



Longer time on virological successful cART is independently associated with decreasing CD4 cell count in patients with <500 CD4 cells/mm<sup>3</sup>

Luuk Gras, Colette Smit, Steven van Lelyveld, Anouk Kesselring, Ard van Sighem, Frank de Wolf for the ATHENA national observational cohort

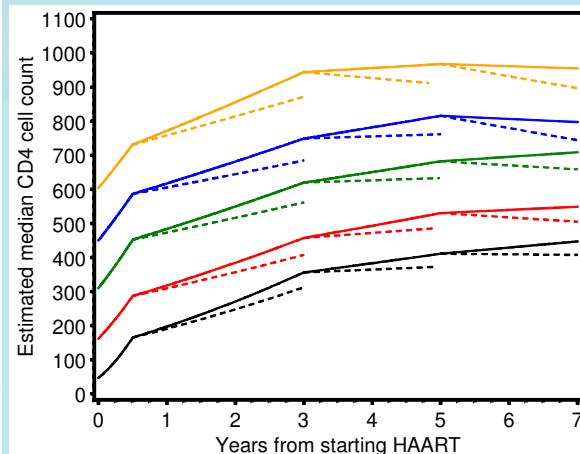


# Background

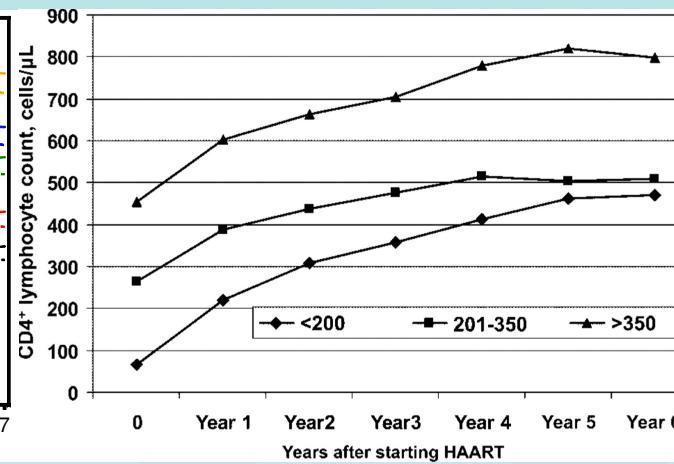
- ~90% of HIV-1 infected individuals starting cART manage to suppress plasma viral load to below detectable levels.
- A minority (10-35%) of virologically successfully treated HIV-1 infected individuals remain at low CD4 cell counts.
- Even if CD4 cell counts do increase, return to levels seen in HIV-negative individuals (~800 cells/mm<sup>3</sup>) may take years, and may not be feasible in some.

# Background

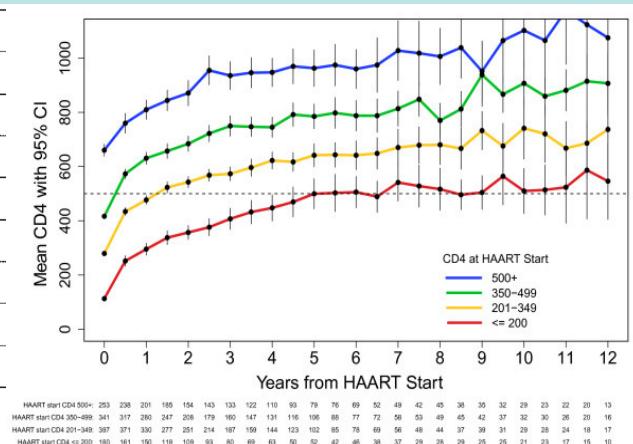
Median CD4+ lymphocyte count over time, stratified by baseline CD4+ cell count.  
In patients with virological suppression below detection limit.



Gras L, Kesselring A et al. JAIDS 2007



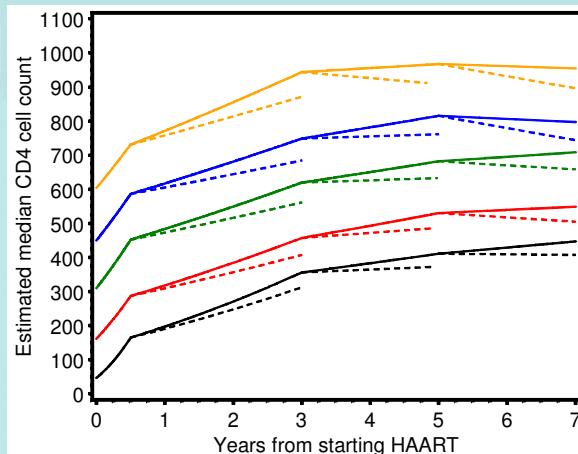
Moore R D, Keruly J C Clin Infect Dis. 2007



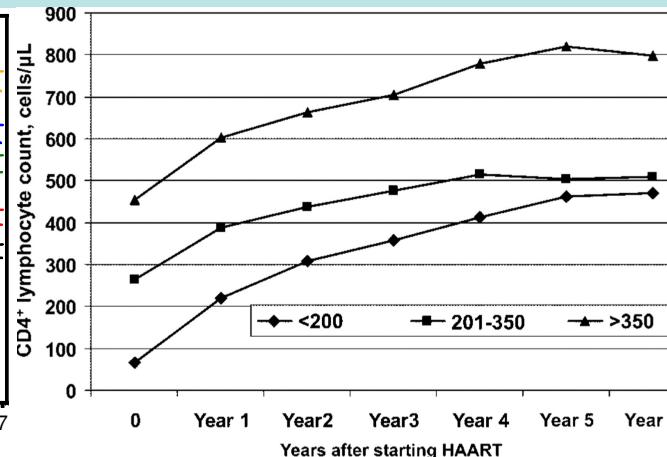
Lifson, Krantz et al. AIDS Research and Therapy 2011

# Background

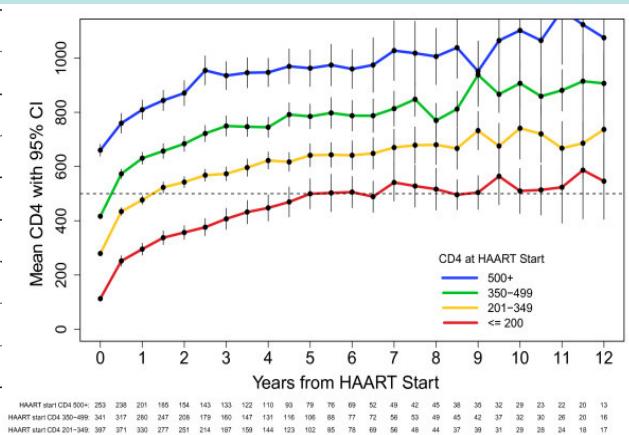
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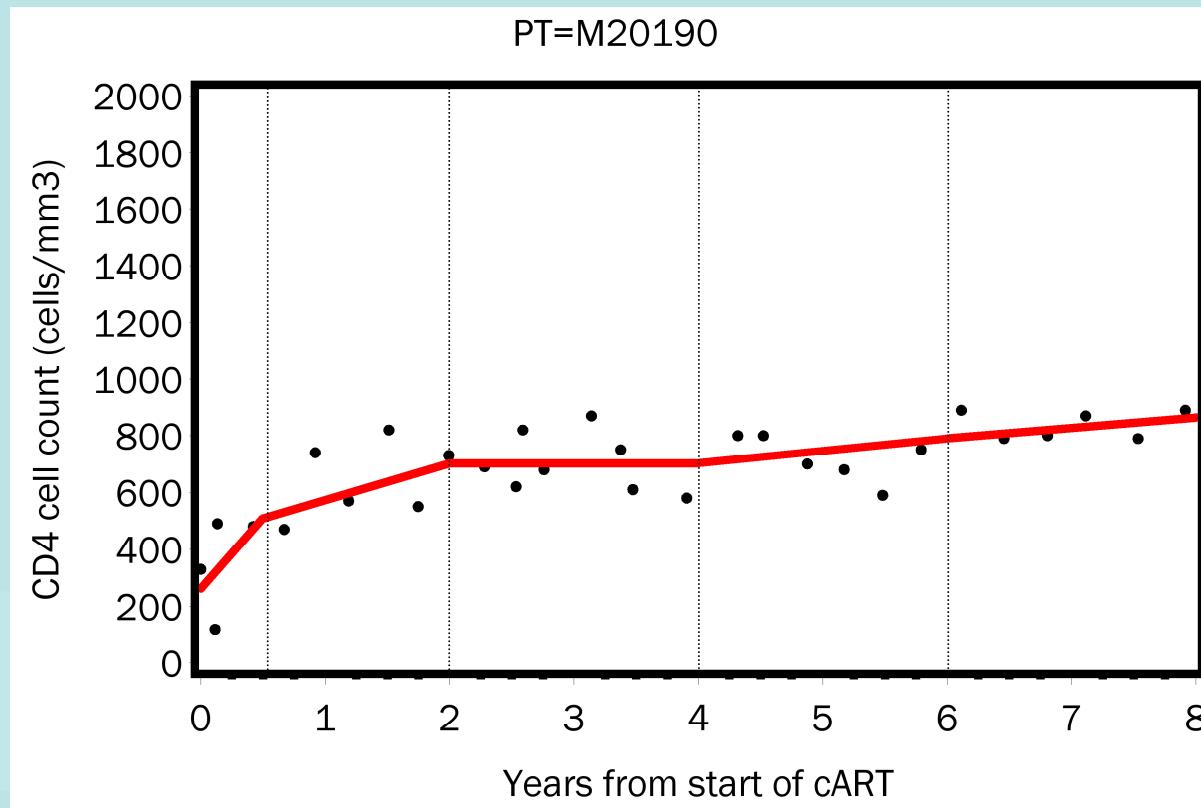
- Unclear whether a plateau is eventually reached or that CD4 cell counts keep increasing over time.
- In longitudinal studies mean increase / decrease is modeled. If there is a plateau approx. 50% of patients will have decreasing CD4 cell counts.
- Difficult to quantify the number of patients with decreasing CD4 cell counts from longitudinal CD4 plots.



# Background

- Objective:
  - Quantify the number of patients with episodes of decreasing CD4 cell counts during virologically successful cART.
  - Identify risk factors for episodes with decreasing CD4 cell counts.

# Methods - decreasing CD4 cell count



- Follow-up divided into episodes: 0.5-2 2-4 4-6 and 6-8 yrs on virological successful cART.
- Slope determined using mixed effect modelling of CD4 cell count. Random intercept and slopes for each patient.
- Definition: Slope <0 during each episode.



# Methods

Patients selected from the ATHENA cohort who were

- ≥16 years of age at HIV diagnosis
- start cART in or after 2000
- ART-naive at start cART
- plasma HIV RNA <50 copies/ml within 9 months from start
- ≥ 2 years virologically successfully cART treated

Outcome

- Episodes of decreasing CD4 cell count during viral suppression.

CD4 cell counts at or after first of 2 consecutive pVL>50 copies/ml were censored.



## Methods – statistical analysis

- Episodes of decreasing CD4 cell count (yes/no) analysed using logistic regression models including a GEE correlation structure.
- Included variables:

Time on successful cART (0.5-2, 2-4, 4-6, 6-8 year), gender, region of birth, transmission risk group, year of starting cART, CD4 cell count at the start of each period (<500, 500-800 and  $\geq$ 800 cells/mm<sup>3</sup>), duration of known HIV infection, age at the start of cART.

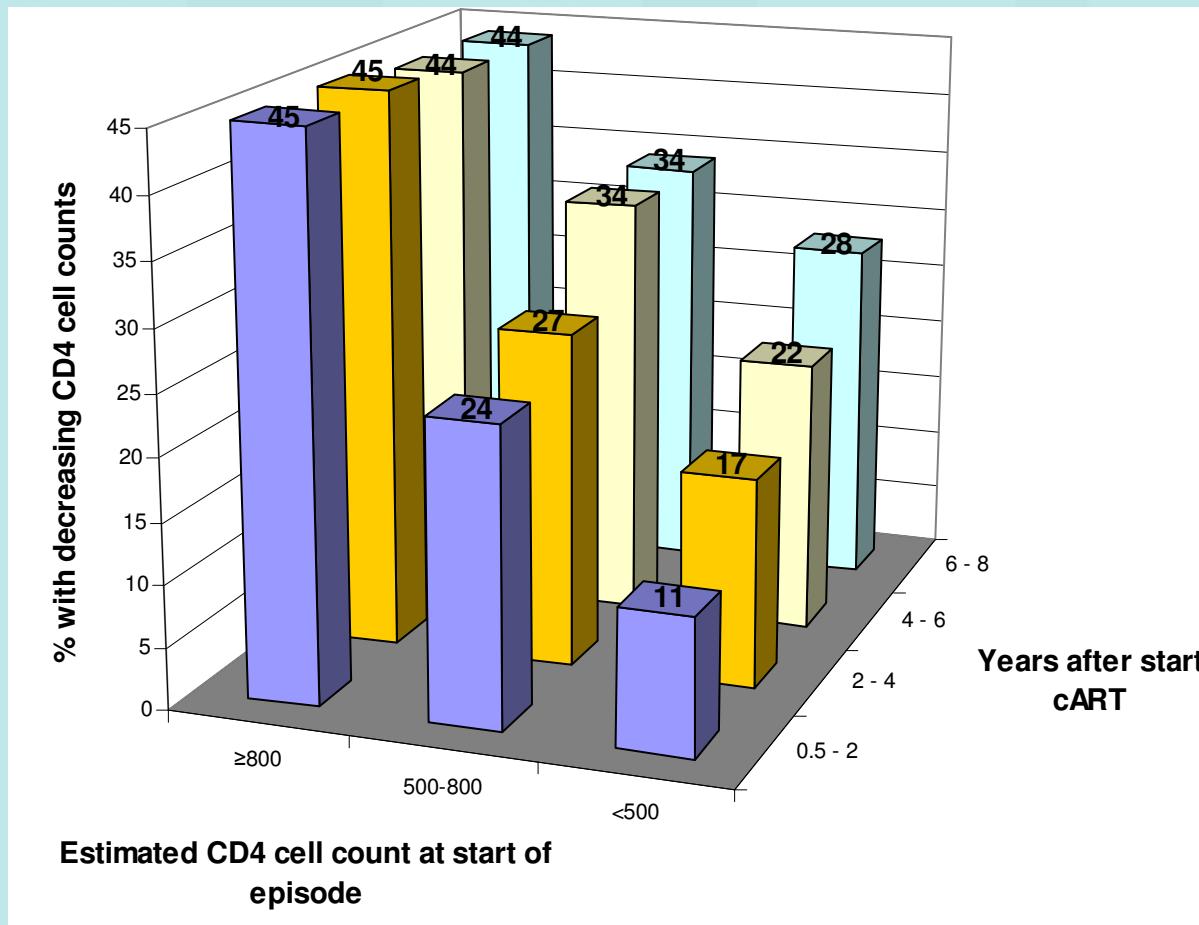


# Results

Characteristics at start cART		N	%
Total		3550	100
Gender	Male	2821	79
Risk group	MSM	1956	55
	Heterosexual	1194	34
	Other	400	11
Region of origin	W-Europe/N-America	2202	64
	Sub Sahara Africa	663	19
	Caribbean/S-America	405	11
		median	IQR
Age at start cART	years	39.4	33.2-46.1
CD4 cell count	cells/mm <sup>3</sup>	190	80-270
HIV RNA	$\log_{10}$ copies/ml	5.0	4.6-5.4
Known HIV infection	years	0.3	0.1-2.0

# Results

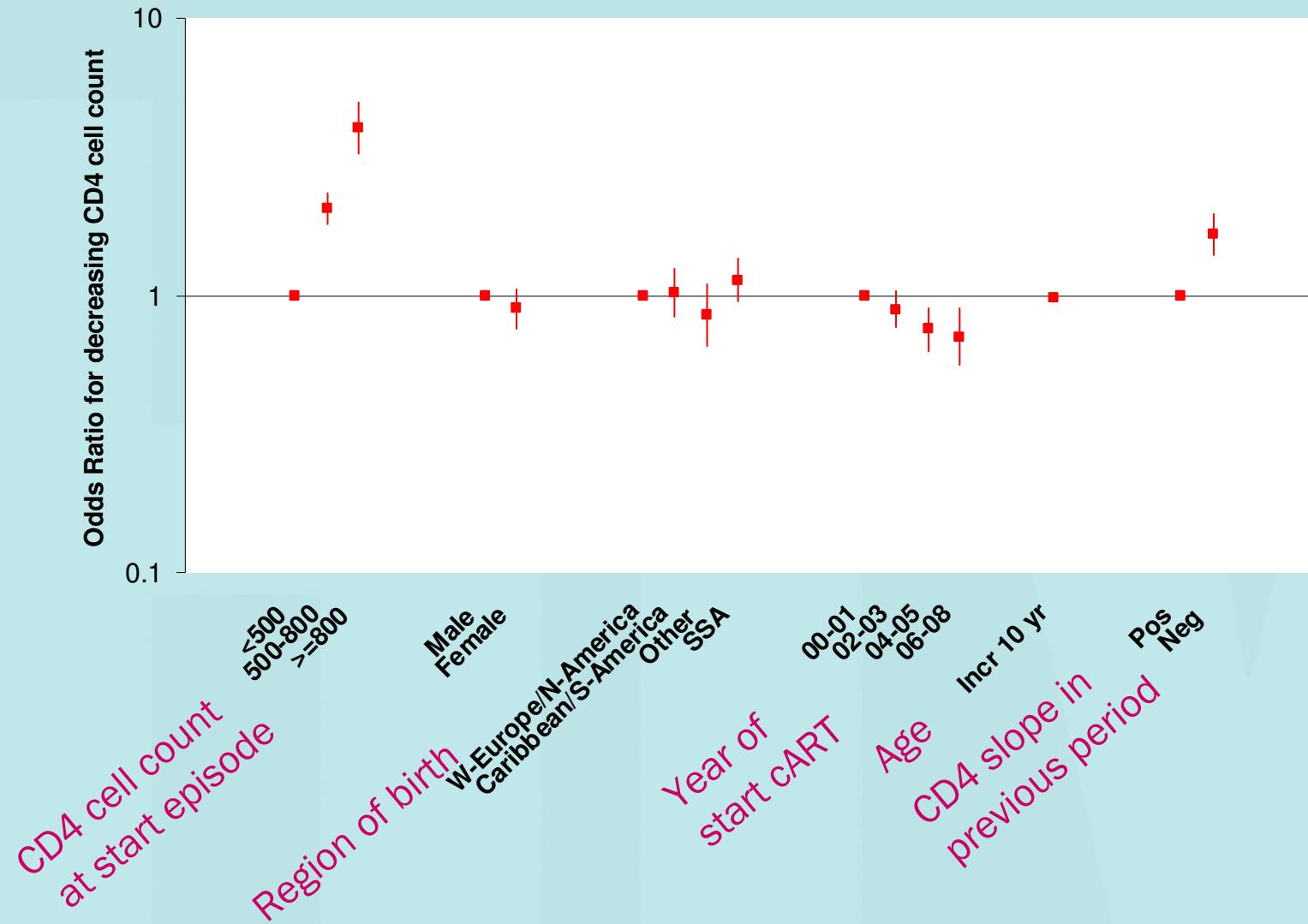
Decreasing CD4 cell counts by years on successful cART and CD4 cell count at start of each episode.



Out of 3550 patients,  
1188 (33%) experienced  
at least 1 episode of  
decreasing CD4 cell  
count.

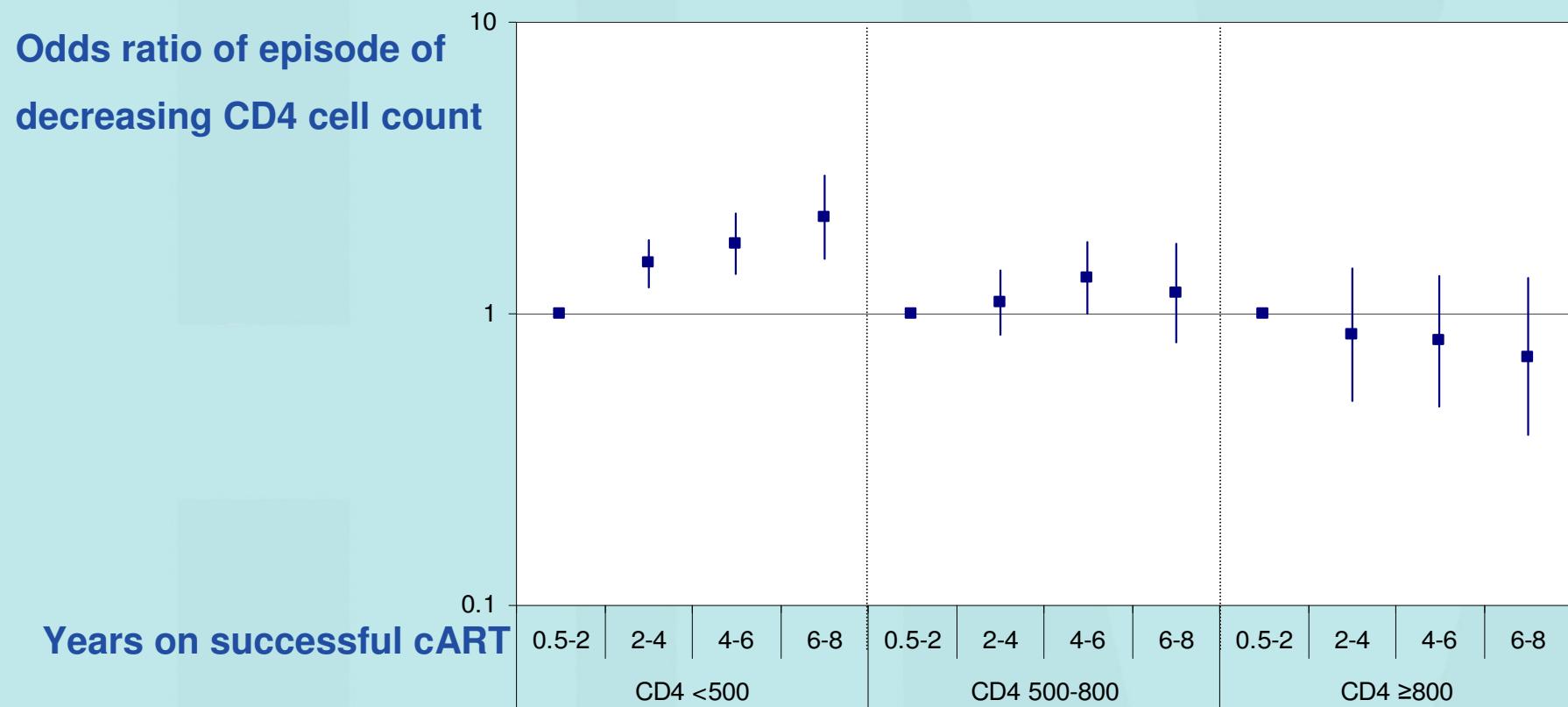
Median estimated decline  
in each episode between -  
43 and -54 cells/mm<sup>3</sup>

# Results adjusted



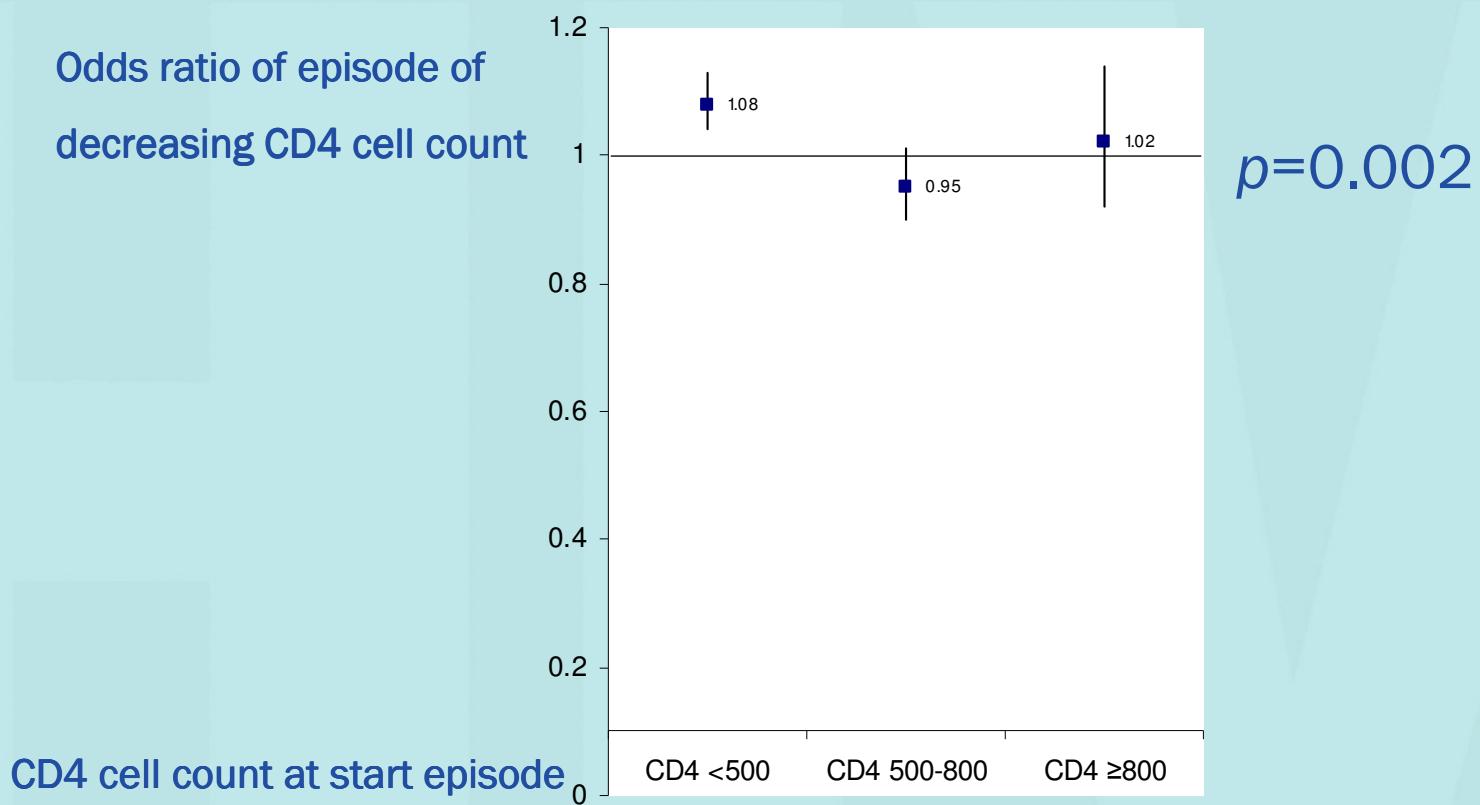
# Results

interaction CD4 cell count at start of episode and years on successful cART,  $p=0.007$



# Results

interaction CD4 cell count and years of known HIV infection (per 2 yr longer)





# Conclusion

- Episodes of decreasing CD4 cell counts were common among patients on virologically successful cART,
  - Especially at high CD4 cell counts.
- Probability of episode of decreasing CD4 cell counts higher in earlier calendar years of starting cART.
- At <500 CD4 cells/mm<sup>3</sup> increasing probability of episodes of decreasing CD4 cell counts
  - with longer time on successful cART
  - with longer duration of known HIV infection.



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