Adherence to Antiretroviral treatment among adolescents at Kenyatta National Hospital

Gatuguta, Anne W; Muchunga, Elisha K

Abstract:

All over the world and specifically sub-Saharan Africa, there is massive scaling up of availability and accessibility to highly active antiretroviral therapy. (HAART) which resulted in improved survival and reduced incidence of opportunistic infections among people living with HIV & AIDS. Nonetheless, whereas efforts to increase access to HIV & AIDS treatment have achieved the desired effects with respect to improvement in the quality of life, other issues such as adherence, sustainability and effectiveness of treatment have emerged. The goal to sustain a near optimal adherence for successful antiretroviral treatment is undoubtedly a major concern in the management of HIV & AIDS. Among adolescents, the challenge assumes greater proportions given the unique circumstances the group is exposed to. For instance, emotional, neurocognitive and physical development changes are some of the challenges. The transition from paediatric to adult state coupled with the knowledge about their HIV status that prompts them to initiate treatment on their own is to say the least, monumental challenges for adolescents. Moreover, adolescents are generally in school where they are subjected to stigma, discrimination and unfavourable school schedules that do not permit them time to access treatment and medication. Several studies have concluded that a high level of adherence to HAART at 95% or higher is necessary in order to avoid treatment failure and emergence of resistant strains. Consequently, patients with 95% or higher adherence are known to have a superior virological outcome, an increase in CD4 lymphocyte count, and a lower rate of hospitalization compared with patients with lower levels of adherence. As cited earlier, a near optimal adherence is a challenge for all patients, and non-adherent behavior is a big problem during adolescent period. The aim of the study was therefore to determine adherence levels to antiretroviral drugs among adolescents and also establish levels of appointment keeping to clinic visits and pharmacy drug refi 11.