INTRODUCTION

CBAS improves Patient Retention and Mortality in Adults Receiving Antiretroviral Treatment: Five-Year Outcomes from a Multicentre Cohort Study in South Africa

ABSTRACT

This study evaluated the effect of a community-based adherence support program on survival and retention in care among patients receiving ART in five South African provinces. Patients who received the program had higher survival and lower rates of mortality and loss to follow-up compared to those who did not receive the program. The study also found that the program was associated with improved psychosocial outcomes, which in turn led to improved adherence and retention in care.

METHODS

A multicentre cohort study of adults starting ART was conducted at 57 public health facilities supported by Khe’thimpilo (K). A South African nongovernmental organisation (NGO) that provides health care services to underserved communities. Patients were enrolled at baseline, and adherence data were collected at follow-up visits. Kaplan-Meier and Cox analyses were used to compare outcomes between patients who received and did not receive CBAS.

RESULTS

Patients who received CBAS had a 34% reduction in mortality and a 38% reduction in the risk of loss to follow-up compared to those who did not receive the program. The program was associated with improved psychosocial outcomes, which in turn led to improved adherence and retention in care.

Conclusions

Patients receiving CBAS had reduced mortality and improved retention in care. Further scale-up of these programs should be considered for other regions in the country to improve survival and retention in care for ART patients.

Acknowledgements

The authors acknowledge the contributions of all the stakeholders involved in the implementation of the CBAS program. The study was supported by funding from PEPFAR and the Global Fund to Fight AIDS, Tuberculosis, and Malaria.

DISCUSSION

This study provides data on the effectiveness of the large-scale implementation of CBAS programs in South Africa. The results are consistent with previous studies, suggesting that these programs can improve patient outcomes in terms of survival and retention in care. The program was associated with improved psychosocial outcomes, which in turn led to improved adherence and retention in care. These findings support the need for further scale-up of CBAS programs in other regions of the country.