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FACTORS FOR DELAY IN REGISTRATION AT ART CENTRE UNDER NACO PROGRAMME AT GANDHI HOSPITAL, SECUNDERABAD

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HOW TO CITE THIS ARTICLE:

P. Deepak, K. Jagadeeswarachari, P. Mallikarjun. "Factors for Delay in Registration at Art Centre under NACO Programme at Gandhi Hospital, Secunderabad". Journal of Evolution of Medical and Dental Sciences 2015; Vol. 4, Issue 14, February 16; Page: 2270-2273, DOI: 10.14260/jemds/2015/329

ABSTRACT: BACKGROUND: People Living with HIV (PLHIV) after detection of HIV positivity at Integrated Counseling and Testing Centre (ICTC) are referred to the Anti-Retroviral Treatment (ART) center for registration and Treatment services. However, significant numbers of patients are not registering at ART in time. **OBJECTIVE:** To analyze the reasons for delay in registering at ART after confirming HIV +ve at ICTC. **METHODS:** Five hundred consecutive new PLHIV registrations at ART center of this institution from 1st May to 30th Nov 2011 were included. Date of confirmation as HIV +ve at ICTC & date of registration at ART are recorded. Reasons for delay of more than 5 days for registration are collected through structured questionnaire by a single medical officer and analyzed. **RESULTS:** Of 500 new registrations at ART at this institution, 220 are from ICTC of this institution & 280 are from other ICTC centers. Out of 500 patients, 184 patients reported on the same day, 40 patients within 5 days and 276 patients beyond 5 days after confirmation at ICTC. The reasons for delay in reporting beyond 5 days are: Lack of motivation 123 (44.57%), Specific obstacles 92(33.33%) and Lack of awareness 61 (22.10%). **CONCLUSIONS:** On analysis of the factors for delaying registration, in Indian scenario, no single intervention will be able to address all the factors. A combination of interventions by all the stake holders including Out Reach Workers, Nurses, NGO's, General Physicians, play a key role in retention & effective treatment for PLHIV.

KEYWORDS: ART DAC India; Registration; Delay; Factors.

INTRODUCTION: People Living with HIV (PLHIV) after detection of HIV positivity at Integrated Counseling and Testing Centre (ICTC) are referred to the Anti-Retroviral Treatment (ART) centre for registration. The ICTC must link PLHIV appropriately with the ART Centre for Care and Treatment services they need. However, there is a substantial gap between ICTC's and ART centers. Earlier studies.^{1,2,3} Showed that only about 70% of PLHIV are linked to HIV care at ART center.

The present study aims to ascertain the reasons for delay in registration at ART center and analyze these factors. Analyzing the factors will enable all the stake holders to take necessary steps to overcome the barriers & implement the programme more effectively.

MATERIAL & METHODS: The present study was conducted in ART center of a tertiary care hospital. The study population consisted a total of 500 patients, who reported at the ART center of this institution, for registration between 1st May to 30 Nov 2011. All new registrations reported during this period are included in this study. On reporting for the registration, the date of confirmation as HIV +ve at ICTC and date of registration at ART were noted.

All the patients reported after 5 days of detection were politely enquired regarding reasons for delay. The information is gathered through a structured questioner and the responses were noted.

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The reasons for delay in all the 500 cases were obtained by Data Analyst at ART and responses analysed.

Before starting the interaction the respondents were briefed about the purpose of the questionnaire and informed consent was taken.

The reasons for delay were categorized under three headings:

1. In adequate motivation.
2. Specific obstacles.
3. In adequate awareness.

RESULTS: Out of 500 patients in study, 224 patients were registered at ART centre within 5 days and 276 patients beyond 5 days after confirmation at ICTC. Out of 224 where there was no delay, 184 patients registered on the same day, 40 patients registered within 5 days. Out of 276 patients reported after 5 days the reasons mentioned are classified as:

Lack of motivation: 44.57% (123)
 Specific obstacles: 33.33% (92)
 Lack of awareness: 22.10% (61)

The details are shown in Table 1:

REASONS FOR DELAY			
Category	Reasons	No of patients	Total No of Patients
Lack of motivation	Family commitments	40(14.49%)	123(44.57%)
	Stigma	35(12.68%)	
	Depressive states	29(10.50%)	
	Job commitment	17(6.15%)	
	Long distance travelling	2(0.72%)	
Specific obstacles	Patient admitted in private/ Government hospital	29(10.50%)	92(33.33%)
	Lack of family/Care taker support	28(10.14%)	
	Financial problems	21(7.60%)	
	Non ambulatory	12(4.34%)	
	Prisoners come after formalities.	2(0.72%)	
Lack of awareness	Ineffective counselling	48(17.39%)	61(22.10%)
	Minimizing the seriousness of illness	13(4.71%)	

TABLE 1

DISCUSSION: Retaining & providing care for PLHIV is an essential component of NACO program. In the present study conducted at ART center of this institution, the specific reasons for delay in registration at ART center after detecting to be HIV +ve are obtained with a structured questioner by a single medical officer.

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The reasons are classified into the 3 categories i.e., Lack of motivation, Specific obstacles and lack of awareness. Reasons such as minor family commitments like minor health problem of spouse or a parent, taking children to school, job commitments etc., which are daily activities, are included under lack of motivation. As these factors do not necessarily prevent a person from attending ART center if he/she is sufficiently motivated. Social stigma is found to be one of the most common psychosocial barriers for registration at ART. Counseling plays a key role in overcoming these barriers of lack of motivation. The services of outreach workers, nurses, NGO's can be utilized in providing support to overcome these categories of barriers by reaching the patient.

The specific obstacles included a major debilitating illness of a member in the family, patient himself admitted in a hospital for other ailment, non-ambulatory patients etc. The financial problems are included in specific obstacles, although they may be overcome partly if patients are sufficiently motivated. To overcome these barriers, specific interventions targeting the barrier are needed. The interventions could include payment to PLHIV to cover the travel expenditure. Addressing the problems of loss-of-pay at the place of work by permitting special leave for these patients. Providing health care support to the family members. Patient support groups and empowerment program will help the patient to overcome financial constraints.

Lack of awareness which constitutes 22.1% including minimizing the seriousness of illness i.e., feeling healthy, may be addressed by utilizing services of general physicians & primary health care providers. The findings highlight the need for more effective post test counseling.

As per the data from a cohort study in India by Gerardo Alvarez-Uria,¹ only 70% the patients diagnosed with HIV enter into care within three months. Male gender, homelessness, illiteracy, poverty, living far from a town and being asymptomatic at the moment of HIV diagnosis were factors associated with delayed entry into care after HIV diagnosis. The present study analysis the specific reasons which are directly responsible for delay in entering into the care.

In the self-reporting survey of ART access study by Jason A. Craw et al⁴ in United States, lack of symptoms, lack of transportation and "Not ready to start taking HIV Medications" were the major barriers for not entering into the care.

On analysis of the factors for delay in registration at ART center in Indian scenario, no single intervention will be able to address all the problems leading to delay in registration. A combination of interventions by all the stake holders including Out Reach Workers, Nurses, NGO's, General Physicians, play a key role in retention & effective treatment for PLHIV.

This study provides the directions for interventions to improve the linkage of PLHIV to ART center and highlights the role of general physicians and Primary healthcare providers in implementing the NACO programme more effectively.

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FINANCIAL OR OTHER

COMPETING INTERESTS: None

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Date of Submission: 27/07/2014.
Date of Peer Review: 28/07/2014.
Date of Acceptance: 07/02/2015.
Date of Publishing: 13/02/2015.