CHARACTERISTICS OF DEATHS IN A PEPFAR HIV PROGRAM IN DEMOCRATIC REPUBLIC OF THE CONGO

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BACKGROUND

- The HIV epidemic in DRC is heterogenous, with an estimated 510,000 people living with HIV (PLHIV) in 2021.
- PEPFAR supports three high burden provinces, comprising of half the total number of PLHIV in DRC.
- We aimed to evaluate the proportion and characteristics of PLHIV who were lost from treatment and died in DRC PEPFAR programs.

METHODS

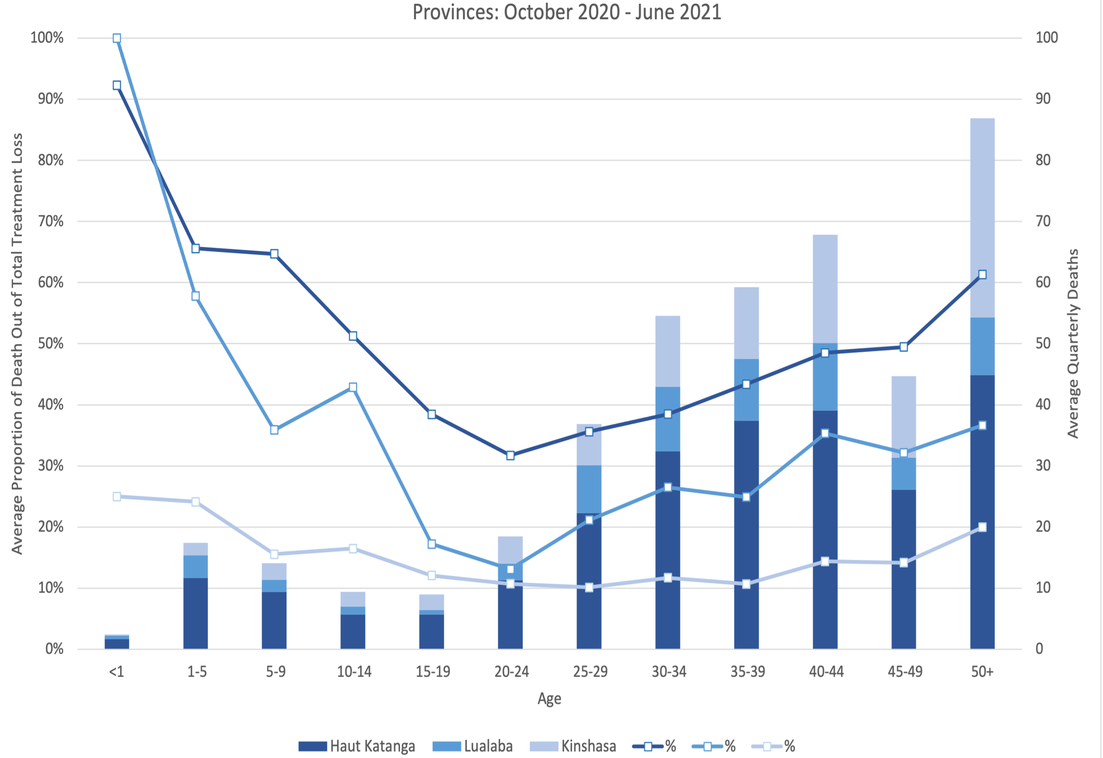
- We conducted an analysis using health services data from PEPFAR global and DRC Monitoring, Evaluation and Reporting (MER)
- Included all instances of treatment loss among individuals on ART and were recorded as "died" between October 2019 to June 2021 (FY20Q1 to FY21Q3) within a cohort of 195,093 patients on treatment.
- Outcomes are stratified by geographic area, age, and sex.
- Quarterly average number of deaths are reported, and outcomes are measured as an average proportion of total treatment loss.

RESULTS

- There was an average of 1,525 treatment loss occurrences per quarter across the study period of which 421 average quarterly deaths were reported. This results in a quarterly mortality rate of 0.21% for the entire treatment cohort which is mid-range compared to other PEPFAR-supported countries.
- DRC has the second highest average proportion of deaths out of total treatment loss (28%) compared to other PEPFAR-supported countries (1%-29%). The average proportion of deaths was highest in Haut Katanga province (46%), where half of the treatment cohort resides, compared to Lualaba (28%) and Kinshasa (14%).
- Four urban (Kenya, Lubumbashi, Ruashi, Kampemba) and one rural (Sakania) Haut Katanga health zones accounted for 50% of quarterly average deaths out of 26 health zones.

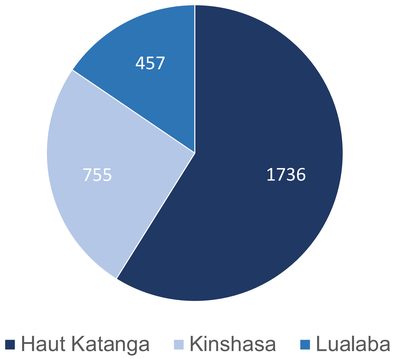
The average proportion of deaths was *highest* in Haut Katanga province (46%), where half of the treatment cohort resides.

Figure 1. Average Quarterly HIV/AIDS Deaths and Proportion of Total Treatment Loss by Age in DRC Provinces: October 2020 - June 2021



- Figure 1 shows the distribution of deaths by age and proportion of deaths out of total treatment loss. Within Haut Katanga, 50+ year olds had the highest number of average deaths per quarter reported followed by 40-44 year olds. In Haut Katanga, children under 10 experienced the highest average proportion of deaths out of total treatment loss compared to older age groups.
- Figure 2 shows the total reported deaths by province during the study period
- Males (51%) had slightly higher average proportion of deaths compared to females (44%) out of total treatment loss in Haut Katanga.

Figure 2. Total Reported Deaths (n=2948) by Province between October 2019 to June 2021



CONCLUSIONS

- While the mortality rate is mid-range in DRC for the treatment cohort, it is concerning that a high proportion of treatment loss in Haut Katanga were associated deaths.
- This analysis is limited by data completeness on treatment loss in DRC and globally. Further research is needed to better understand these findings to determine how to reduce mortality.

ADDITIONAL KEY INFORMATION

The views expressed are those of the authors and do not necessarily reflect those of the U. S. Government or PEPFAR

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