Surveillance of mortality and causes of death among HIV-infected inpatients.

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Abstract
We performed an observational, retrospective study in order to evaluate the mortality rate and causes of death among HIV-infected inpatients at a reference tertiary care Hospital from January 2012 to July 2014. High mortality rate (58.06%) was associated with low CD4+ lymphocytes count. Opportunistic infections were the most frequent cause of death even in the post-HAART era in patients hospitalized in a reference center. Key words: mortality, HIV infection, surveillance.

Introduction
In the post-HAART era has been described significant decrease of mortality rate and a change of the classic pattern of causes of death associated to opportunistic infections to chronic degenerative disorders [1, 2, 3]. We evaluate the mortality rate and causes of death among HIV-infected inpatients at a reference Hospital.

Population and Methods
Design: observational, retrospective cohort.
Setting: a reference tertiary care university hospital (Hospital de Clínicas da UNICAMP).
Population: we performed the selection of patients from Electronic Medical Records and Nosocomial Surveillance Epidemiological Division databases. Inclusion criteria: age equal or higher than 18 years old with laboratorial diagnosis of HIV infection, inpatients during the period from January 2012 to July 2014. The researcher reviewed clinical medical records. Statistical analysis: 2 tests or Fisher’s exact test were used to analyze association between categorical variables and the Kruskal-Wallis’s test for continuous variables. The significant level for p was equal or inferior to 0.01.

Results and Discussion
We included 62 patients, of these, 41 (63.3%) were admitted by opportunistic infections associated to HIV. Laboratorial diagnosis of HIV was done during the hospitalization in eight (12.9%) cases and after in one patient. Regarding HAART, 47 (75.8%) were in therapy, however with low adherence. Death occurred in 36 (58.06%) cases. Causes of death were opportunistic infections in 39.37% followed by chronic degenerative disorders [1, 2, 3]. We evaluate the mortality rate and causes of death among HIV-infected inpatients at a reference hospital.

The significant level for p was equal or inferior to 0.01.

Conclusions
High mortality rate (58.06%) was associated with low CD4+ lymphocytes count. Opportunistic infections were the most frequent cause of death even in the post-HAART era in patients hospitalized in a reference center.

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