Long-term survivors in a cohort of HIV+ patients diagnosed between 1985 and 1992: predictive factors associated with more than 25 years of survival


Unit of Infectious Diseases University of Catania and # Unit of Hospital Pharmacy, ARNAS Garibaldi, Catania, Italy

Introduction

HIV, in the last three decades, has radically changed the history of millions of women and men and has dramatically reduced their expectancy and quality of life. Although generations of patients, diagnosed during the pre-HAART era, has been deprived of any chances to survive, a considerable number of them is still alive.

Some authors classified these subjects in pre and post HAART long term survivors to highlight the value that the opportunity of access to care has represented for most of them.

Crucially a considerable number of this patients aged next to their doctors and they, together, represent the witnesses of one of the most painful, but at the same time, exciting social and scientific period of recent history.

Aim

Aim of this study was to evaluate the percentage of HIV long term survivors (LTS) (more than 25 years) in a cohort of HIV+ subjects diagnosed between 1985 and 1992 in an infectious diseases unit in southern Italy speculating on potential predictive factors associated to a so long survival.

Patients and methods

Single-center retrospective study. Data were collected from clinical files or historical databases. In accord with the protocol were considered epidemiological and clinical data collected at the time of HIV diagnosis. Longitudinal observation was stopped on 31 Dec 2017. Were considered LTS or NLTS all the subjects with more or between 300 months of survival during the assigned interval time

Globally 186 subjects were enrolled: 148 (79.5%) males, all but one Caucasian, 100 (53.8%) IVDUs, 38 (20.4%) MSMs, 33 (17.7%) heterosexuals. Median age 28 (IQR 24.6-34.5) years, median CD4+ 239 (IQR 56-477) cells/µl, 141 (76%) were late presenters, 58 (31.2%) AIDS presenters, 53% anti HCV+. Epidemiological and clinical data registered at diagnosis are resumed below

Statistical analysis

The comparison between the groups was performed using the chi-square with the Yates correction or the exact Fisher test. For the analysis of quantitative data distributed normally the comparison between two groups was made using the Student’s T test. The Mann Whitney U test was used to compare the two groups of undistributed values. The Kaplan-Meier curves were used for survival analysis. Statistical comparisons were made using the log-rank test and the Holm-Sidak method for multiple comparison. Identified variables in the univariate analysis with a p value <0.05 were included in the logistic regression model

Results

Ten (5.4%) untraceable subjects were considered lost to the follow up and excluded from survival analysis. Finally data related to 176 subjects were analyzed. 72 subjects of them (38.7%) were LTS (fig 3); all but 2 alive at the end of follow up. Data on median survival are shown in the table below

Conclusions

Surprisingly more than one third of patient of our cohort survived more than 25 years from diagnosis with a median of 350 months. At univariate analysis conditions traditionally associated with late presentation as male sex, older age, low CD4 and AIDS presentation were associated to bad prognosis, but, in accord with multivariate analysis, only young age and lack of clinical progression towards AIDS should be considered the main favorable condition driving to ARV treatment that has to be considered the stronger predictor and the main actor of the so long term survival.