



Disability Experienced by People Living with HIV

Darren Brown

Chelsea and Westminster Hospital NHS Foundation Trust





Declaration of interests relating to this presentation

This presented unpublished study is funded by the National Institute for Health Research (NIHR) Masters of Research in Clinical Research. The views expressed are those of the author(s) and not necessarily those of the NIHR or the Department of Health and Social Care.

FUNDED BY

National Institute for Health Research

Contents



- What is Disability and how is it associated to living with HIV
- Prevalence of Disability experienced by people living with HIV in the UK
- Domains of Disability experienced by people living with HIV in the UK
- Potential risk factors of Disability
 experienced by people living with HIV in the UK

Health Conditions

Susceptible to developing health conditions arising from HIV, long-term ARVs and Ageing

50+

Living Longer

People living with HIV are living longer

Health Challenges

The combination of HIV, ageing and associated multi-morbidity can create physical, cognitive, mental and social health-related challenges



Multi-morbidity

As a result, multi-morbidity, is becoming increasingly common among people living with HIV

nallenges Episodic Disability

The episodic disability
framework describes the unique
dimensions of disability
experienced by people living
with HIV



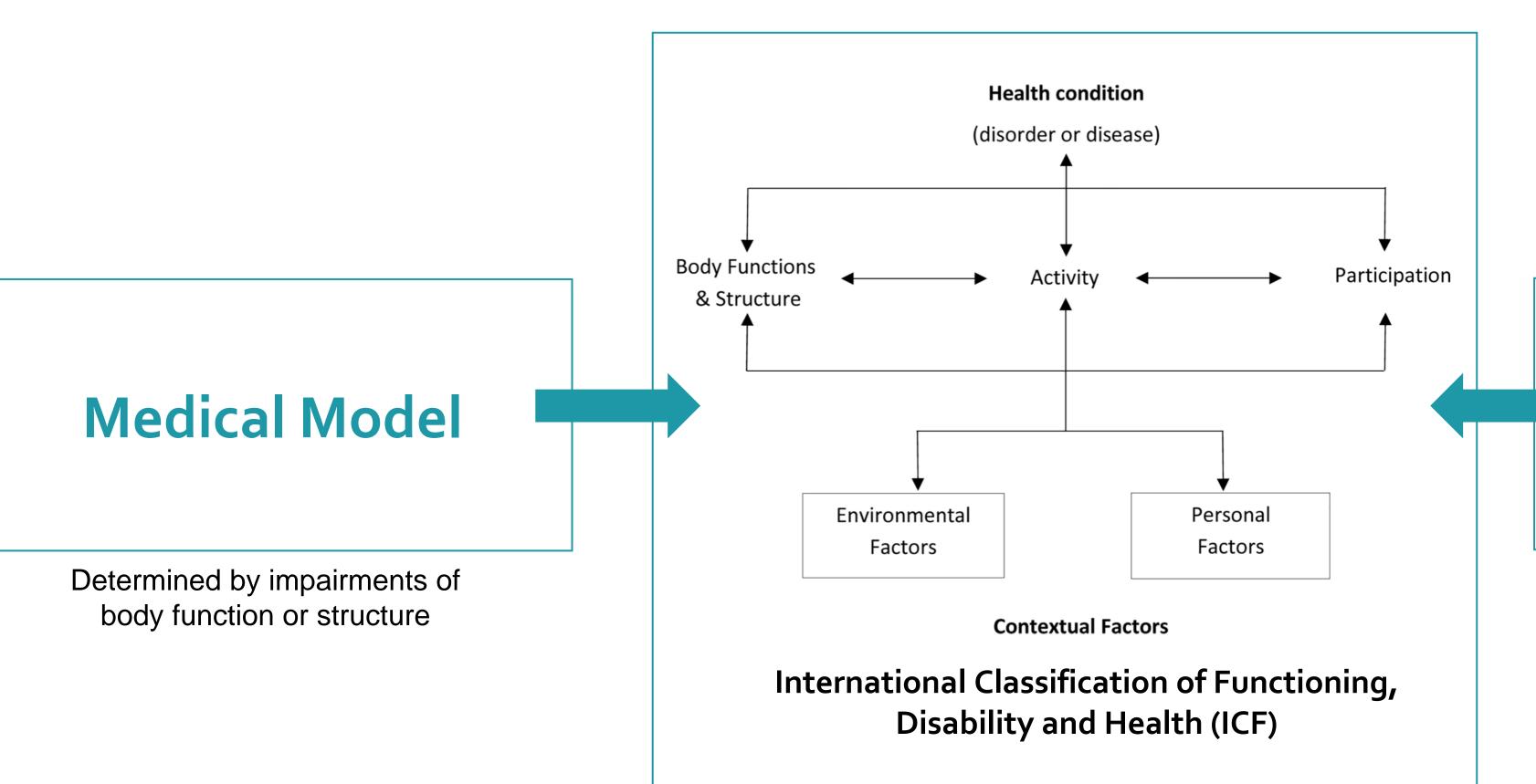
Disability

Collectively these health-related challenges may be conceptualised as disability, & rehab is recommended to support physical, mental & social health challenges

Defining Disability







Social Model

Disability results from barriers imposed by Societies (eg: inaccessible built environments, information communication), that isolate and exclude people with impairments from full and equal participation

http://www.who.int/classifications/icf/en/

Measuring Disability



Six Domains of Disability:

- Cognition
- Mobility
- Self-Care
- Getting Along
- Life Activities
- Participation



12-item version, self-administered

This questionnaire asks about <u>difficulties due to health conditions</u>. Health conditions include diseases or illnesses, other health problems that may be short or long lasting, injuries, mental or emotional problems, and problems with alcohol or drugs.

Think back over the <u>past 30 days</u> and answer these questions, thinking about how much difficulty you had doing the following activities. For each question, please circle only <u>one</u> response.

In the past 30 days, how much difficulty did you have in:						
S1	Standing for long periods such as 30 minutes?	None	Mild	Moderate	Severe	Extreme or cannot do
S2	Taking care of your household responsibilities?	None	Mild	Moderate	Severe	Extreme or cannot do
S3	Learning a new task, for example, learning how to get to a new place?	None	Mild	Moderate	Severe	Extreme or cannot do
S4	How much of a problem did you have joining in community activities (for example, festivities, religious or other activities) in the same way as anyone else can?	None	Mild	Moderate	Severe	Extreme or cannot do
S5	How much have <u>you</u> been <u>emotionally</u> <u>affected</u> by your health problems?	None	Mild	Moderate	Severe	Extreme or cannot do





12

In the pas	st 30 days, how much difficulty did you have	e in:				
S6	Concentrating on doing something for ten minutes?	None	Mild	Moderate	Severe	Extreme or cannot do
S7	Walking a long distance such as a kilometre [or equivalent]?	None	Mild	Moderate	Severe	Extreme or cannot do
S8	Washing your whole body?	None	Mild	Moderate	Severe	Extreme or cannot do
S9	Getting <u>dressed</u> ?	None	Mild	Moderate	Severe	Extreme or cannot do
S10	Dealing with people you do not know?	None	Mild	Moderate	Severe	Extreme or cannot do
S11	Maintaining a friendship?	None	Mild	Moderate	Severe	Extreme or cannot do
S12	Your day-to-day work?	None	Mild	Moderate	Severe	Extreme or cannot do

H1	Overall, in the past 30 days, how many days were these difficulties present?	Record number of days
H2	In the past 30 days, for how many days were you totally unable to carry out your usual activities or work because of any health condition?	Record number of days
Н3	In the past 30 days, not counting the days that you were totally unable, for how many days did you <u>cut back</u> or <u>reduce</u> your usual activities or work because of any health condition?	Record number of days

This completes the questionnaire. Thank you.

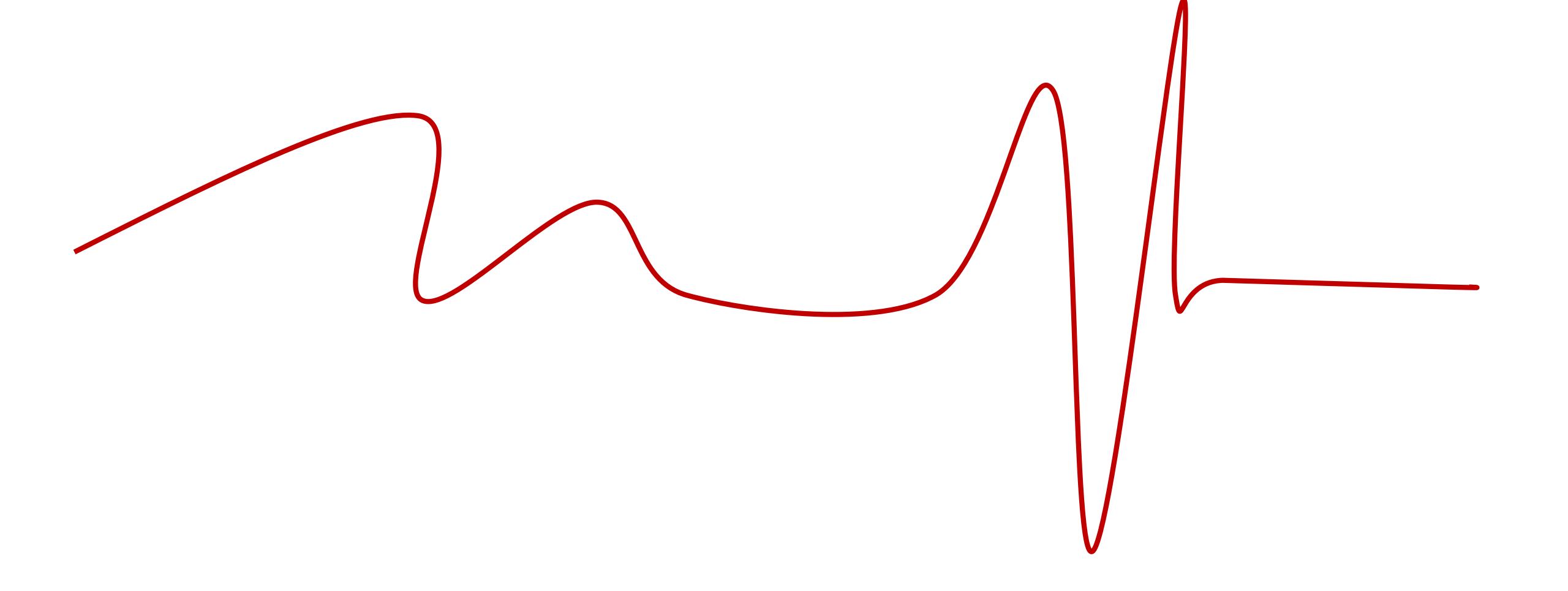
http://www.who.int/classifications/icf/whodasii/en/





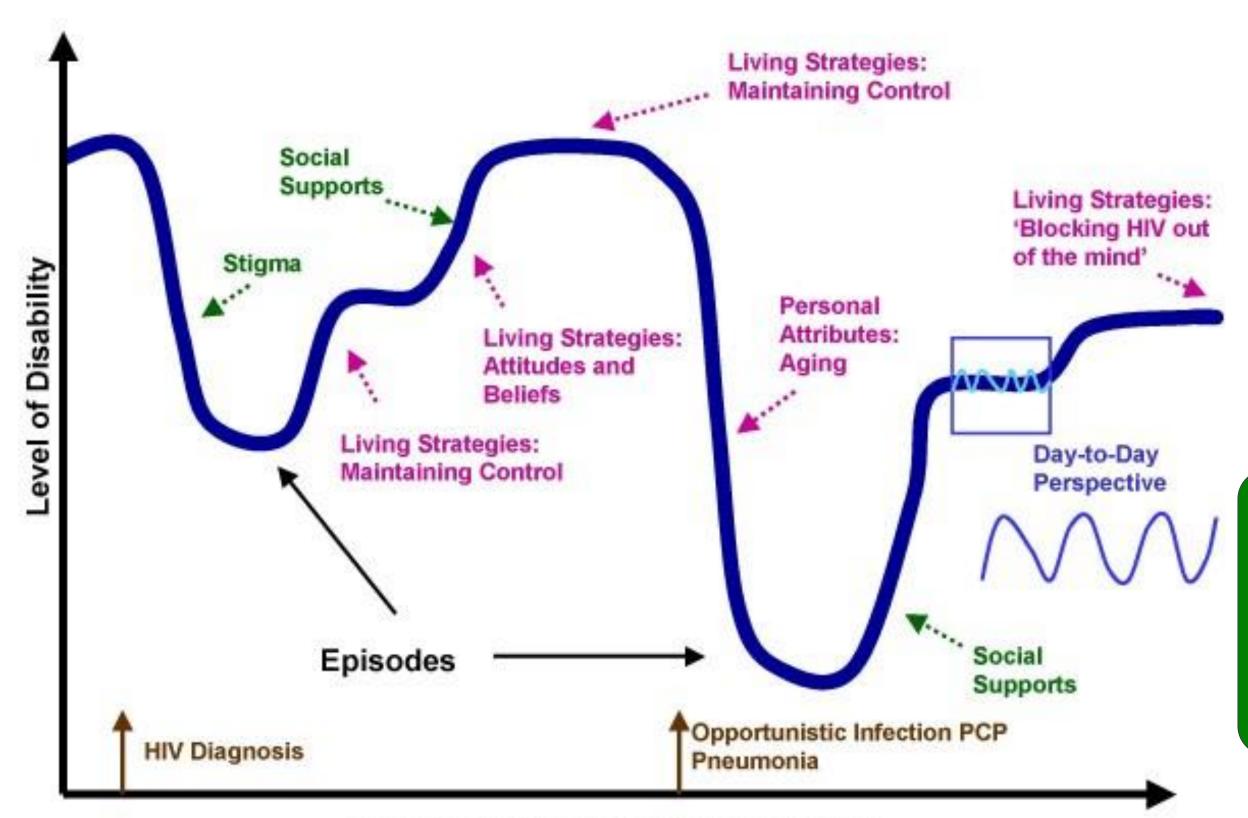
Episodes of Wellness and Illness

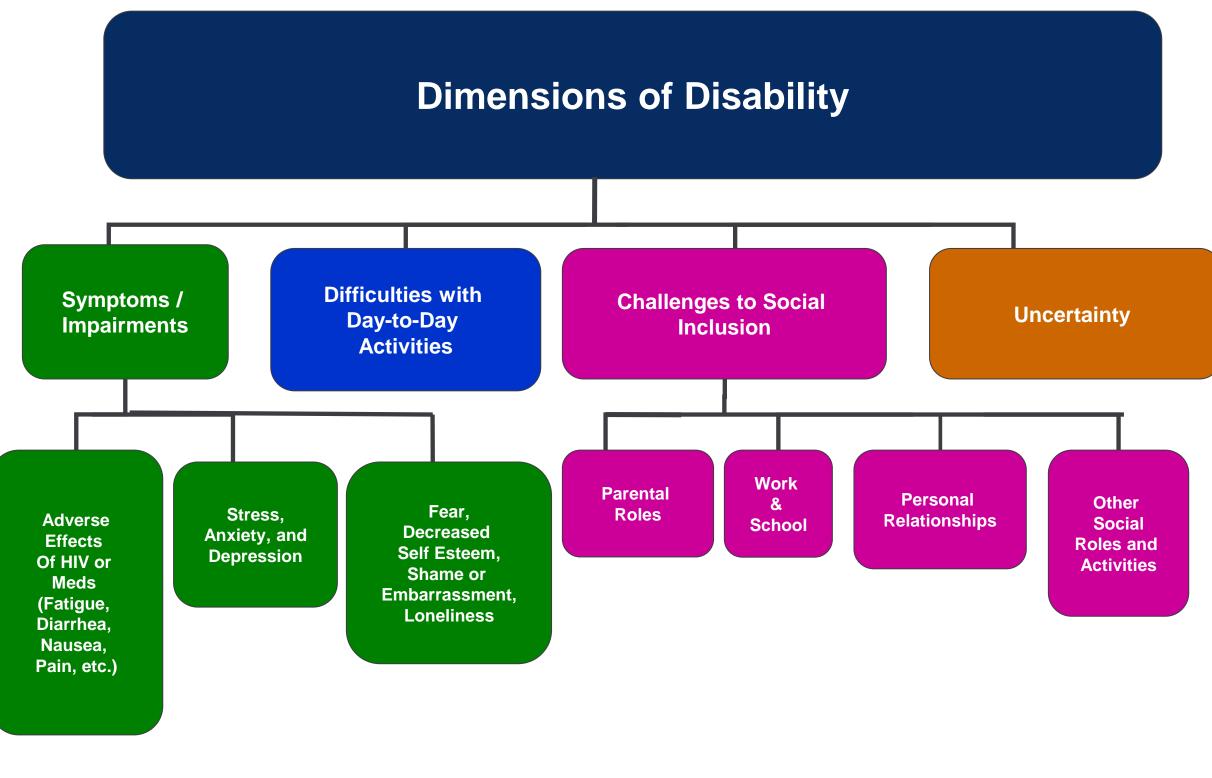




Episodic Disability

@KellyOBrien25





Chelsea and Westminster Hospital **NHS**

NHS Foundation Trust

Time (months, years living with HIV)

O'Brien et al. Health and Quality of Life Outcomes 2008 **6**:76 doi:10.1186/1477-7525-6-76 http://www.hqlo.com/content/6/1/76





Episodic Disability

Open Access Research

@KellyOBrien25

Hard to take part in

activities

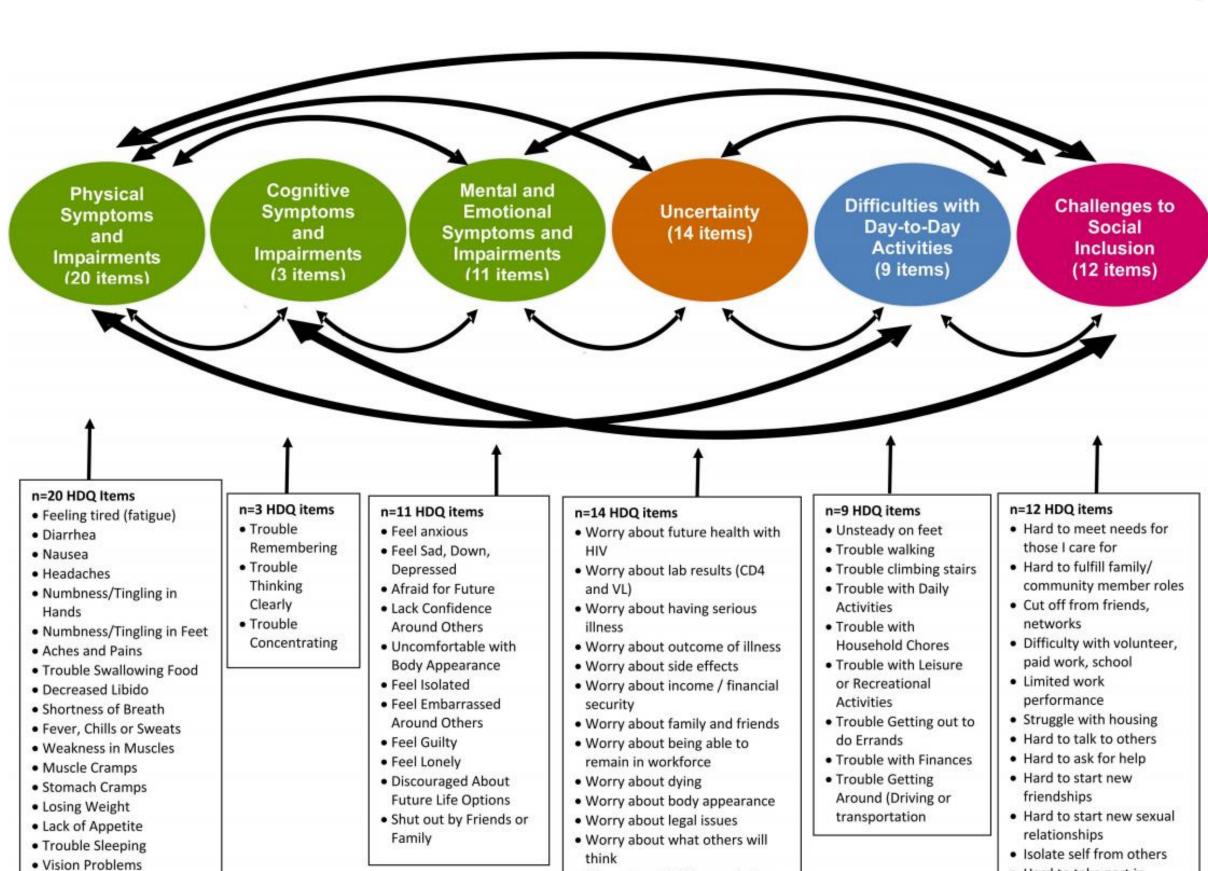
leisure or recreational

BMJ Open Measuring disability experienced by adults living with HIV: assessing construct validity of the HIV Disability Questionnaire using confirmatory factor analysis

Chelsea and Westminster Hospital **MHS**

NHS Foundation Trust





Worry about HIV transmission

· Put life decisions on hold

because of uncertainty

						cnange	a) <u>over</u>
Statement	Check the bo	ox that de	scribes how y	ou are fe	eling <u>today</u> .	the pas	t week?
I feel too	Not at all	Slightly	Moderately	Very	Extremely	Yes	No
fatigued or tired							
to do my usual	(0)	(1)	(2)	(3)	(4)	(4)	(0)
activities.						(1)	(0)

Figure 1 A priori measurement model for confirmatory factor analysis of the HIV Disability Questionnaire.

#RehabHIV

Hearing Problems

Feeling Dizzy

Has this challenge fluctuated (or changed) ever

HIV Disability Questionnaire



HDQ is the sole HIV-specific Patient Reported Outcome Measure (PROM) of disability

The HDQ has demonstrated validity and reliability when used with people living with HIV in Canada¹, Ireland², USA³, and the UK⁴

The disability domain "*Uncertainty of Worrying about the Future*" is the most present and severe domain of disability experienced by people living with HIV in Canada¹, Ireland², USA³ and UK⁴.

1) O'Brien K,K., Solomon P, Bayoumi AM. Measuring disability experienced by adults living with HIV: assessing construct validity of the HIV Disability Questionnaire using confirmatory factor analysis. BMJ Open 2014 09/01;4(8):e005456-e005456.

³⁾ O'Brien KK, Kietrys D, Galantino ML, Parrott JS, Davis T, Levin T, Tran Q, Solomon P. Reliability and Validity of the HIV Disability Questionnaire (HDQ) with Adults Living with HIV in the United States. 26th Annual Canadian Conference on HIV/AIDS (CAHR Conference). Montreal, Quebec. April 6-9, 2017. 2017.

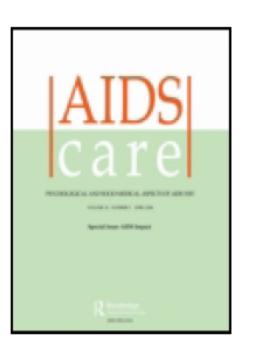


²⁾ O'Brien K,K., Solomon P, Bergin C, O'Dea S, Stratford P, Iku N, et al. Reliability and validity of a new HIV-specific questionnaire with adults living with HIV in Canada and Ireland: the HIV Disability Questionnaire (HDQ). Health Qual Life Outcomes 2015 08/12;13:124-124.

Ageing and Uncertainty



@solomon_patty



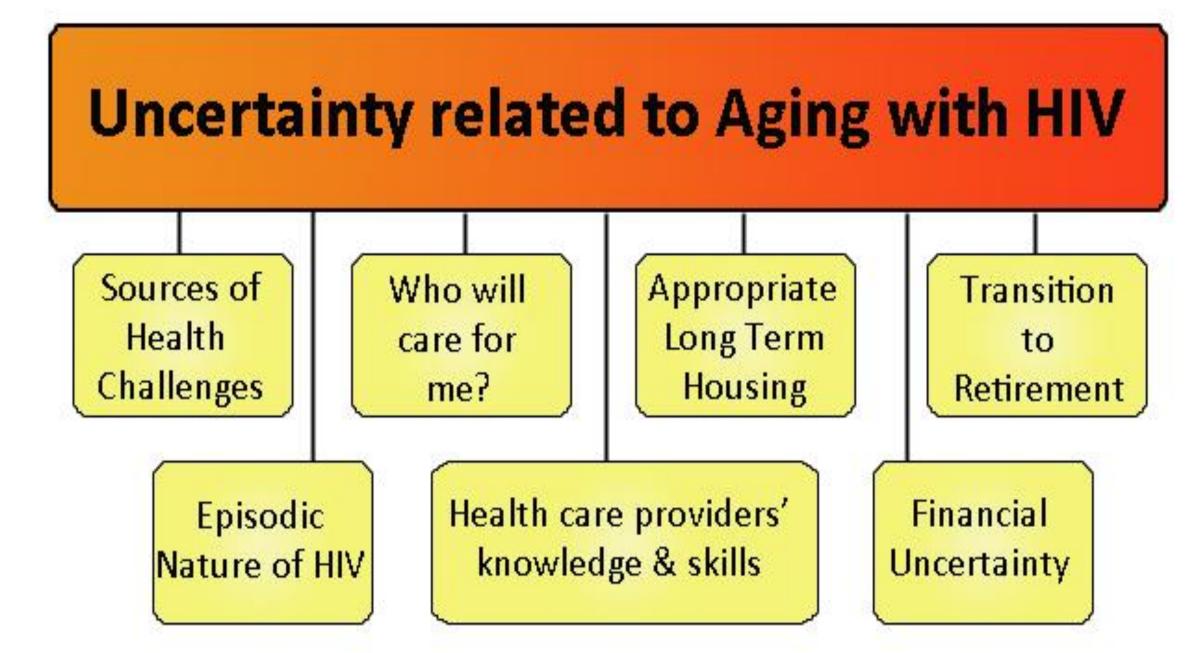
AIDS Care: Psychological and Socio-medical Aspects of AIDS/HIV

Publication details, including instructions for authors and subscription information: http://www.tandfonline.com/loi/caic20

Aging with HIV and disability: The role of uncertainty

Patricia Solomon^a, Kelly O'Brien^b, Seanne Wilkins^a & Nicole Gervais^a

^b Department of Physical Therapy, University of Toronto, Toronto, Ontario, Canada Published online: 26 Jun 2013.



^a School of Rehabilitation Science, McMaster University, Hamilton, Ontario, Canada

Ageing and Uncertainty



@solomon_patty

financial stress interpersonal stress fatigue memory Time 1 Time 2 Time 3 Time 4

Figure 1. Participant A. Example of decreasing disability over time.

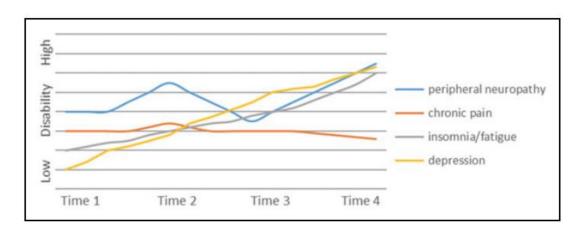


Figure 2. Participant B. Example of increasing disability over time.

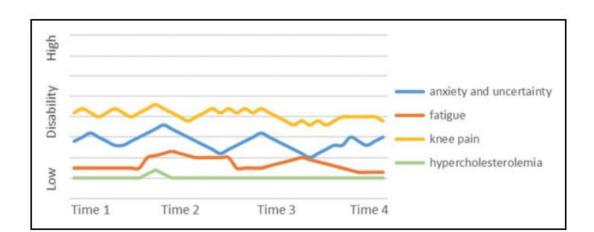


Figure 3. Participant C. Example of stable over time.

Trajectories of Episodic Disability in People Aging with HIV: A Longitudinal Qualitative Study

Patricia Solomon, PhD¹, Kelly Kathleen O'Brien, PhD², Stephanie Nixon, PhD², Lori Letts, PhD¹, Larry Baxter³, and Nicole Gervais, MA¹

Journal of the International Association of Providers of AIDS Care Volume 17: 1–7
© The Author(s) 2018
Reprints and permission:
sagepub.com/journalsPermissions.nav
DOI: 10.1177/2325958218759210
journals.sagepub.com/home/jia





Four Phenotypes of Episodic Disability



Acceptance and optimism are hallmarks of those whose phenotypes were stable or improved over time



Understanding a persons episodic trajectory may help to tailor interventions to promote stability, mitigate upwards trajectory and increase time between episodes of disability

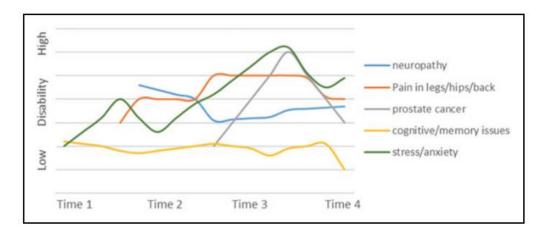


Figure 4. Participant D. Example of significant fluctuations in disability over time

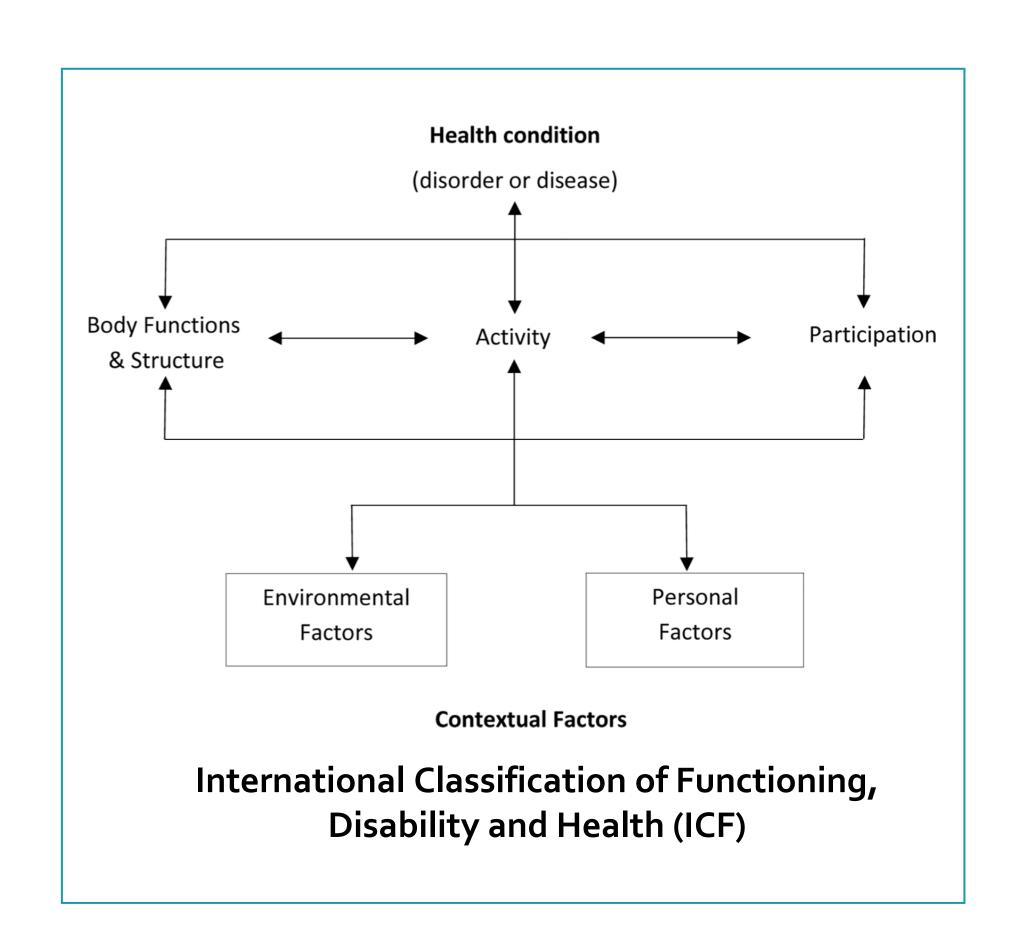
www.ncbi.nlm.nih.gov/pubmed/29464973



Prevalence of Disability



- High prevalence of PLHIV experiencing "disability" 1
- However most literature focuses on health conditions and impairments²
- Impairments alone are NOT an adequate proxy for disability 3
 - Not multi-dimensional
 - Do not consider interactions between health and context



¹⁾ Banks et al. (2015) 'The relationship between HIV and prevalence of disabilities in sub-Saharan Africa: systematic review (FA)', Tropical Medicine & International Health, 20(4), pp. 411-429.

³⁾ Mont, D. (2007) Measuring disability prevalence (English). SP discussion paper; no. 706. Washington, DC: World Bank. Available at: http://documents.worldbank.org/curated/en/578731468323969519/Measuring-disability-prevalence



²⁾ Hanass-Hancock et al. (2013) 'HIV-related disability in HIV hyper-endemic countries: a scoping review', World Journal of AIDS, 3(03), pp. 257.

Prevalence of Disability





WHODAS criteria presence of functional limitations/disability:

35.5% prevalence (n=1042) 1

51.9% prevalence (n=1044) ²

Disability is driven by different factors in different parts of the world. Therefore, measuring prevalence of self-reported functional disability, will provide info about the extent of disability and the changing needs of PLHIV in the UK, reflecting the long-term nature of HIV care.

1) Hanass-Hancock et al. (2015) 'Disability and living with HIV: baseline from a cohort of people on long term ART in South Africa', PloS One, 10(12), pp. e0143936.
2) Myezwa et al. (2018) 'Disability and health outcomes–from a cohort of people on long-term antiretroviral therapy', SAHARA-J: Journal of Social Aspects of HIV/AIDS, 15(1), pp. 50-59.









"Prevalence, domains and risk factors of disability experienced by people living with HIV during routine outpatient HIV care in London, UK: a cross-sectional self-report study"

Research Objectives:

- Measure prevalence of disability
- Report types of disability experienced
- Evaluate potential risk factors of disability



- London ½ PLHIV population
- Routine care = representative
- No UK data: observational & exploratory, no sample size calc.
- Aimed to recruit 200

Disability measured using UK Equality Act 2010, WHODAS, & HDQ











Sample Characteristics

(n=201)

Taking ART	100%
Viral Suppression	97%
Median duration with HIV	11 years
Diagnosed Late	52%

Male	87%
Gay/Lesbian	79%
White Ethnicity	72%
Mean Age	47 years
Age Range	22.85 years
Aged ≥50 years	41%
Median Concurrent Health Conditions	2
Self-Rated Health Status:	
- Very Good	39%
- Good	37%

0	Representative of people	living with HIV in the UK
---	--------------------------	---------------------------

Not representative of people living with HIV in the UK

No comparable UK data

Economically Active: - self-employed - full-time employed - part-time employed	(67%) 21% 39% 7%
Housing: - owner occupied - private rent - social housing - homeless Educational Qualifications:	37% 36% 23% 2% (92%)
- Degree level or above	58%
- Degree level or above Living alone	44%
Living atone No adaptations @ home to	44%
Living alone No adaptations @ home to help with day-to-day activities Transportation Modes: - Tube - Bus	44% 85% 41% 30%











39.5% CI [0.33-0.46] 70.5% CI [0.64-0.77]

UK Equality Act 2010

(n=201)

- Census style questions (limited)
- May represent more severe challenges that requires complex rehabilitation
- Higher than UK general population UK 21%, London 14%

WHODAS presence of activity limitations/disability

(n=200)

- Survey style questions (more detailed)
- May represent moderate challenges that requires therapeutic interventions
- Higher than PLHIV in South Africa
 KwaZulu Natal 35.5% & Guateng 51.9%



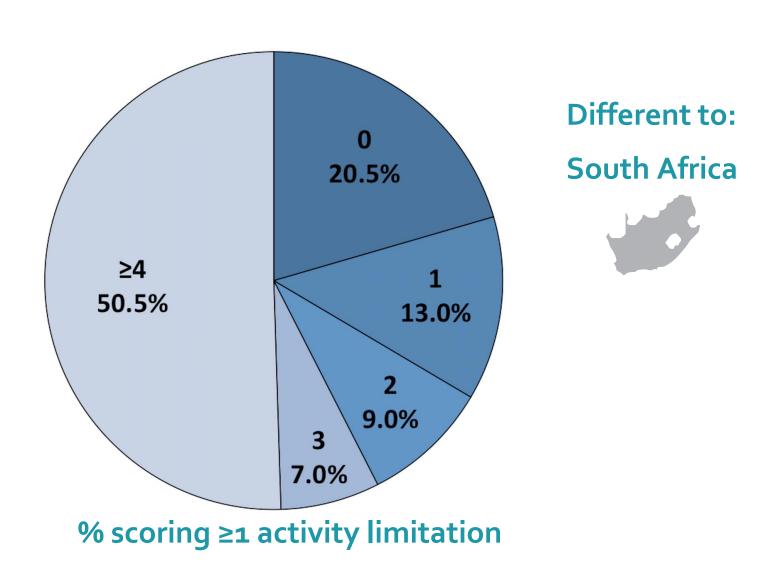




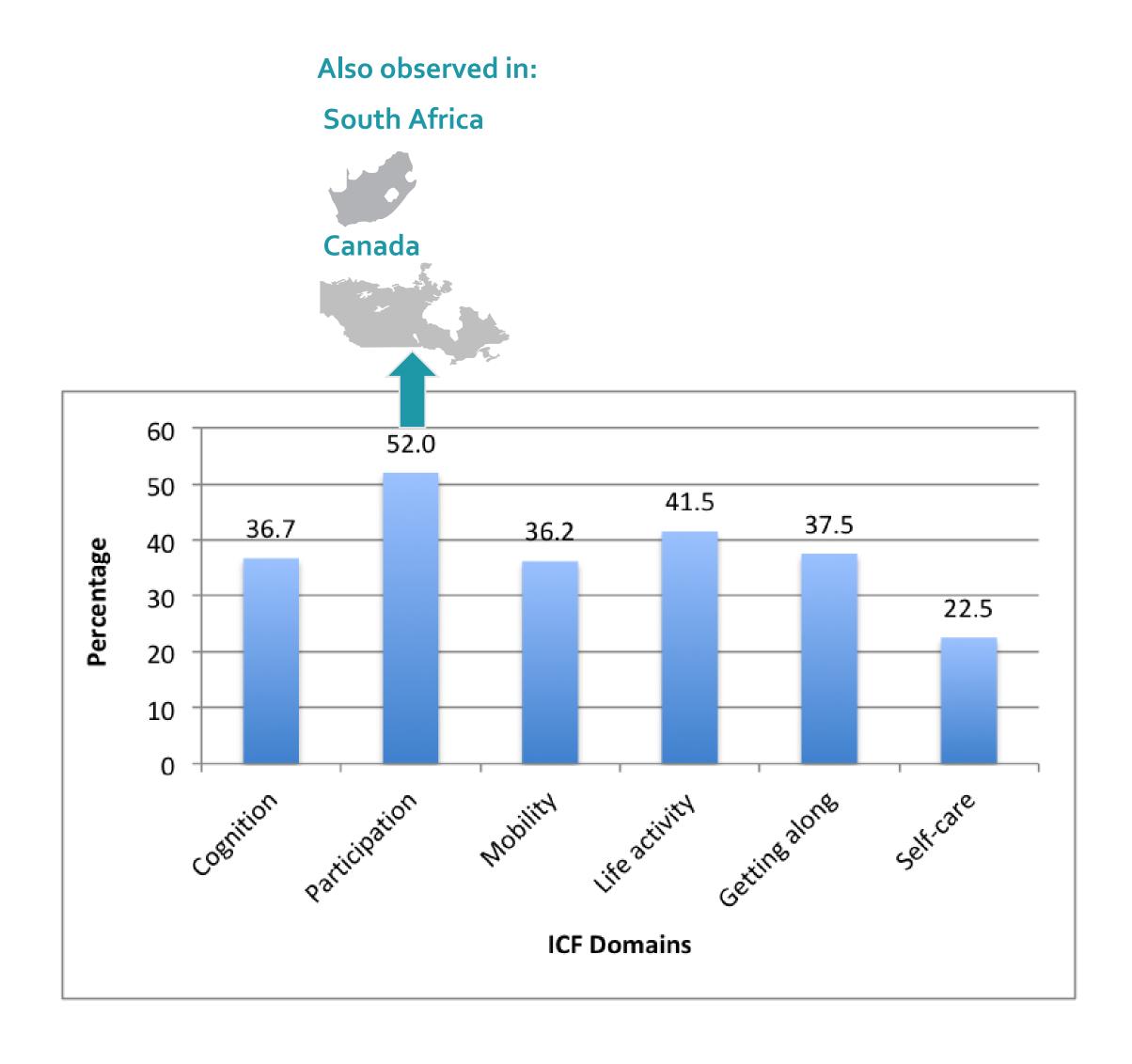




(n=200)













(n=200)



Median HDQ Scores

HDQ Disability Dimension	HDQ Presence Score	HDQ Severity Score	HDQ Episodic Score
	(IQR)	(IQR)	(IQR)
Physical symptoms and impairments	30.0 (15.0-53.8)	11.3 (5.0-26.3)	20.0 (10.0-40.0)
Cognitive symptoms and impairments	33.3 (0.0-100.0)	8.3 (0.0-25.0)	0.0 (0.0-66.7)
Mental and emotional health symptoms and impairments	45.5 (18.2-72.7)	13.6 (4.5-34.1)	18.2 (0.0-54.5)
Uncertainty or worry about the future	57.1 (28.6-78.6)	23.2 (10.7-38.9)	7.1 (0.0-42.9)
Difficulties with day-to-day activities	11.1 (0.0-44.4)	2.8 (0.0-16.7)	0.0 (0.0-22.2)
Challenges to taking part in social and community life	33.3 (8.3-58.3)	14.6 (4.2-29.2)	0.0 (0.0-25.0)
HDQ Total	36.2 (21.7-59.4)	13.4 (6.3-28.8)	17.4 (5.8-36.2)

IQR: Inter-Quartile Range









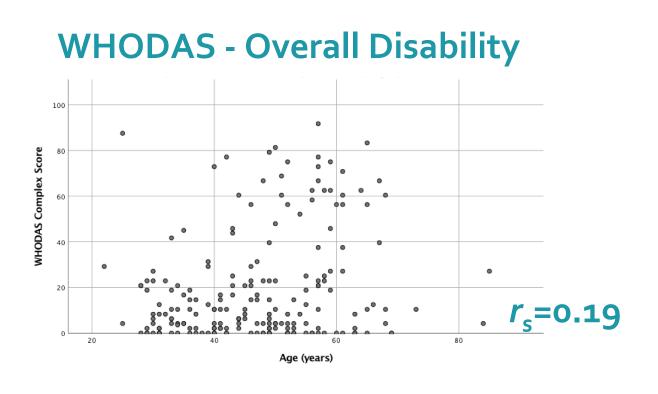


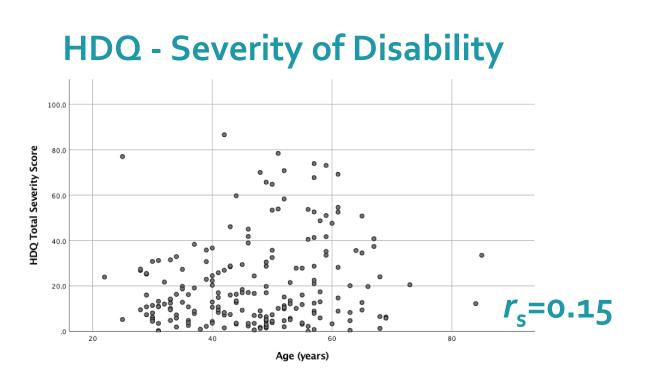
Results

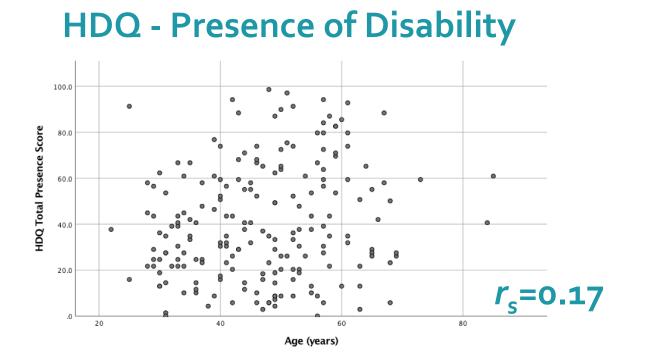


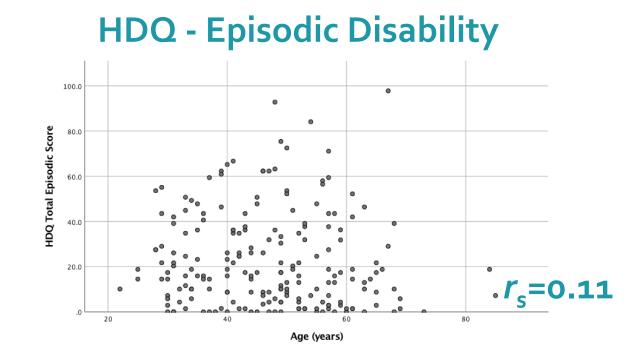
(n=200) Correlation Analysis

Clinical Significance:
Overall disability could be experienced across the life-course









Spearman's Rank Correlation Coefficient
No statistically significant linear or monotonic associations
Coefficients closer to zero









Multivariate Associations
Generalised Linear Models
HDQ Severity Scores
Bio-psychosocial characteristics



Risk Factor
Age
Gender Identity
Sexual Orientation
Ethnicity
Late HIV Diagnosis
Employment
Housing Situation
Education
Care and Support
Benefits
Rehabilitation









Disability Risk Factors - "Physical Symptoms and Impairments"

(n=200)



	Risk Factor	Characteristic	
	Age		
\bigcirc	Gender Identity	Female	
	Sexual Orientation		
	Ethnicity		
	Late HIV Diagnosis		
\bigcirc	Employment	Economic inactivity	
\bigcirc	Housing Situation	No fixed abode/other	
	Education		
	Care and Support		
\bigcirc	Benefits	Receives benefits	
\bigcirc	Rehabilitation	No rehab in past year	













Disability Risk Factors – "Cognitive Symptoms and Impairments"

(n=200)



	Risk Factor	Characteristic	
	Age		
	Gender Identity		
	Sexual Orientation		
	Ethnicity		
	Late HIV Diagnosis		
$\overline{\Rightarrow}$	Employment	Economic inactivity	
	Housing Situation		
	Education		
	Care and Support		
$\overline{\bigcirc}$	Benefits	Receives benefits	
$\overline{\Rightarrow}$	Rehabilitation	No rehab in past year	











Disability Risk Factors - "Mental and Emotional Health Symptoms and Impairments"

(n=200) **Multivariate Associations**



	Risk Factor	Characteristic	
\bigcirc	Age	<50 years	
\bigcirc	Gender Identity	Female	
	Sexual Orientation		
	Ethnicity		
	Late HIV Diagnosis		
\bigcirc	Employment	Economic inactivity	
\bigcirc	Housing Situation	No fixed abode/other	
	Education		
	Care and Support		
\bigcirc	Benefits	Receives benefits	
	Rehabilitation		













Disability Risk Factors – "Uncertainty or Worry about the Future"

(n=200)



	Risk Factor	Characteristic	
\bigcirc	Age	<50 years	
\bigcirc	Gender Identity	Female	
	Sexual Orientation		
	Ethnicity		
	Late HIV Diagnosis		
\bigcirc	Employment	Economic inactivity	
\bigcirc	Housing Situation	No fixed abode/other	
	Education		
	Care and Support		
_	Benefits		
\bigcirc	Rehabilitation	No rehab in past year	











Disability Risk Factors – "Difficulties with Day-to-Day Activities"

(n=200)



	Risk Factor	Characteristic	
	Age		
	Gender Identity		
	Sexual Orientation		
	Ethnicity		
	Late HIV Diagnosis		
$\overline{\Rightarrow}$	Employment	Economic inactivity	
	Housing Situation		
	Education		
	Care and Support		
$\overline{\bigcirc}$	Benefits	Receives benefits	
$\overline{\Rightarrow}$	Rehabilitation	No rehab in past year	













Disability Risk Factors – "Challenges to Taking Part in Social and Community Life"

(n=200)



	Risk Factor	Characteristic	
\bigcirc	Age	<50 years	
\bigcirc	Gender Identity	Female	
	Sexual Orientation		
	Ethnicity		
	Late HIV Diagnosis		
\bigcirc	Employment	Economic inactivity	
\bigcirc	Housing Situation	No fixed abode/other	
	Education		
	Care and Support		
\bigcirc	Benefits	Receives benefits	
\bigcirc	Rehabilitation	No rehab in past year	









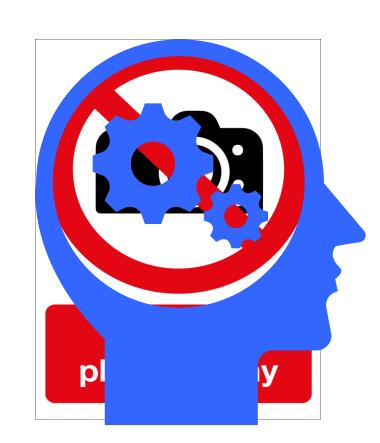




Disability Risk Factors

(n=200)

Multivariate Associations



HDQ Domains of Disability



PHYSICAL COGNITIVE MENTAL UNCERTAINTY ACTIVITIES PARTICIPATION



Received Benefits

PHYSICAL COGNITIVE MENTAL ACTIVITIES PARTICIPATION

PHYSICAL COGNITIVE UNCERTAINTY ACTIVITIES PARTICIPATION

No Rehab 12 months

PHYSICAL MENTAL UNCERTAINTY PARTICIPATION

No fixed abode

PHYSICAL MENTAL UNCERTAINTY PARTICIPATION

Aged <50 years Female

> **MENTAL UNCERTAINTY PARTICIPATION**

Conclusions

- Disability is multi-dimensional and episodic
- Different PROMs exist to measure disability
- The HDQ is the sole HIV specific disability measurement tool
- Uncertainty most present and severe domain across high income settings
- High prevalence of severe (40%) and moderate (71%) threshold disability in London, UK
- Uncertainty most present and severe, with physical most episodic disability domains
- Overall disability is not associated with age
- Disability risk factors vary by disability domains
- Economic inactivity, receiving benefits, and no rehab in past year, are risk factors present across the most number of disability domains

