

THE ONTARIO HIV TREATMENT NETWORK

STRIVING FOR EXCELLENCE  
ACHIEVING IMPACT



# EVIDENCE INFORMING THE INTERSECTION OF HIV, AGING AND HEALTH: A SCOPING REVIEW

**LORI CHAMBERS, MSW**

Project Coordinator, Systematic Reviews and Knowledge Transfer and Exchange, OHTN  
PhD Student, School of Social Work, McMaster University

THE ONTARIO HIV TREATMENT NETWORK

STRIVING FOR EXCELLENCE  
ACHIEVING IMPACT



**No conflicts of interest**

# **THE ISSUE**

**GROWING NUMBER OF PEOPLE OVER AGE 50  
ARE LIVING WITH HIV, BOTH NEWLY INFECTED  
INDIVIDUALS AND LONG-TERM SURVIVORS**

**HEALTH RESEARCH, POLICY, AND PRACTICE  
MUST ADAPT TO THE “GREYING” OF HIV.**

## KEY ISSUES

- Physical, mental and psychosocial health issues associated with HIV and aging, both separately and concomitantly
- Changes in social participation as people with HIV age
- Significant knowledge gaps regarding the sexual health of older people, including those with HIV



**To locate and catalogue research evidence reporting on HIV and health for older people living with HIV ( $\geq 50$  years)**

Health domains reviewed:

- physical health
- mental health
- sexual health
- access to health services
- antiretroviral adherence
- social participation



# SEARCHES

- Electronic database search:** AgeLine, CINAHL, Cochrane Library, Embase, Lilacs, MEDLINE, PsycINFO, Scopus, Social Science Abstracts, Social Service Abstracts, Social Work Abstracts, Sociological Abstracts, and Web of Science.

- Grey literature search**

- Recommendations** from authors and organizations knowledgeable on HIV & aging

- Hand search of key journals :** Aging and Mental Health, AIDS, AIDS Care, AIDS Patient Care & STDs, Clinical Gerontologist, Educational Gerontology, Journal of Applied Gerontology, Journal of Gerontological Social Work, Journal of Acquired Immune Deficiency Syndromes (JAIDS), Research on Aging, The Gerontologist



## SELECTION CRITERIA

- Sample must include people living with HIV/AIDS\*
- Study population included sample or sub-sample  $\geq 50$  years
- Study topic addressed one or more of the identified health domains (physical health, mental health, sexual health, access to health services, social participation, adherence)
- Reported findings from empirical research (qualitative, quantitative, mixed method study, systematic review)
- Data collected  $\geq 1996$  (intro of HAART)

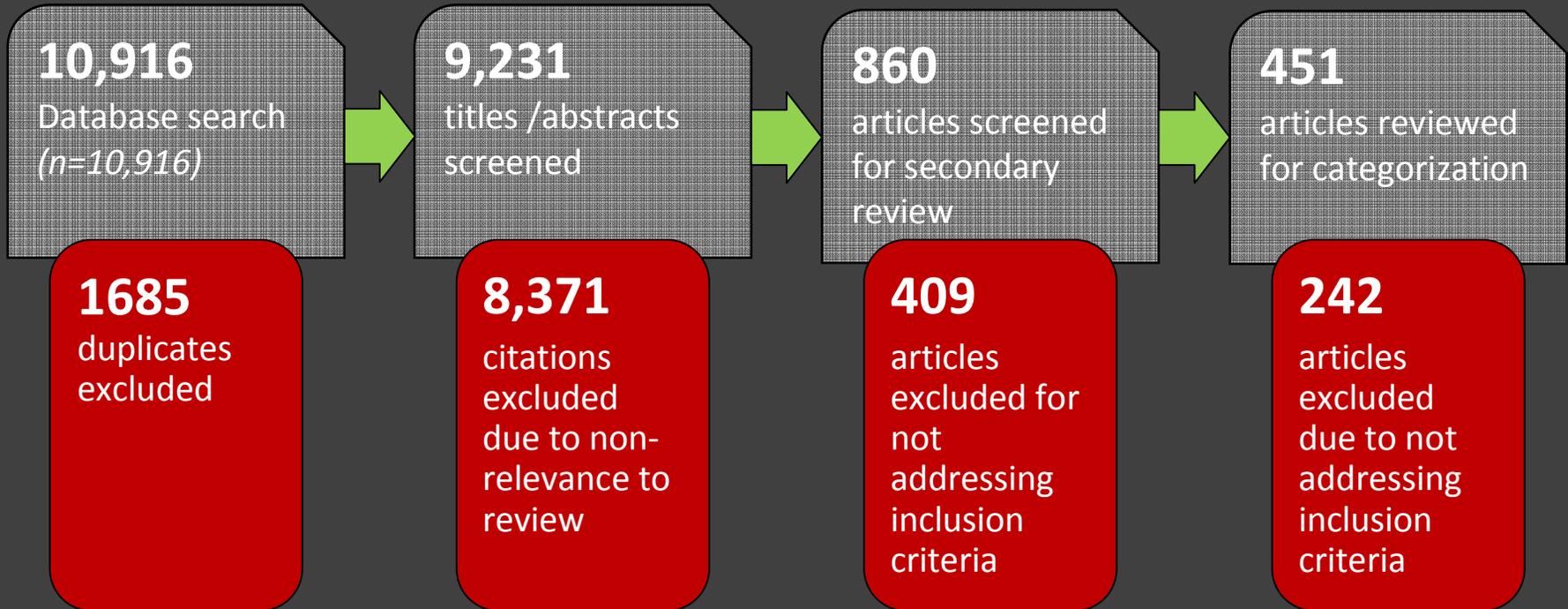
## EXCLUSION CRITERIA

- Study population HIV- /unknown status
- Non-empirical papers, descriptive literature reviews, single subject case study
- Secondary studies (e.g., systematic reviews)
- Data collected  $< 1996$
- No exclusions were made based on publication language\*, publication type (e.g., 'grey' literature) or jurisdiction

\* *unable to categorize papers not published in English, French or Spanish*



# SEARCH RESULTS



Number that met inclusion = 209 articles; 204 studies  
2 systematic reviews, 172 quantitative studies  
25 qualitative studies, 5 mixed method studies

## HEALTH DOMAINS ADDRESSED

Health domains	# of studies (n=204)*
Physical health	100 (49.0%)
Mental health	59 (28.9%)
Social participation	39 (19.1%)
Antiretroviral adherence	38 (18.6%)
Health services	34 (16.7%)
Sexual health	19 (9.3%)

*\* The total number of health topics categorized within each domain will be greater than the number of included studies because the research objectives of some studies encompassed more than one health topic.*

# PHYSICAL HEALTH

Health domains	# of studies (n=204)
<b>Physical health</b>	<b>100 (49.0%)</b>
Health comorbidities (e.g., non-HIV related cancer, cardiovascular conditions, diabetes, kidney disease, pulmonary disease, bone mineral density)	44 (21.6%)
HIV/AIDS related symptoms (HIV presenting symptoms, disease progression, and HIV/AIDS defining illness)	22 (10.8%)
Mortality/Survival	15 (7.4%)
Opportunistic infections (e.g., hepatitis C, pneumocystis pneumonia, tuberculosis, candidiasis)	12 (5.9%)

# MENTAL HEALTH

Health domains	# of studies (n=204)
<b>Mental health</b>	<b>59 (28.9%)</b>
Mental health conditions (e.g., depression)	17 (8.3%)
Neurocognitive functioning/impairment (e.g., executive functioning)	15 (7.4%)
HIV-associated neurocognitive disorder/HAND (e.g., HIV dementia)	12 (5.9%)
Psychological well-being (e.g., resilience)	12 (5.9%)

## SOCIAL PARTICIPATION

Health domains	# of studies (n=204)
Social participation	39 (19.1%)
Social support	16 (7.8%)
Stigma (HIV-related stigma, ageism, sexual identity stigma, discrimination)	13 (6.4%)
Disclosure	8 (3.9%)
Social isolation	8 (3.9%)

# ANTIRETROVIRAL TREATMENT

Health domains	# of studies (n=204)
Antiretroviral treatment (ARTs)	38 (18.6%)
Treatment adherence	20 (9.8%)
ART response (e.g., virologic response, immunological response)	19 (9.3%)



## HEALTH SERVICES

Health domains	# of studies (n=204)
<b>Health Services</b>	<b>34 (16.7%)</b>
Health care utilization (e.g., HIV-specific care, general health care, mental health care, geriatric care, substance use treatment)	24 (11.8%)
Health care access (e.g., delayed access to care, barriers to accessing care)	8 (3.9%)
Hospitalization	4 (2.0%)

## SEXUAL HEALTH

Health domains	# of studies (n=204)
Sexual health	19 (9.3%)
Sexual risk behaviors	11 (5.4%)
Sexuality (e.g., sexual identity, sexual behaviors)	9 (4.4%)
Sexually transmitted infections (STIs)	5 (2.5%)

## SYSTEMATIC REVIEWS

Two systematic reviews were identified in this review :

- Kearney et al. (2010)\* reviewed the literature addressing the prevalence, natural history and complications of HIV infection and treatment in older adults.
- Sankar et al. (2011)<sup>±</sup> conducted a critical content review of the sociocultural and behavioral peer-reviewed literature on aging with HIV.

\* Kearney F, Moore AR, Donegan CF, Lambert J. The ageing of HIV: Implications for geriatric medicine. *Age Ageing* 2010;39:536-41.

<sup>±</sup> Sankar A, Nevedal A, Neufeld S, Berry R, Luborsky M. What do we know about older adults and HIV? A review of social and behavioral literature. *AIDS Care* 2011;23:1187-207.



## MAIN FINDINGS

- Research focusing on older people with HIV is a relatively new area of study
- Most studies took a quantitative approach to topic, particularly research on physical health, mental health, and antiretroviral therapy.
- Literature predominately focused on detriments or risks associated with older age and seropositivity



## GAPS

- Lack of sexual health research focused on older people living with HIV
- Limited intervention research



# CONCLUSIONS

Future research on older age, HIV and health should:

- Take a broader view of health, such as the World Health Organizations (WHO) definition of health (WHO, 1948 )\*
- Examine aging with HIV from diverse perspectives (i.e., multiple methods, time of diagnosis, time on ARTs, geographic diversity, gender identity, socioeconomic status, ethnicity, race and sexual identity/orientation)
- Consider examining aging positively with HIV using a strengths-based perspective.

\*World Health Organization. Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19-22 June, 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of the World Health Organization, no. 2, p. 100) and entered into force on 7 April 1948.



## REVIEW TEAM

- Authors:** Lori Chambers (OHTN, McMaster University), David Gogolishvili (OHTN), Sean B. Rourke (OHTN, University of Toronto), Sergio Rueda (OHTN, University of Toronto), Qiyun Shi (OHTN), Michael G. Wilson (OHTN, McMaster University, McMaster Health Forum)
- Co-investigators:** Gordon Arbess ( St. Michael's Hospital), Jean Bacon (OHTN), Gerardo Betancourt (Center for Spanish-Speaking Peoples), David Brennan ( University of Toronto), Trevor A. Hart (Ryerson University) , Stephanie Karapita ( Casey House), Rick Kennedy (Ontario AIDS Network), Susan Kirkland (Dalhousie University), Frank McGee, (AIDS Bureau, Ontario Ministry of Health & Long Term Care ), Ron Rosenes (Canadian Treatment AIDS Council), Phan Sok (St. Michael's Hospital)
- Librarian:** Angela Eady
- Reviewers:** David Nico Baker, Olivia Lee, Sara Morassaei, Kate Palbom, Nahid Qureshi, Elmira Raeifar, and Sarah Tumaliuan.

## FUNDERS

*This review was funded through the Knowledge Synthesis grant provided by the Canadian Institutes of Health Research and through in-kind funding provided by the Ontario HIV Treatment Network.*

THE ONTARIO HIV TREATMENT NETWORK

STRIVING FOR EXCELLENCE  
ACHIEVING IMPACT



**THANK YOU...**

**LORI CHAMBERS, MSW**

Project Coordinator, Systematic Reviews and Knowledge Transfer and Exchange, OHTN  
PhD Student, School of Social Work, McMaster University