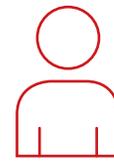




IMPLICATIONS OF CO-OCCURRING DIAGNOSIS of Depression and HIV/AIDS

As of 2015, **OVER HALF** of the **1.6 million** individuals with HIV/AIDS (PLWHA) are **AGED 50+**.

More than **1 IN 3** people who are living with an HIV infection have also been **DIAGNOSED WITH MAJOR DEPRESSIVE DISORDER**.



of depression cases get clinically diagnosed in people with HIV.



of those dually diagnosed with HIV and depression receive treatment for their depression, **leaving 82% with untreated depression**.

Of the 18% who do receive treatment,



7% get treated adequately

5% achieve remission

Source: Asch SM, Kilbourne AM, Gifford AL, et al. Underdiagnosis of depression in HIV: who are we missing? J Gen Intern Med. 2003;18:450-460

THE EFFECTS OF DEPRESSION TREATMENT ON HIV TREATMENT

People starting their first antiretroviral regimen showed that depression **without** antidepressant selective serotonin reuptake inhibitors (SSRI) therapy independently predicted:

19% LOWER

chance of at least 90% adherence to antiretroviral therapy (ART)

23% LOWER

chance of reaching a viral load below 500 copies/mL after 12 months of ART



and after 12 months of ART, people with depression and better than 80% SSRI adherence had a **38-CELL** CD4-count advantage over people with depression but not taking an SSRI

Source: Horberg MA, Silverberg MJ, Hurley LB, et al. Effects of depression and selective serotonin reuptake inhibitor use on adherence to highly active antiretroviral therapy and on clinical outcomes in HIV-infected patients. J Acquir Immune Defic Syndr. 2008;47:384-390.