Chelsea and Westminster Hospital Wills



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Comparison of the prevalence of nutritional issues referred for dietetic management in a HIV centre in 2007 and 2012- a retrospective analysis

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Background

Despite the availability of HAART there remains a high incidence of associated co-morbidities and increased chronic health complications associated with ageing and HIV.

Objective

We have evaluated the changes in referrals analysed in 2007 and 2012 to identify possible improvements in the provision of specialised dietetic care.

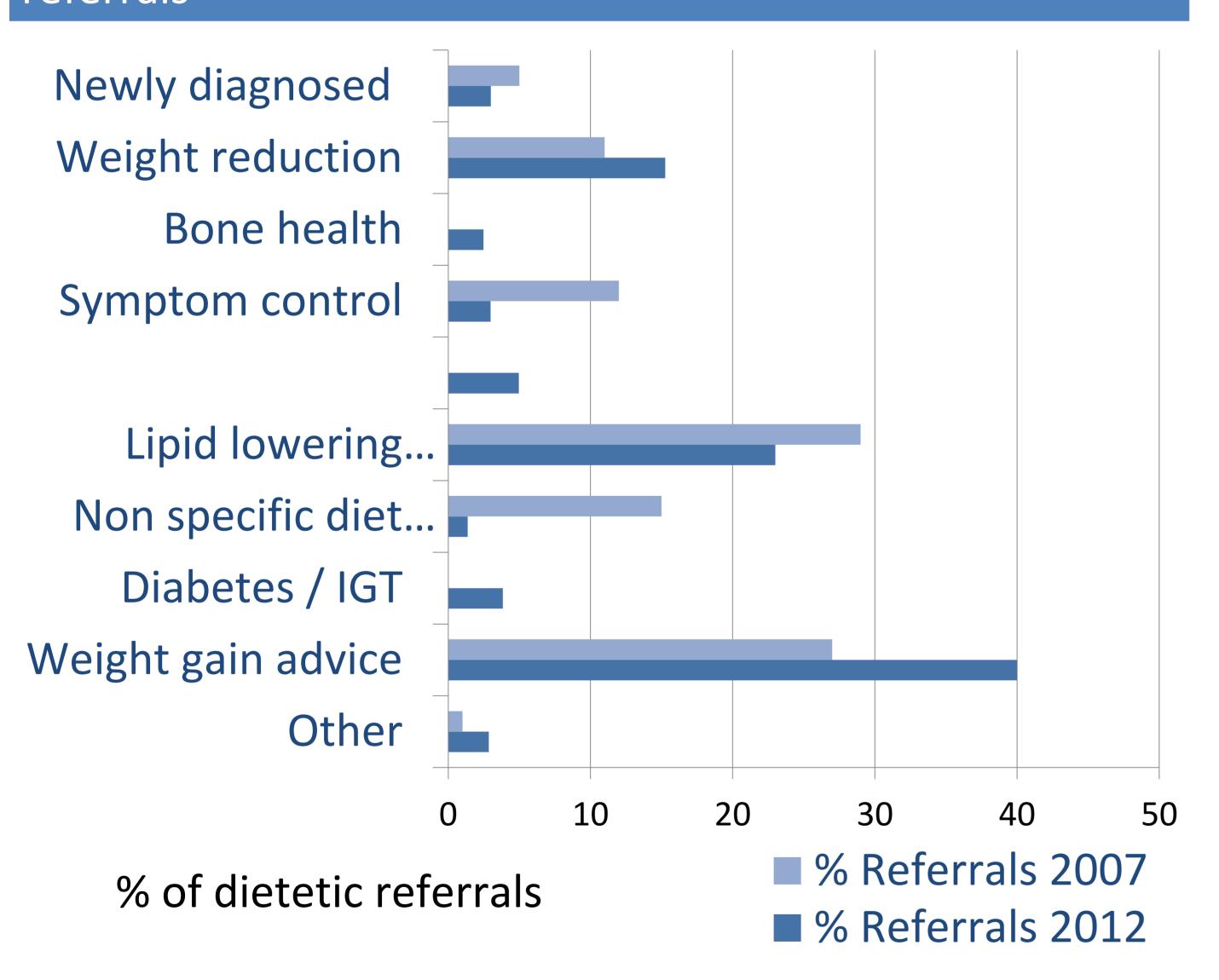
Method

We analyzed the referrals to the specialist HIV dietitian team over a 12 month period and compared this to pre analysis of the dietetic referrals in 2007

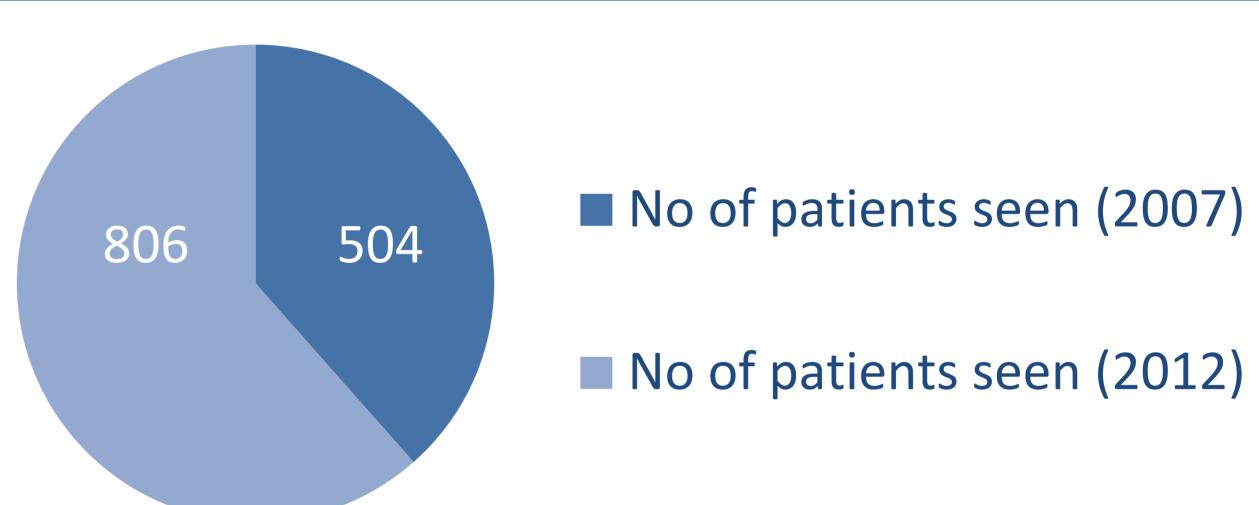
Results

A total of 504 individuals were seen in an outpatient setting between January and November 2007 compared with a total of 806 individuals seen between January and November 2012. The table below represents an increase in referrals for weight gain advice, weight reduction advice and diabetes. There has been an increase in the reasons for referral including pancreatic exocrine deficiency and bone health.

Comparison between 2007 and 2012 outpatient dietetic referrals



Comparison between 2007 and 2012 individual patients seen



Demographics

2007 Total centre patient cohort 4500 2012 Total centre patient cohort 5500 Mean age of 48 years old Female 84 & Male 722

Conclusion

Outpatient referrals has increased by 60% since 2007 in line with an increasing cohort. This data suggests there is an significant increase in referral for weight gain advice and weight reduction advice. However there is also an increase in specialised dietary advice for conditions associated with HIV. The specialised dietician needs to be competent not only in specialised HIV care but also the specific issues associated with long term HIV.

References:

-British HIV association: Stadards of care for people living with HIV 2013 http://www.bhiva.org/documents/Standards-of-care/BHIVAStandardsA4.pdf -Lundgren, J. D., Battegay, M., Behrens, G., De Wit, S., Guaraldi, G., Katlama, C., Martinez, E., Nair, D., Powderly, W. G., Reiss, P., Sutinen, J., Vigano, A. & Committee, E. E. 2008. European AIDS Clinical Society (EACS) guidelines on the prevention and management of metabolic diseases in HIV. HIV Med, 9, 72-81.

-Lazzaretti R, Pinto-Riberiro J, Kuhmmer R et al. Dietary intervention when starting HAART prevents the increase in lipids, independently of drug regimen: a randomized trial.

4th IAS conference on HIV pathogenesis, Treatment and Prevention, Sydney. Abstract WEAB303.2007

