



Prevalence of and Factors Associated with Depressive Symptoms in Individuals Living with HIV/AIDS in Brazil



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Introduction

- People living with HIV / AIDS also experience difficulties resuming or maintaining their life projects and often experience conflict and situations of embarrassment, vulnerability, and the violation of their rights as citizens
- HIV infection as a chronic condition brought with it new challenges for care delivery because the side effects of the prolonged use of the antiretroviral therapy (ART) leads to the appearance of lipodystrophy and changes in body perception.

Introduction

- These situations and conditions may lead to low self-esteem, lack of belonging, and loss of social and psychological identity, which may trigger psychological distress and mental disorders
- Among mental disorders, depression is one of the most common comorbidities with a high prevalence among people living with HIV/AIDS both in Brazil and in other countries

Introduction

- Depressive symptoms are a common mental disorder and are characterized by sadness, loss of interest and guilt feelings that negatively impact one's ability to deal with life, adherence to antiretroviral therapy and affect quality of life.
- In this sense, the identification of depressive symptoms among people living with HIV/AIDS is an important step in promoting interdisciplinary therapeutic interventions directed to these individuals.

Objective

Identify the prevalence of depressive symptoms and associated factors among people living with HIV/AIDS.

Methods

- This is a descriptive cross-sectional
- Non-probability sample of two services specializing in AIDS care in Ribeirão Preto, São Paulo, Brazil
- Individual, private interviews, confidentiality of data; ethical aspects covered

Methods

- Semi-structured questionnaire – socio-demographic (sex, age, income) and clinical aspects (CD4 cell count, comorbidities) and comportamentais (alcohol consumption/ how many times a week) variables
- The Beck Depression Inventory (BDI) was used to assess the intensity of depression
- The instrument's minimum score for each item is 0 and the maximum is 3, where 0 means the lack of depressive symptoms and 3 indicates the presence of symptoms. The final score is obtained by the sum of all the points

Results

331 PVHIV

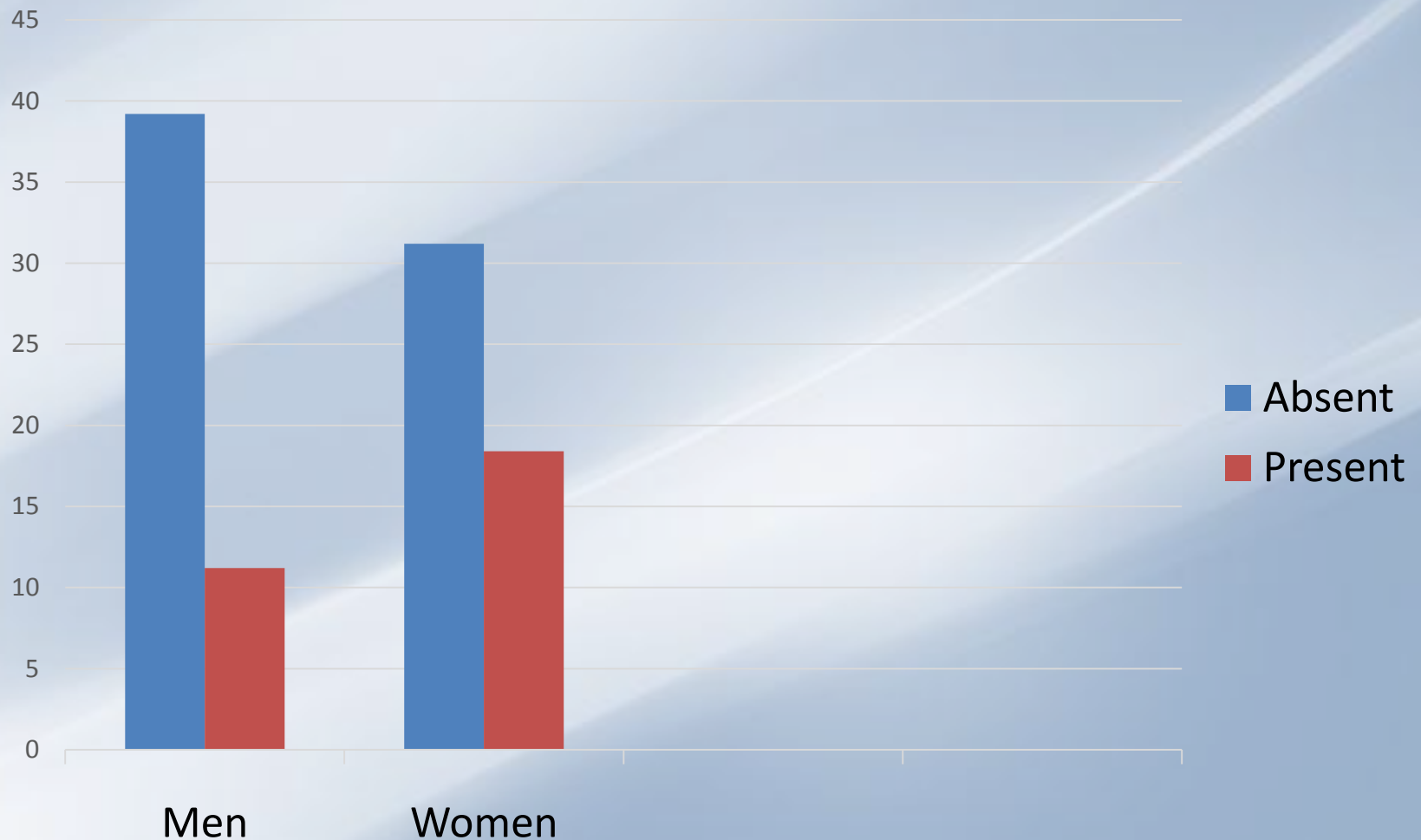
167 (50,5%) men and 164 (49,5%) women

267 (80,7%) had CD4 T cells
grater than $200/\text{mm}^3$

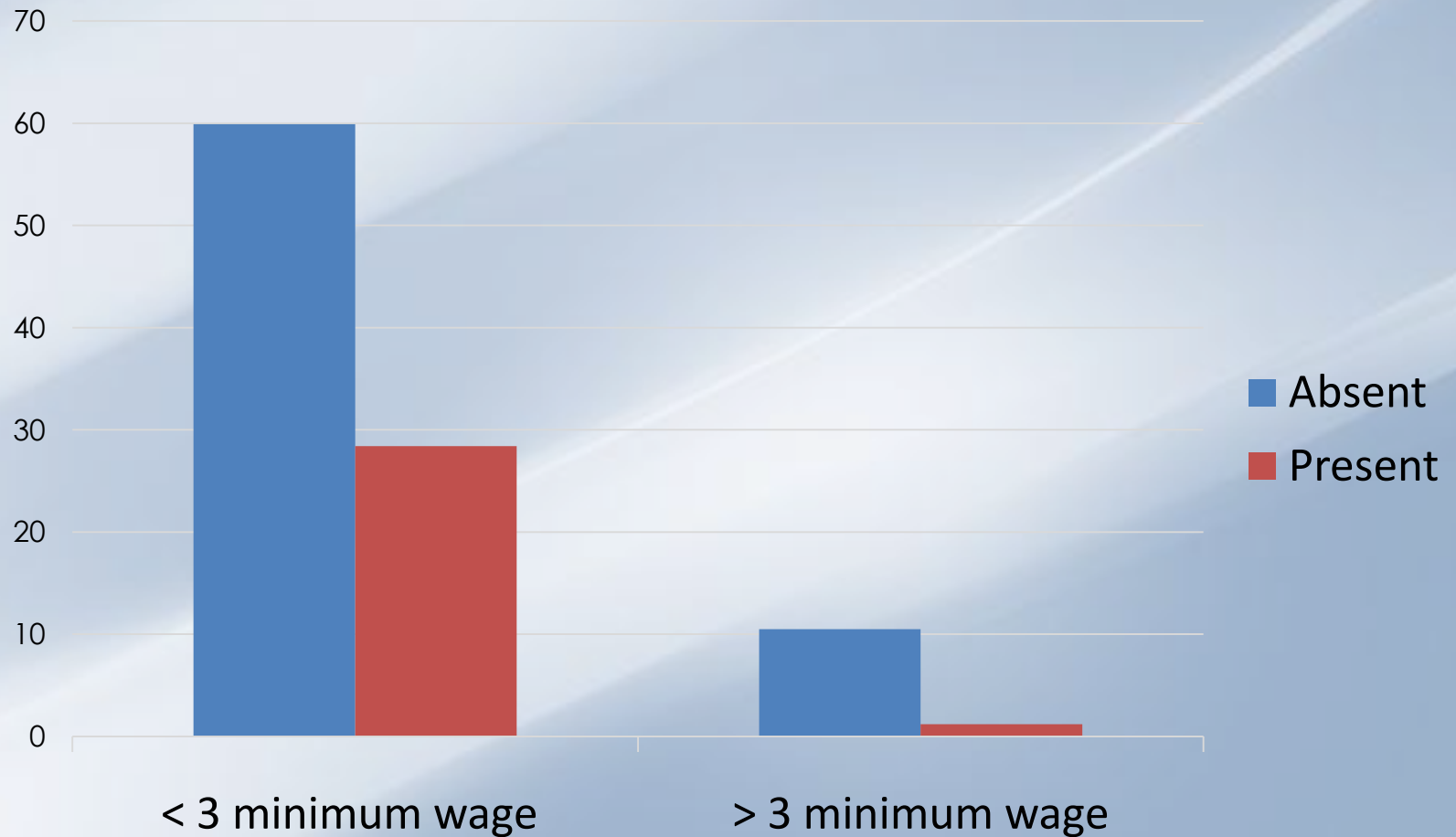
29,6% was the prevalence of
BDI scores indicative of
depression

176 (53,2%)
didn't have any
co-morbidity or
associated co-
infection

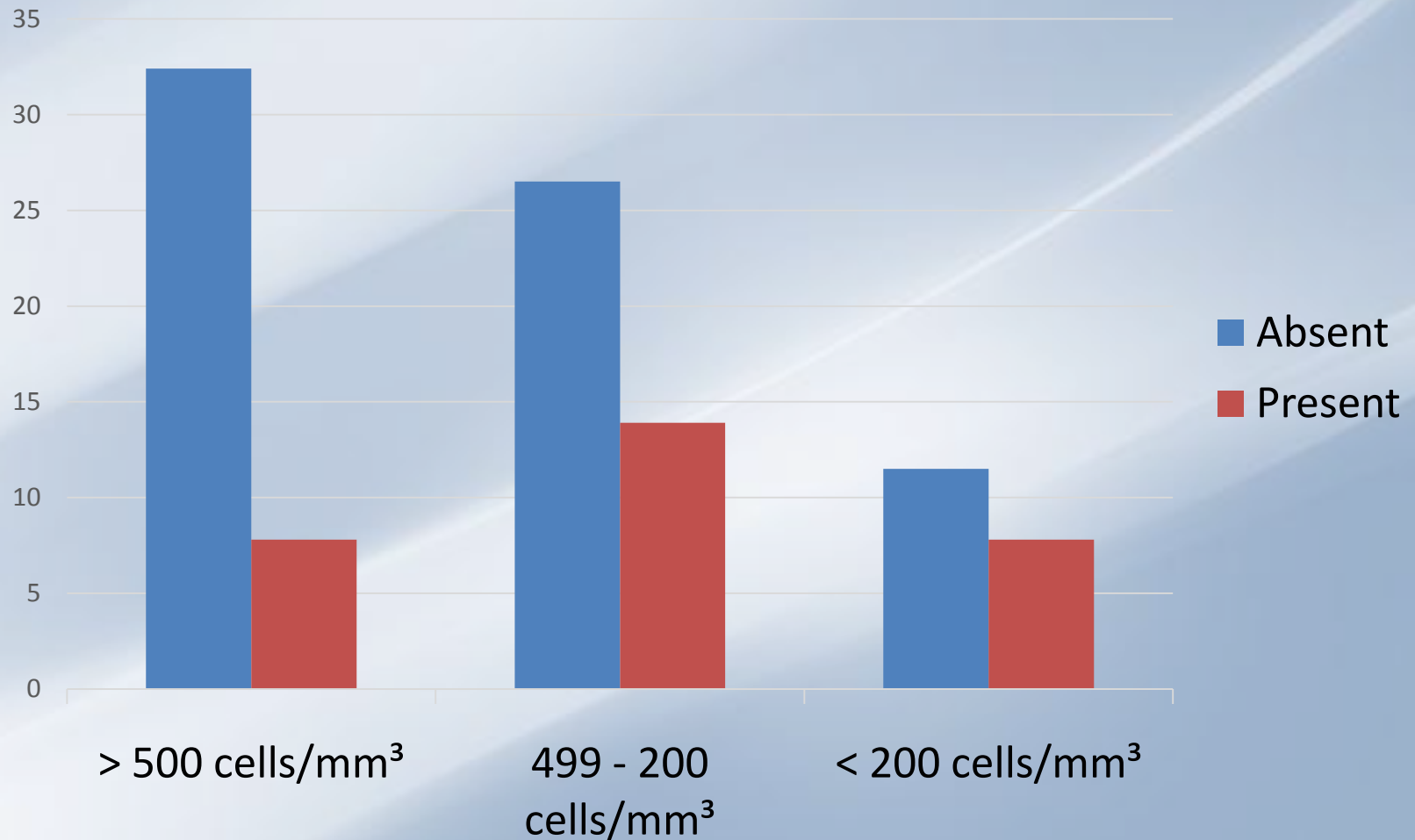
Percentage of depression symptoms between men and women



Association of income and depression symptoms



Association of CD4 cells and symptoms of depression



Factors associated with symptoms of depression among people living with HIV/aids

Variable	Levels	Depression		Raw OR	IC 95%		Adjusted OR	IC 95%	
		Absent	Present		LI	LS		LI	LS
Sex	Male	130(77,8%)	37(22,1%)	2,081	1,283	3,374	1,694	1,002	2,863
	Female	103(62,8%)	61(37,2%)	1			1		
Income	> 3	35(89,7%)	4(10,2%)	4,154	1,435	12,028	3,248	1,076	9,803
	< 3	198(67,8%)	94(32,1%)	1			1		
CD4 cells	≥ 500	107(80,4%)	26(19,5%)	2,816	1,459	5,435	2,739	1,387	5,409
	499 – 200	88(65,6%)	46(34,3%)	1,309	1,309	2,417	1,202	0,634	2,277
	≤ 200	38 (59,3%)	26(40,6%)	1			1		

Discussion

- This study's results showed that 29.6% of the individuals living with HIV/AIDS presented depressive symptoms (BDI > 16) and the factors associated with depression were sex, income, and immunological status
- Studies conducted in Brazil addressing people with HIV/AIDS report that the prevalence of depressive symptoms may range from 25,8% and 53,3%

Discussion

- Association between depression and clinical diseases occurs frequently, which may worsen both an individual's psychiatric condition and the clinical disease itself, leading to lower adherence to a therapeutic regimen, in addition to greater levels of morbidity and mortality
- Additionally, there is a perception that symptoms are merely adverse consequences of diseases (hopelessness and low self-esteem)

Discussion

- The socio-demographic aspects revealed that depressive symptoms were associated with sex, while men were 1.6 times more likely (CI 95% 1.0-2.8) not to develop depressive symptoms than women
- Women in general have a higher prevalence of chronic diseases, including mood mental disorders, such as depression

Discussion

- Income was a risk factor associated with depressive symptoms: individuals with lower incomes (less than 3 times the minimum wage) were 3.2 times more likely (CI 95% 1.0-9.8) to experience depressive symptoms than individuals with higher incomes
- This finding is also observed in studies reporting that financial hardship is associated with depression among individuals with HIV/AIDS

Discussion

- The results show that individuals with CD4 T cells below 200/mm³ are 2.7 times more likely (CI 95% 1.3-5.4) to develop depression than those with CD4 T cells above 500/mm³
- These results suggest that psychosocial factors such as depression may affect clinical and immunological responses, as reported in other studies), reinforcing the importance of the early detection and treatment of depression

Final Consideration

- This study's results indicate a high prevalence of depressive symptoms among people living with HIV/AIDS in the studied services and show that risk factors include sex, income and immunological condition.
- There is a need to systematically assess the presence of depressive symptoms in people living with HIV/AIDS during clinical practice, since these are prevalent in this population.

Final Consideration

- The authors declare the absence of conflicts of interest concerning this article.

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