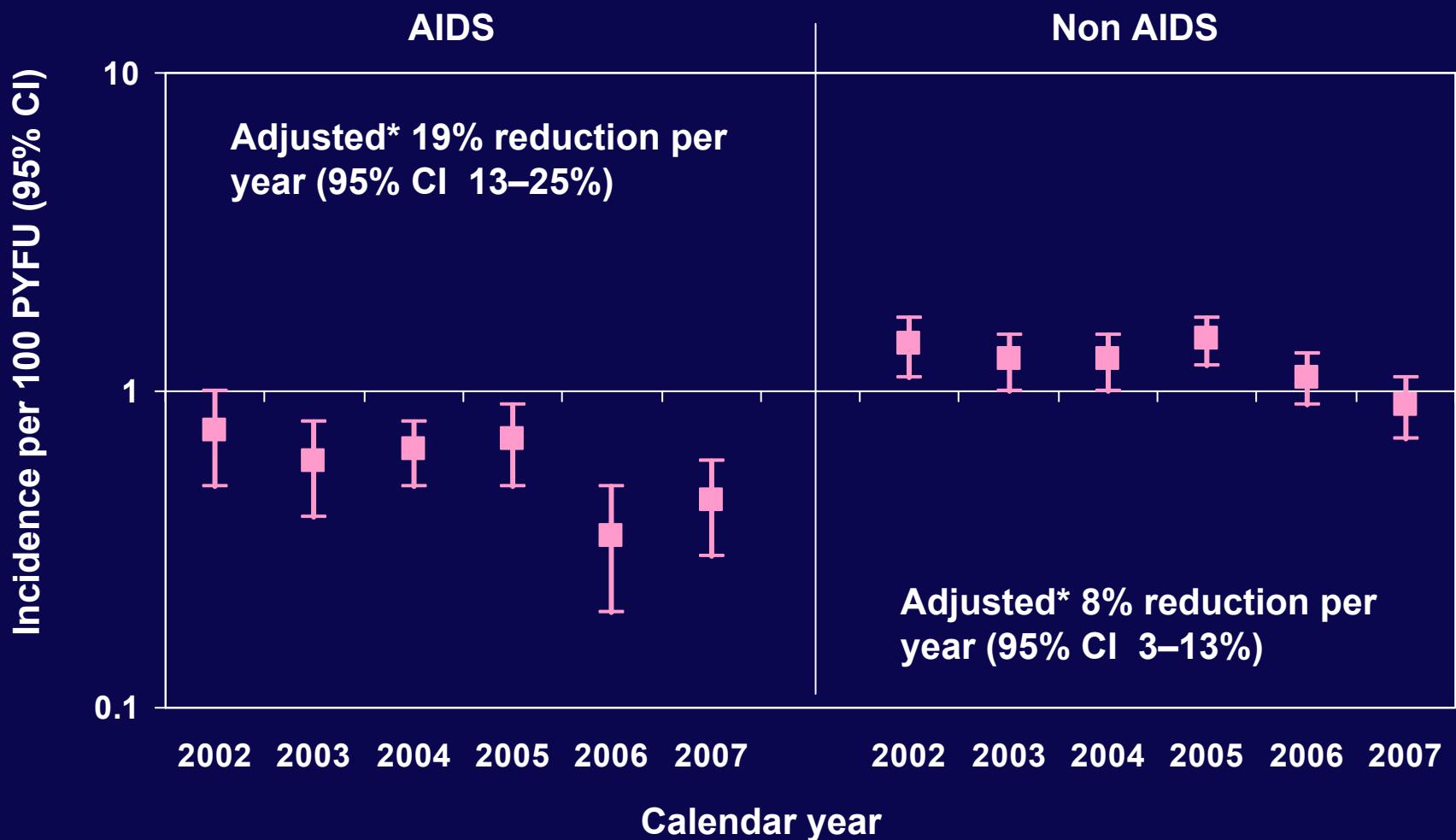
Stratified by country



Adjusted for gender, ethnic origin, HIV exposure group, age, CD4 nadir, hepatitis B and C status*, AIDS diagnosis*, CD4* and viral load*, starting any antiretrovirals*, starting cART* and anaemia* (*time-updated).

Mortality 2002-2007

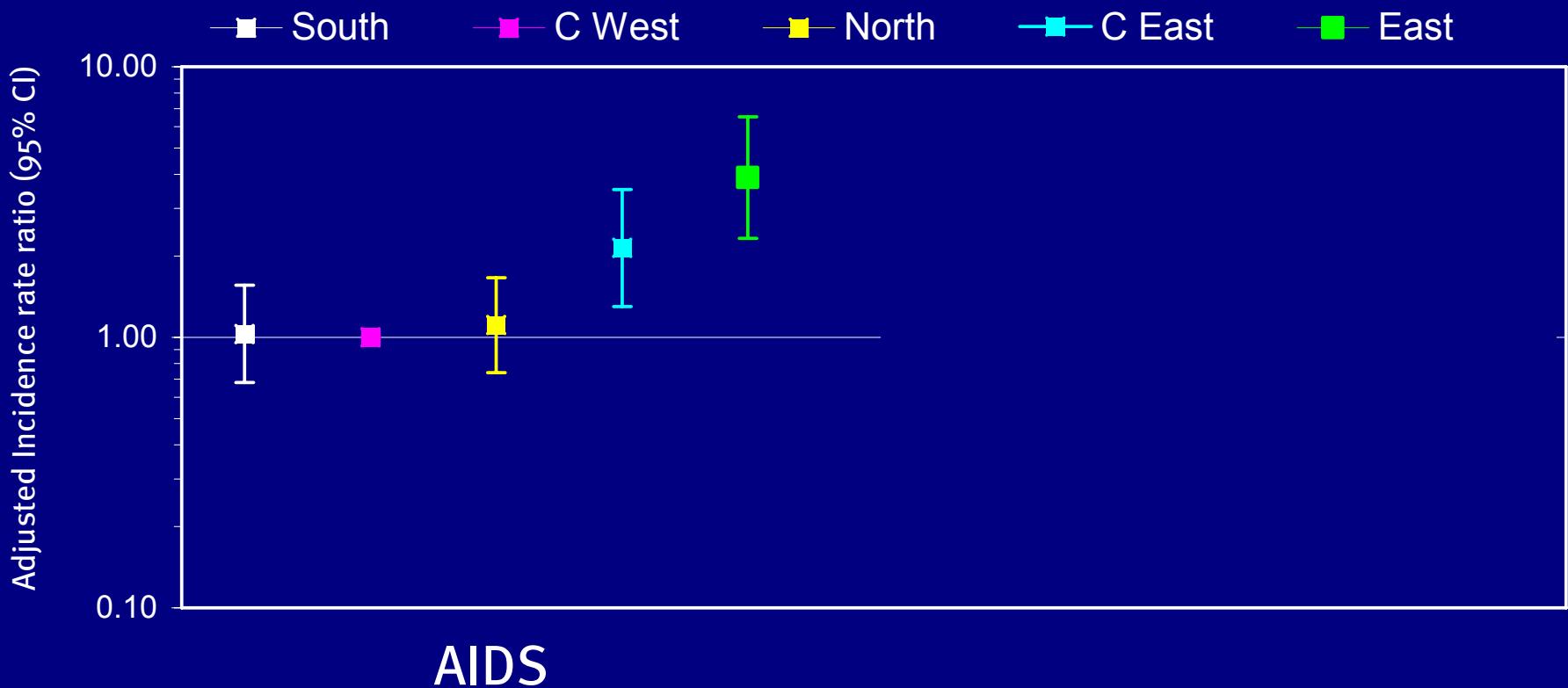
Stratified by cause of death



Adjusted for gender, ethnic origin, HIV exposure group, age, CD4 nadir, hepatitis B and C status*, AIDS diagnosis*, CD4* and viral load*, starting any antiretrovirals*, starting cART* and anaemia* (*time-updated).

Mortality 2002-2007

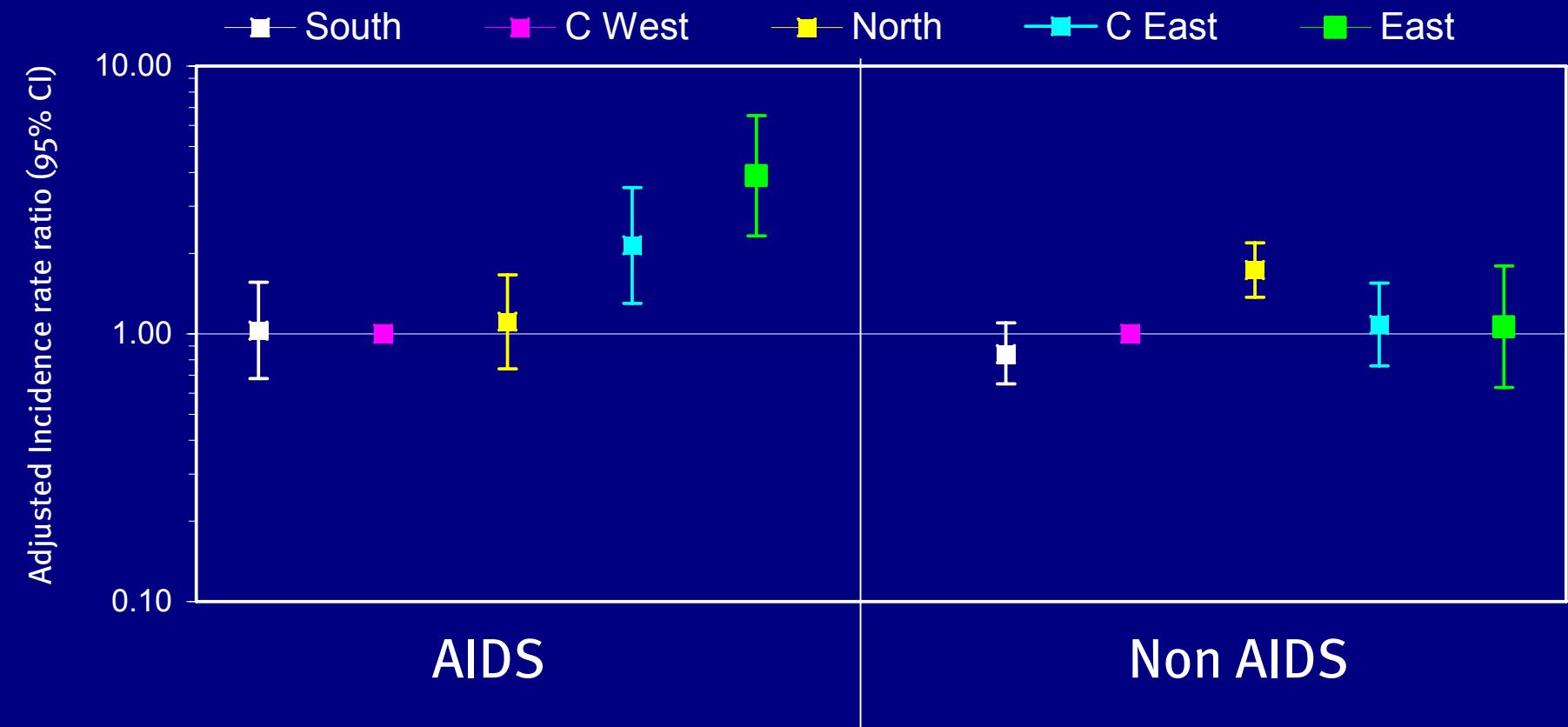
Stratified by cause of death



Adjusted for gender, ethnic origin, HIV exposure group, age, CD4 nadir, hepatitis B and C status*, AIDS diagnosis*, CD4* and viral load*, starting any antiretrovirals*, starting cART* and anaemia* (*time-updated).

Mortality 2002-2007

Stratified by cause of death



Adjusted for gender, ethnic origin, HIV exposure group, age, CD4 nadir, hepatitis B and C status*, AIDS diagnosis*, CD4* and viral load*, starting any antiretrovirals*, starting cART* and anaemia* (*time-updated).

Summary

- Significant decrease in all-cause mortality since 2002 in all regions of Europe
- Considerable variability between countries within regions and between regions
- AIDS remains significant contributor to mortality in central East and Eastern Europe
- Deaths from non-AIDS particularly prevalent in northern Europe

Discussion

- Concern that regional differences in AIDS mortality persist; low use of cART in Eastern Europe remains of concern
 - ➔ Health care indexes will be used to try and further explain increased AIDS mortality in Central East and Eastern Europe compared to other regions
- Further analysis of non-AIDS mortality required
 - ➔ Why is the rate higher in North?
 - ➔ Are health care indexes useful for non-AIDS mortality

The EuroSIDA Study Group

The multi-centre study group of EuroSIDA (national coordinators in parenthesis).

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