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Tuberculosis and HIV co-infection: lessons learned from the National Infectious Diseases Reference department in Senegal

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BACKGROUND

- TB among people living with HIV (PLHIV)
 - Most frequent opportunistic infection: prevalence = 6%
 - Leading cause of death
- HIV prevalence among TB cases = 3.6%

OBJECTIVES

- To describe the characteristics of TB cases by HIV status
- To describe their treatment pathway
- To identify prognostic factors in PLHIV

METHODS

- Retrospective cohort study
 - Patients hospitalized at the department of infectious and tropical diseases (DITDD)
 - During 2020-2022
 - With TB
- Cumulative incidence of death: Kaplan-Meier curves.
- Comparison of survival curves: log rank test.
- Prognostic factors: Cox regression

RESULTS (1)

- 363 patients
 - HIV infected = 188 (51.8%)
 - Mean age: 40.6 ± 12.4 years; 51.3% of men
 - WHO stage 4: 77.7%
 - ART naïve: 54.3%
 - Mean CD4+ T-cell count = $96 \pm 75/\text{mm}^3$

RESULTS (2)

- 164 PLWHs (87.2%) seen in another health facility before ITDD
 - Missed opportunities for TB diagnosis (59.6%) and treatment (38.8%)
 - Missed opportunities for HIV testing (6.9%) and ART initiation (49.4%)
- Mortality rate: 7/100 person-months
 - Not different by HIV status.
 - Risk factor for death: CD4+ T cells < 50/mm³ (HR = 9.7; p = 0.027).

CONCLUSIONS

- TB common among PLHIV
- Treatment pathway
 - Missed opportunities for diagnosis and treatment.
 - Advanced immunodepression
- High lethality