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Effectiveness of Mobile Phone Reminders in Improving Adherence and Treatment Outcomes of Patients on Art in Adamawa State, Nigeria: A Randomized Controlled Trial

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Abstract

Adherence to antiretroviral therapy (ART) among people living with human immunodeficiency virus (PLHIV) is very imperative in achieving successful treatment outcome and decreased risk of HIV transmission to uninfected people. This is a randomized controlled trial study conducted in Adamawa State, Nigeria. 244 patients were randomized to intervention or control group. Data obtained from the study was analyzed using SPSS Version 21. Frequencies distributions, descriptive statistics were presented, Inferential statistics such as Pearson Chi square, McNemar's test, Paired T test, correlation and repeated measures ANOVA were used to measure the strength of associations and relationships between the various variables and probability of statistically significant level set < 0.05 at 95% Confidence interval. The response rates in the intervention and control groups were 99% and 96.7% at 3 months; 97.5% and 92.6% at 6 months, respectively. Individual socio-demographic characteristics were not found to be associated with adherence levels in this study. At six months follow up the proportion of the respondents who had good adherence (>95%) was higher (89.1%) and statistically significant ($p=0.001$) in the intervention group compared to control group (63.1%) and ($p=0.617$). A significantly higher frequency in missed clinic appointments (7.98 vs 1.68) ($p=0.024$) was noticed in the control group, and a statistically significant increase in the proportion of participants who reported an increase in weight ($p=0.001$), CD4 cells counts ($p=0.001$) and decrease in the presence of tuberculosis and other opportunistic infections were observed among patients in the intervention group.

Author Keywords

Adherence, Antiretroviral Therapy (ART), CD4 cell count, Nigeria, People Living with HIV (PLWH)

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