Reasons of hospitalization for HIV-positive patients in the Infectology Center of Latvia in the period from 2009 to 2011

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Introduction
In Latvia, HIV-positive patient count increases every year. 5189 HIV patients were registered in Latvia until January 2012. 1047 of them were in the AIDS stage. For the moment, healthcare of HIV patients is realized in two inpatient departments and one outpatient department; only patients with dual infection - HIV and TB - are observed in the TB center.

Aim of study
To identify problems, which are related to hospitalization of HIV-positive patients, by improving patient care standards and if necessary change it.

Materials
1205 patient cards of hospitalization were analyzed in the period from January 2009 till December 2011 (year 2009 - 351 patients, 2010 - 391 patients, 2011 - 463 patients). Statistical data analysis made by software - SPSS and Microsoft Excel and described methods.

Results
Within three years 1205 patients were hospitalized. In late AIDS stage, 714 patients were hospitalized. For the treatment of these patients ART, OI prophylactic treatment and OI therapy had to be included. Most common cause of hospitalization was opportunistic infection: 2009 - 168 patients (47.8%); 2010 - 201 patients (51.4%); 2011 - 193 patients (41.9%). Second most common cause of hospitalization was liver disease: 2009 - 37 patients (10.5%); 2010 - 55 patients (14%); 2011 - 47 patients (10.1%). Other reasons of hospitalization were lower respiratory tract infections-pneumonia, bronchitis. Only in 5.9% cause of hospitalization was acute retroviral syndrome. In 4.4% hospitalizations outcome was death, only in 0.2% cases cause of death was associated with non-AIDS disease. Average time of hospitalization was 12.8 days.

Conclusions
1. HIV-positive patient hospitalization count increases every year. 2. More often hospitalized patients are in late stage of HIV infection and reason of hospitalization is opportunistic infection, which extends time of hospitalization and costs. 3. Recommended immunization against VHB and S. pneumoniae, which would protect against non-AIDS diseases. 4. Medical staff education needs to be updated, which would help to diagnose HIV infection in early stage of disease.