

CLINICAL CHARACTERISTICS OF WOMEN PARTICIPATING IN THE Cohort of Australian women WITH HIV (CLIO) STUDY

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Background:

CLIO is a prospective clinic-based cohort established in 2022 to address significant knowledge gaps around women living with HIV in Australia. Here we report baseline clinical data from the current cohort.

Methods:

CLIO includes two data sources: 1) clinical data recorded by the recruiting site and 2) socio-behavioural data reported via a self-completed survey. We use descriptive statistics to summarise key clinical characteristics for women enrolled through to January 2024. Chi-square statistics were also used to compare age-groups for specific outcomes.

Results:

To date, 141 women have been recruited to CLIO, with a median age of 45 years (IQR: 36-56). 50 women (36%) were aged ≤ 40 , 41 (29%) aged 41-50, and 50 (36%) > 50 -years. Mode of HIV-acquisition was heterosexual-sex (66%), injecting-drug-use (6%) and missing/unknown (28%) (similar across age groups ≤ 40 , 41-50, and ≥ 50 -years). Less than 6% (n=8) women had CD4 below 350 cells/ml. The majority (83%) had CD4-count > 500 cells/ml (82%, 76% and 88% among women ≤ 40 , 41-50, and ≥ 50 -years), and 94% had viral-load < 50 copies/mL. 84% were receiving an INSTI, 9% an NNRTI and 3.5% respectively were on PI-based regimen or no/missing ART. 59% had one or more comorbidities recorded: 48%, 56% and 72% in women ≤ 40 , 41-50, and ≥ 50 -years ($p=0.047$). 33% had depression and/or anxiety: 32%, 27%, and 38% for women ≤ 40 , 41-50, and ≥ 50 -years ($p=0.52$). Overall, 13% had recorded hypertension: 6%, 7% and 24% for women aged ≤ 40 , 41-50, and ≥ 50 -years ($p=0.012$). 33% had high total cholesterol (> 5.2 mmol/L): 14%, 37%, and 50% in ≤ 40 , 41-50 (37%), and ≥ 50 -years ($p=0.003$).

Conclusion:

While most women are virologically suppressed with good immune status, significant comorbidity burden was reported overall, which increased with age. This highlights the importance for monitoring and prevention strategies for age-related comorbidities to improve health outcomes for women living with HIV.

Disclosure of interest statement:

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