

¹F. Fanjul , ¹A. Campins , ¹M. Leyes , ¹L. Martín , ¹J. Murillas , ¹M. Peñaranda , ¹M.A. Ribas , ¹H. Vilchez , ¹A. Santos Pinheiro , ¹A. Ferré , ²M. Garcia-Gazalla , ²F. Homar , ²C. Cifuentes ,
²A. Villoslada , ²M. Raya , ²A. Payeras , ¹M .Riera.

¹Hospital Universitario Son Espases, Infectious Diseases Unit, ² Hospital Son Llátzer, Institut d'Investigació Sanitària Illes Balears, Palma de Mallorca, Spain .

Objectives

To analyze the GESIDA Quality of care (QOC) indicators and describe its fulfillment in two spanish hospitals during the 2009-2018 period.

Methods

Observational retrospective study that included adult HIV-infected patients followed up at the Son Espases (HUSE) and Son Llátzer (HSLL) hospitals in Palma de Mallorca between 1/1/2009 and 12/31/2017.

Required data for analysis of the QOC indicators was collected from proprietary software (eVIHa) using an automated process.

Measured Gesida Quality of care indicators :

Gesida 23-Pneumococcal vaccination.

Gesida 17. Renal function evaluation and urinalysis

Gesida 38. HIV Viral load < 40 cop/mL 48 weeks after ART initiation

Gesida 40. ART changes during the first year

Gesida 56. Cardiovascular risk assessment at least once a year

Gesida 57. Yearly Incidence of hospital admissions in patients living with HIV in follow-up

Gesida 62. Overall mortality rate in patients under follow-up

Results. Tables

Table 1. Patients characteristics to diagnosis. Differences between hospitals.

	2009	2010	2011	2012	2013	2014	2015	2016	2018
Patients included	1645 677	1676 742	1715 731	1764 832	1807 865	1834 904	1852 911	1904 945	1952 979
Mean age (y)	44 43	44 43	45 44	45 45	46 45	46 45	47 46	47 47	48 47
Median time. Diagnose-first visit(d)	56 62	74 68	73 51	43 45	40 42	29 34	40 28	34 33	49 45
CD4<350 at diagnose (%)	45,87 39,4	50,4 38,4	41,7 45,5	39,8 53,6	40,1 50,6	39,4 39	33,3 30,8	33,6 30,4	27,9 34,2
Patients with ART<90 d after diagn	18,4 26,9	25 21	18,6 24,1	25,5 33,3	25,7 27,7	32,8 43,8	42,8 46,3	51,1 36,7	55,4 40,7
Patients without ART(%)	9,56 9,94	8,3 9,2	6,8 7,8	7,5 8	7,2 7,9	5,8 7,2	3,8 4	2,4 4,5	1 0,9

Table 2. Quality of care indicators.

	2009	2010	2011	2012	2013	2014	2015	2016	2017
Gesida 23 Pneumococcal vaccine %	71,2 7,7	72,7 22	76,3 44,8	77,8 61	78,1 61,3	80,7 67,1	85,2 65,3	86,5 64,9	88,6 65,6
Gesida 17 Renal function	75,7 77,2	94 96	98 98,2	95,4 99,5	96,8 98,9	97,8 99,7	97,8 99,7	96,5 97,8	98,7 99,5
Gesida 38 Viral load w 48	66,6 74	68,3 75	75,8 81,4	76,4 71	67,8 84,5	75,5 69,5	74,4 80,7	71,5 73,7	70 78,2
Gesida 40 ART switch	37,3 64	54 51	19,5 52,3	23,8 39,6	31,6 20,4	30,3 23,2	25,9 23,9	19,6 35,9	18,1 18,5
Gesida 56 CVD Risk estimated	0,1 0	41,2 75,2	83,5 95,6	86,2 95,3	87,4 96,6	86,5 96,2	85 96	83,1 93,3	84,1 95,7
Gesida 57 Hosp admission	9,8 7,4	8,2 4,9	5,6 9	5,2 6,8	6,6 6,8	5,7 5	5,1 3,7	4,1 4,4	4 3,7
Gesida 62 Mortality rate	0,7 0,4	1 0	1 0,4	0,9 0,9	0,6 0,56	0,9 0,14	0,53 0,28	0,17 0,29	0,28 0,19

Results

2931 patients were included with a mean age of 48 years. Main characteristics at diagnosis are presented in Table 1. The epidemiological characteristics (average age, sex, risk group of acquisition of HIV infection were similar in both hospitals).

The percentage of patients on ART was very high in both centers, with an increase in the % of patients on ART at 90 days of diagnosis (but still with low percentages of 55-40%). Other indicators of kidney function evaluation process, cardiovascular risk, vaccination against pneumococcus were performed regularly in both centers (Table 2).

The outcome indicators were very similar between both hospitals: CV < 50 in weeks 24 and 48 of the start of ART, changes in ART in the first year, mortality rate and percentage of patients requiring admission.

Discussion

-Although improved in the last years, the percentage of late diagnosis is still high in the included centers. An imBoth centers comply with GESIDA QOC indicators of follow-up including renal function measuring, pneumococcal vaccination and cardiovascular estimation. prove in the delay of ART start was also observed.