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### Clinical Profile and Determinants of Loss to Follow-Up in Patients Enrolled in an Urban Antiretroviral Treatment Programme in Northwestern Nigeria

*Profil Clinique et Déterminants de la Perte de Suivi chez les Patients Inclus dans leur Programme de Traitement Antirétroviral Urbain dans le Nord-ouest du Nigeria*

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#### ABSTRACT

**INTRODUCTION:** Loss of follow up in patients enrolled on antiretroviral treatment programmes has the potential to reduce their quality of life. We set out to describe the profile and risk factors for loss to follow up in patients enrolled on our programme.

**MATERIALS AND METHODS:** In this retrospective study, we reviewed the records of patients who were identified as lost to follow up between August 2008 to July 2018. Determinants of loss to follow-up were identified by the use of binary logistic regression with SPSS to compare the data of patients lost to follow-up with randomly selected patients who were still in care.

**RESULTS:** A total of 4,250 patients were enrolled on our programme during the study period. Of these, 965 patients were identified as lost to follow-up, giving a loss to follow up rate of 22.7%. Compared to patients still in care, patients who were lost to follow up were significantly male (male, n = 395, 56% versus female, n = 310, 44%, p < 0.0001), of younger age (33.53 ± 9.05 versus 34.48 ± 9.25 years, p = 0.028), married (married, n = 669, 58.9% versus not married n = 467, 41.1%, p < 0.0001) and with evidence of low crude weight at the time of recruitment (58.58 ± 12.12 versus 60.09 ± 14.58 kg, p = 0.018).

**CONCLUSION:** Our study showed that patients who are young, male, married, recently enrolled, with evidence of the low crude weight, with WHO Clinical Stages III and IV and anaemia at enrolment are commonly lost to follow-up. Clinicians need to target this population to reduce the loss of follow up in patients on antiretroviral therapy. **WAJM 2023; 40(6): 634–639.**

**Keywords:** Loss to follow up; HIV; Antiretroviral therapy.

#### RÉSUMÉ

**INTRODUCTION:** La perte de suivi des patients inscrits dans des programmes de traitement antirétroviral peut réduire leur qualité de vie. Nous avons entrepris de décrire le profil et les facteurs de risque de perte de suivi chez les patients inscrits à notre programme.

**MATERIEL ET METHODES:** Dans cette étude rétrospective, nous avons examiné les dossiers des patients qui ont été identifiés comme perdus de vue entre août 2008 et juillet 2018. Les déterminants de la perte de suivi ont été identifiés par l'utilisation d'une régression logistique binaire avec SPSS pour comparer les données des patients perdus de vue avec des patients sélectionnés au hasard qui étaient encore en soins.

**RESULTATS:** Au total, 4 250 patients ont été inscrits à notre programme au cours de la période d'étude. Parmi eux, 965 patients ont été identifiés comme perdus de vue, soit un taux de perte de suivi de 22,7%. Comparés aux patients encore en soins, les patients perdus de vue étaient significativement des hommes (hommes, n = 395, 56% contre femmes, n = 310, 44%, p < 0.0001), plus jeunes (33.53 ± 9.05 contre 34.48 ± 9.25 ans, p = 0.028), mariés (mariés, n = 669, 58.9% versus non mariés n = 467, 41.1%, p < 0.0001) et avec un faible poids brut au moment du recrutement (58.58 ± 12.12 versus 60.09 ± 14.58 kg, p = 0.018).

**CONCLUSION:** Notre étude a montré que les patients jeunes, de sexe masculin, mariés, récemment recrutés, présentant une insuffisance pondérale brute, des stades cliniques III et IV de l'OMS et une anémie au moment du recrutement sont souvent perdus de vue. Les cliniciens doivent cibler cette population pour réduire les pertes de suivi chez les patients sous thérapie antirétrovirale. **WAJM 2023; 40(6): 634–639.**

**Mots clés:** Perte de suivi; VIH; Thérapie antirétrovirale.

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