

Researchers to begin study aimed at helping Latino HIV patients

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Researchers at Wake Forest University Baptist Medical Center will soon begin researching how a lack of trust in formal medicine is contributing to disproportionately higher mortality rates in Latino HIV patients than in white HIV patients across the country.

The study, "Trust and Mistrust of Evidence-Based Medicine Among Latinos with HIV," will be funded by the Foundation for AIDS Research (amfAR) and is expected to begin this month.

"AmfAR is a prestigious organization to get funding from if you do HIV research, so it's a big testament to the work we're doing," said Scott D. Rhodes, Ph.D., MPH, lead investigator and an associate professor in the Department of Social Sciences and Health Policy. "We hope that it will help us reach Latinos who are at risk for HIV and improve the outcomes for HIV-positive Latinos so they are not affected disproportionately."

Despite overall advances in medical care and treatment, Latinos with HIV in the United States have higher mortality rates than whites, Rhodes said. This medical fact is especially significant in North Carolina, which has one of the fastest-growing Latino populations in the country. Between the 1990 and 2000 censuses, the Latino population in the United States grew by 58 percent, whereas in North Carolina, the number of Latinos grew by nearly 400 percent.

In addition to the exponential growth of the Latino population in the state, Latinos in North Carolina experience a disproportionate HIV

burden.

According to reports from the Centers for Disease Control, Latinos have the second highest rate of AIDS diagnoses of all racial and ethnic groups. Latinos accounted for 20 percent of the total number of new AIDS cases reported in 2004 – almost four times greater than that for non-Latino whites. Rates of reportable sexually transmitted diseases also are higher among Latinos. In 2003, the rates of gonorrhea, chlamydia and syphilis were 2.2, 4, and 2 times higher among Latinos than among non-Latino whites, respectively. Many southern states, including North Carolina, consistently lead the nation in reported cases of AIDS and other sexually-transmitted diseases.

Part of this may be explained in cultural differences between the Latinos migrating to rural southern states, such as North Carolina, and those who end up in the large metropolitan areas of New York, Texas and Florida, Rhodes said. Traditionally, Latinos migrating to the big cities come from Mexico City and Northern Mexico, whereas the Latinos moving to more rural states tend to come from Southern Mexico and Central America. There may be differences in the amount of education and poverty between the two areas, Rhodes said. Cultural factors such as a familiarity with home remedies and alternative healing may also have an impact on the attitudes about medicine within the Latino community, he added.

"Latinos generally do not go to the doctor to get tested to see if they are infected with HIV until they are very, very sick," Rhodes said. "And, once diagnosed, they don't take their medicine as prescribed, even when they have access to life-extending medicines."

"There are a number of different things that are affecting the attitudes and opinions toward medicine of the Latino community. This study will give us a sense of all the variables that are affecting the trust or mistrust of medicine."

Rhodes said that he and co-investigator Aimee Wilkin, M.D., also of Wake Forest Baptist, hope to begin enrolling patients in the study this month. Over the course of the multi-year study, they plan to interview about 200 Latino Triad patients living with HIV or engaging in high-risk behavior, such as having sexual relations with multiple partners or not using condoms.

Source: Wake Forest University

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