



Cause of Decline in Everyday Function Among People With HIV Is Hard to Pinpoint

A new study advises looking at factors such as depression, anxiety and unemployment before pointing the finger at cognitive impairment.

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The trouble many people with HIV experience with everyday functioning may be driven by problems such as depression, anxiety and unemployment rather than simply a decline in cognitive function, aidsmap reports. A new study suggests that clinicians should seek to rule out factors other than cognitive decline when working with patients reporting struggles with what are known as activities of daily living (ADLs).

Publishing their findings in the *Journal of Acquired Immune Deficiency Syndromes*, researchers from the European CIPHER study sought to assess the validity of a standard test of self-reported difficulties with ADLs. They also wanted to determine what factors were associated with such difficulties among 448 people with HIV who were recruited between 2011 and 2013.

Eighty-nine percent of the participants were taking antiretrovirals, and 81 percent had an undetectable viral load. Eighty-four percent were male, the average age was 46, the median CD4 count was 550 and the average time since HIV diagnosis was 10 years.

Thirty-one percent of the participants reported a decline in two more ADLs. Of that group, 21 percent said they thought cognitive problems were the source of their decline.

After adjusting the data for age, sex, ethnicity, education and study site, the researchers found that a decline in ADLs was linked to poorer speed and reaction time as well as poorer attention and working memory (short-term memory associated with immediate mental processing).

The investigators found that self-reported cognitive impairment symptoms were associated with poorer performance in cognitive impairment tests, lower levels of education, having other health conditions, poverty, unemployment, anxiety, depression and being diagnosed with HIV more than a decade prior.

The tests the investigators used to assess declines in ADLs proved to have substandard accuracy.

The study authors concluded they would not be a reliable means of diagnosing such declines.

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