

Reaching the Third 90 in the Philippines: Outcomes of the Connect for Life™ mHealth Adherence Support Project

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Background

The Philippines HIV epidemic is one of the fastest growing globally, with a 203% increase in new HIV infections from 2010-2018. In particular, infections among men who have sex with men (MSM) are rising at an alarming rate, necessitating targeted evidence-based public health interventions to reach epidemic control.

In 2018, an estimated 44% of Filipino PLHIV were on antiretroviral treatment (ART) and 39% were virally suppressed. Improving treatment coverage, retention, and adherence, and viral suppression are key to slowing the spread of the HIV in the Philippines.

Methods

A 48-week cohort study enrolled ART patients in Metro Manila in a mHealth intervention, The intervention Connect for Life™ (CfL), supported by Johnson & Johnson, provided patients with individualized voice/SMS services – pill reminders, appointment reminders, symptom reporting, health tips, and adherence feedback.

The analysis tracked changes in individual clinical and adherence outcomes over time. Additionally, visit attendance was compared between patients who received visit reminders and others who opted to not receive the service.

Rationale



Philippines needs to keep patients, particularly MSM, in HIV care and adherent in order to reduce mortality, prevent emergence of drug resistance, and reduce transmission.



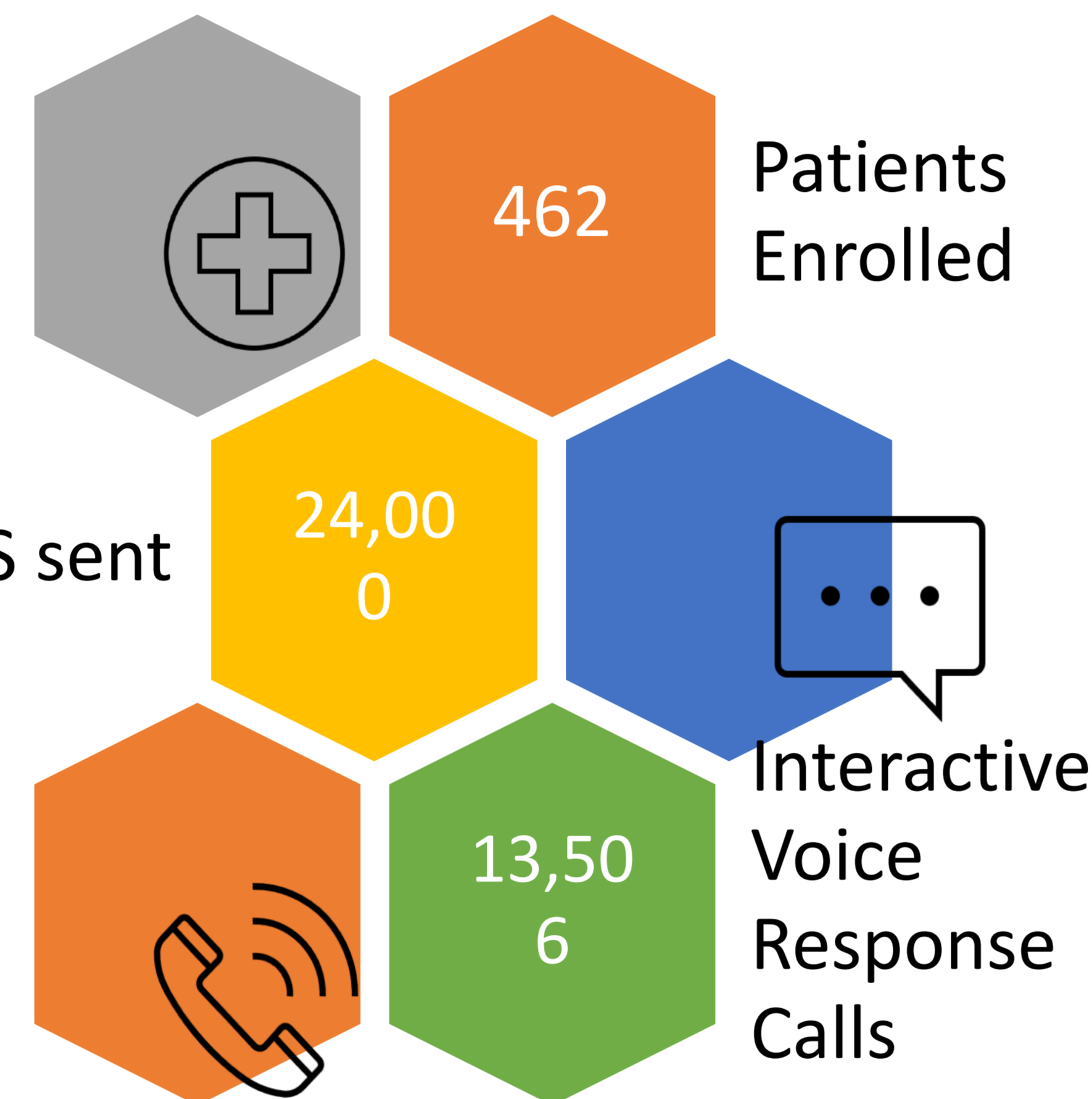
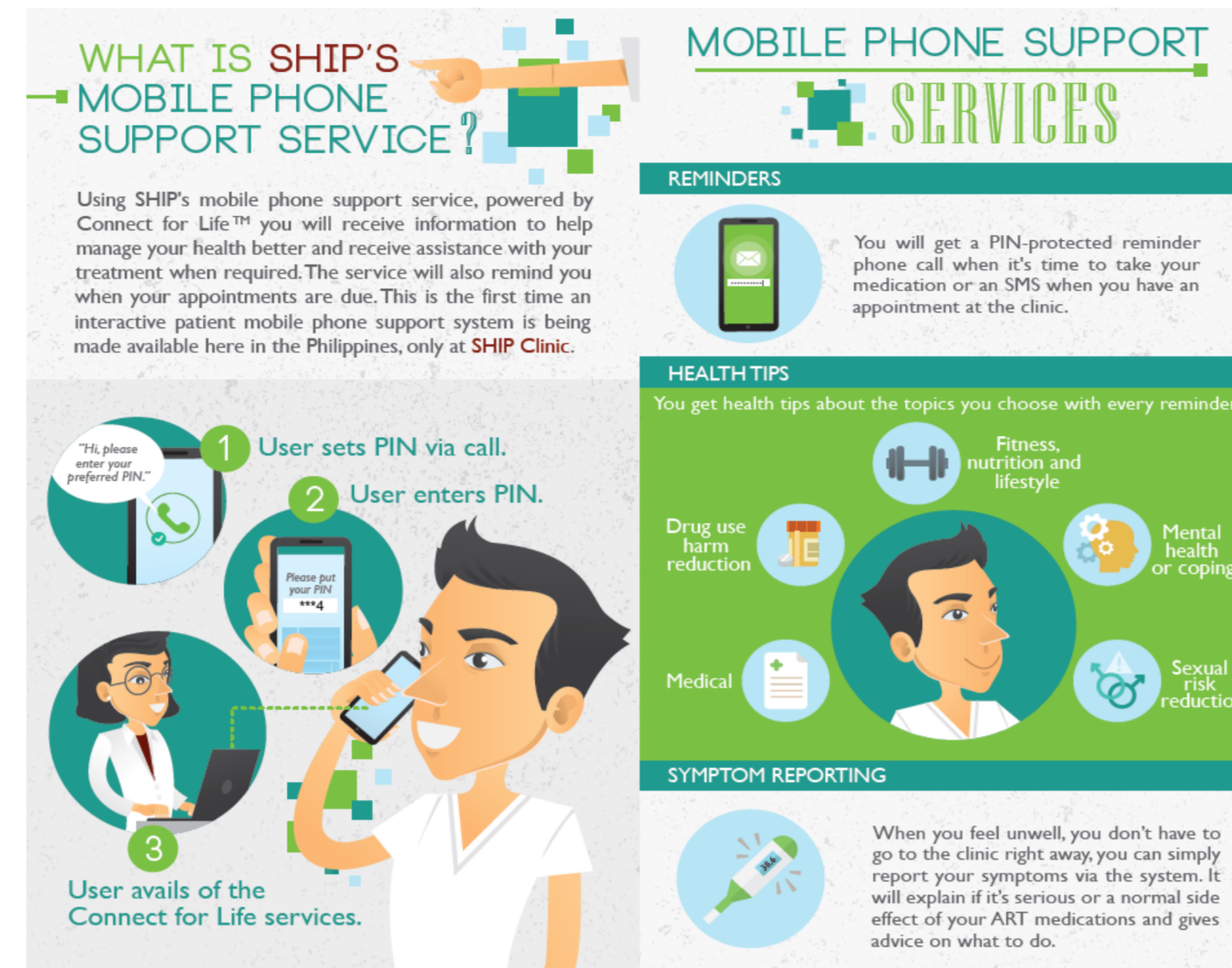
mHealth interventions have potential to support care and treatment with good evidence that they can improve adherence. However, mHealth interventions have not been evaluated in this context (Asia, MSM, HIV care and treatment)



There are still gaps in the literature about what makes mHealth interventions effective



SHIP Clinic piloted the Connect for Life mHealth intervention, which had been used in India and Uganda. Evaluating the project poses an opportunity to learn more about HIV in the Philippines and mHealth for ART adherence.



Results

From October 2016 to December 2018, 462 patients received 13,506 voice calls reminding them to take their pills and/or attend their clinic visits. During these calls patients listened to 4,188 health tips. Patients who opted for SMSs received more than 24,000 SMSs including 7,004 visit reminders, 5,049 adherence feedback messages, 10,030 pill reminders and 2,844 health tips.

ART Adherence: The proportion of patients adherent to ART (self-reported >95% of pills in last 30 days) increased from 78.6% at baseline to 90.2% after 48 weeks of the intervention.

Visit Attendance: Patients who received visit reminders attended 38% of visits on the scheduled appointment date, while other patients attended 30% of visits as scheduled (F=9.00, p=0.0028).

Retention in care: 95% of study patients were still in care at SHIP or a transfer site after 48 weeks, 5% were lost to follow up or deceased.

VL Suppression: Among patients who had VL monitoring, the suppression rate was 91% with no significant change over the intervention. Access to laboratory viral load is a challenge in the country, and 21% (95/462) of patients did not have their VL monitored.

Conclusions

The CfL platform enhanced services for patients.

The intervention led to improved visit attendance in the scheduled visit dates, which is beneficial for both patient clinical care and also for clinic flow and management.

The intervention also led to improvements in pill-taking, sustained high rates of retention and viral suppression, and high levels of patient satisfaction.

Acknowledgements

