

PP_A002**ADRENAL INSUFFICIENCY AND ITS ASSOCIATED FACTORS AMONG MULTI-ETHNIC PEOPLE LIVING WITH HIV/AIDS CONSULTING AT TERTIARY HOSPITALS**

<https://doi.org/10.15605/jafes.039.S1.007>

QingCi Goh,¹ ChinVoon Tong,¹ Subashini Rajoo²

¹Hospital Putrajaya, Malaysia

²Hospital Kuala Lumpur, Malaysia

INTRODUCTION

Adrenal insufficiency (AI) is one of the most common potentially life-threatening endocrine complications in people living with HIV/AIDS. This study aims to describe AI among them, where data on this topic are scarce.

METHODOLOGY

A cross-sectional study was conducted at the Infectious Diseases clinics of two tertiary centres. A total of 110 stable adults living with HIV/AIDS, aged 18 to 80 years old from the outpatient setting, were recruited. Clinical and laboratory data were collected and cosyntropin stimulation tests were performed. Adrenal antibody was analysed among those who had an inadequate response.

RESULT

The mean age of the studied population was 37.5 ± 10.6 years. Majority of the subjects were male (81.8%). Only 23.6% of subjects had a normal BMI, with 10.9% classified as underweight and 64.5% as overweight/obese. The mean disease duration was 6.6 ± 6.2 years. All subjects were receiving highly active antiretroviral therapy (HAART), with a mean treatment duration of 4.9 ± 4.2 years. Among these, 22 individuals (20%) experienced treatment failure, and 46 individuals (41.8%) had a history of opportunistic infections. Five individuals (4.5%) had autoimmune disease. The mean nadir CD4 count among the studied population was 202 cells/mm³, with 60% of them having a nadir CD4 <200 cells/mm³. At the time of the cosyntropin stimulation test, the majority of individuals, 97 (88.2%), had a viral load (VL) <40 copies/ml, and 89 (89.1%) had a CD4 count >200 cells/mm³. In the assessment for adrenal insufficiency, 7 individuals (6.4%) exhibited symptoms suggestive of adrenal insufficiency. However, only 2 individuals (1.8%) were found to have an inadequate response to cosyntropin. Adrenal antibodies were negative, and ACTH was not elevated in these two patients.

CONCLUSION

This study reveals a low prevalence of AI (1.8%) among stable patients with HIV/AIDS on antiretroviral therapy. Individualized screening and ongoing monitoring are crucial. These findings emphasize the importance of tailored care strategies for this population.