

## LIFE QUALITY OF PEOPLE INFECTED BY HIV WITH OR WITHOUT ANTIRETROVIRAL TREATMENT

**Thesis:** N. L. M. Gil submitted this thesis for her Doctorate in Tropical Diseases at the Botucatu Medical School, São Paulo State University, UNESP, Botucatu, São Paulo State, Brazil, 2009.

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**ABSTRACT:** The “HIV/Aids – Quality of Life” (HAT-Qol) is a specific multifunctional instrument used to measure the life quality of HIV infected persons. It is divided into nine domains: general activity, sexual activity, secrecy about HIV seropositivity, concern about health, financial concern, awareness about HIV, satisfaction with life, issues about medications and belief in the doctor. The current study analyzed the life quality of HIV infected individuals – who attended the DST/Aids Program in Maringá city, Paraná state – regarding the use or not of antiretroviral therapy (TARV) and their demographic, epidemiological and clinical characteristics. Data were collected by retrospective analysis from 1,200 medical charts of patients registered in the program. The HAT-Qol instrument was applied before routine medical consultation. One hundred and sixty-nine patients, who had HIV infection confirmed, were divided into two groups, G1 with 118 individuals receiving antiretroviral therapy and G2 with 51 individuals who were not under this therapy.

Result analysis, regarding social and demographic characteristics, revealed no difference among responses related to gender, educational degree and sexual option. Age influenced satisfaction with sexual activity and marital status. Regarding HIV awareness, the lowest response index or worst quality of life came from, respectively, men between 50 and 69 years old and patients who did not have regular partners compared with the ones who did. Additionally, it was observed that the time of diagnosis influenced general activities, HIV awareness, concern about health and financial issues, satisfaction with life and topics about medications. The

variables were compared in both groups. There was no influence on the use or not of antiretroviral therapy regarding age, sexual activity, HIV diagnosis time and the domains that evaluated general activities, financial concern, awareness of HIV and satisfaction with life. In relation to time of diagnosis, there was an influence only in persons who had been diagnosed two or three years before, in which a lower quality of life was observed among individuals who were not under antiretroviral therapy. It was not possible to compare variables about medication use, HIV plasmatic viral rate and time of diagnosis, because G2 individuals were not receiving the antiretroviral therapy. Furthermore, no comparison was made regarding marital status and HIV awareness, because there were no married individuals in G2. Thus, the analysis of the results showed that the use of antiretroviral treatment did not influence the life quality of HIV patients studied by the HAT-Qol scale.

**KEY WORDS:** antiretroviral therapy, HIV/Aids, quality of life, HAT-Qol instrument.

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