Survival of men and women with AIDS: a comparative study

Previous studies of survival after a diagnosis of acquired immunodeficiency syndrome (AIDS) have reported variation in temporal trends in association with age, gender, race, mode of transmission, lymphadenopathy, antiretroviral therapy, and presence of specific opportunistic infections at diagnosis. There are conflicting data, predominantly from the USA regarding survival of women with AIDS when compared with that of men. These studies have attributed a difference in survival between these two groups to factors such as age, initial diagnosis, antiretroviral therapy, CD4+ lymphocyte count at initial diagnosis and the use of health care resources. In the UK, preliminary survival analysis suggested a median survival time for women of 3-5 months. A more recent study, however, suggests mean survival in the region of 15 months.

In this retrospective study we analysed the survival of all women diagnosed with AIDS from the beginning of 1990 until the end of 1992 in three major referral centres in London. The data are compared with a matched control group of male patients.

Forty one women were diagnosed with AIDS in our three units (Jeffersiss wing, St Stephens Clinic and Charing Cross Hospital, London) during the study period. Information regarding age at AIDS diagnosis, mode of transmission, ethnic origin, CD4+ lymphocyte count at AIDS diagnosis, the AIDS defining diagnosis and the use of antiretroviral therapy and Pneumocystis carinii pneumonia (PCP) prophylaxis were recorded on a standardised information collection sheet. The data were obtained from a computer database and supplemented by direct inspection of the notes. The control group of men was matched for year of AIDS diagnosis, age and CD4+ lymphocyte count. The collected data were analysed using the Kaplan-Meier curves and the logrank test.

The mean age of the women and men was 33.4 yrs and 35.6 yrs respectively. Thirteen women and seven men (not taking into account the patients with PCP at initial diagnosis) had PCP prophylaxis and 27 women and 22 men had AZT at some stage after AIDS diagnosis. Thirteen women and 19 men died during the period of study. There was no difference in survival between the two groups (logrank test: \( \chi^2 = 0.15, p = 0.6949 \)). The number of women presenting initially with AIDS was 8 (47%), 3 (30%) and 2 (14%) in 1990, 1991 and 1992 respectively. The reduction in the number of women presenting initially with an AIDS defining diagnosis is encouraging and suggests earlier diagnosis of HIV infection in this group. The commonest AIDS defining diagnosis in women was PCP (63.4%). Twelve (70%), 7 (70%) and 7 (50%) women had PCP as the initial diagnosis in 1990, 1991 and 1992 respectively. The reduction in PCP as an index diagnosis may reflect the increasing usage of effective PCP prophylaxis.

Figure: Comparison of survival curves between women and men with AIDS. The symbol (?) in the Figure shows those patients either withdrawn from the study or known to be still alive at the study's completion at 31-12-92 (censored).

Sexual health: a survey of knowledge, attitudes and practice of sexual health in adolescent females

It was interesting to read about similar unsafe sexual behaviour in patients attending clinics for genitourinary medicine (GUM), family

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