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4th International AIDS Society Conference on **HIV** Pathogenesis and Treatment

Sydney, Australia - July 22 - 25, 2007

MORTALITY ASSOCIATED WITH TUBERCULOSIS IN HIV POSITIVE AND NEGATIVE PATIENTS IN THE HAART ERA, IN RIO DE JANEIRO, BRAZIL

IAS Conf HIV Pathog Treat 2007 Jul 22-25;4th: Abstract No. MOAB105

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OBJECTIVES: To compare mortality associated with tuberculosis (TB) between HIV infected patients and HIV negative subjects who started anti-TB therapy and to analyze variables that influenced the risk of TB-associated death.

METHODS: A prospective cohort study was conducted at the Tuberculosis Referral Center of Instituto de Pesquisa Evandro Chagas - Fiocruz, Rio de Janeiro, Brazil, from January 2000 to August 2006. Patients who had a positive culture for *Mycobacterium tuberculosis* and gave a written informed consent were included in the study. Tuberculosis and HAART were offered following the Brazilian National Recommendations.

RESULTS: Two hundred and seven patients were enrolled, 106 HIV positive and 101 HIV negative patients. Disseminated TB ($p<0.001$) and isolation of *M. tuberculosis* in blood cultures ($p=0.025$) were significantly more common among HIV-infected patients. Eighty seven HIV-positive and 98 HIV-negative patients used rifampicin until the end of TB therapy ($p<0.001$). At presentation, the mean CD4 cell count among HIV-infected patients was 170,13 cell/mm³ and the mean viral load was 4,94 log. There were 28 deaths among HIV infected subjects and 7 among HIV negative patients during follow-up ($p<0.001$). Deaths were associated with TB in 22 HIV-positive subjects and in 3 HIV-negative patients ($p<0.001$). TB-associated deaths were significantly more common in patients who had disseminated disease ($p<0.001$), positive blood cultures ($p=0.001$) and who did not use rifampicin until the end of the therapy ($p=0.002$). Among HIV infected subjects, treatment with HAART was associated with a lower risk of TB-associated death ($p=0.001$). However, a subgroup analysis showed that mortality among HIV-infected patients treated with HAART was still significantly higher

compared with mortality among HIV-negative patients ($p=0.011$).

CONCLUSIONS: These results suggest that despite the free access to HAART in Brazil, TB-associated mortality among patients who started anti-TB therapy is still significantly higher among HIV/TB co-infected subjects than among HIV negative patients.

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2007-07-22

MOAB105

TB / HIV: Still a Deadly Partnership

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