



OCS

OHTN COHORT STUDY

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Testing for liver and kidney disease among people living with HIV

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Are some people living with HIV being tested for liver and kidney disease less frequently than others?

Key take-away messages:

Regular lab tests for liver enzymes, kidney function and lipid levels (such as cholesterol) are important for detecting comorbidities in people living with HIV.

People living with HIV-HCV co-infection who have a history of injection drug use are less likely to have these tests annually despite being at higher risk for cirrhosis and kidney disease.



Who did we look at?

3,940 people living with HIV in the Canadian Observational Cohort (CANOC), which includes OCS participants.

What did we do?

We looked at the participants' electronic health records and assessed how often each person was tested for liver enzymes, kidney function and lipid levels.



We then looked at demographic information (such as age, HIV risk factors and gender) to see if there were differences in testing frequency between participants.

What did we find?

Compared to participants without a history of injection drug use, participants with HIV-HCV co-infection and a history of injection drug use were significantly less likely to receive regular liver, kidney and metabolic tests.

This finding suggests that there may be challenges engaging people with a history of injection drug use in HIV care.

J. Gillis et al., "Factors associated with the frequency of monitoring of liver enzymes, renal function and lipid laboratory markers among individuals initiating combination antiretroviral therapy: a cohort study," BMC Infectious Diseases (2015) 15: 453.

The Ontario HIV Treatment Network Cohort Study is an ongoing research study that collects clinical, social and behavioural information from close to 4,000 people living with HIV in Ontario.

For more information, please contact ocsinfo@ohtn.on.ca.