

# HIV-infected youth, psychiatric symptoms and functional outcomes

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A study of children and adolescents who had been infected perinatally (around the time of their birth) with human immunodeficiency virus (HIV) suggests little evidence of an association between specific antiretroviral therapy and the severity of psychiatric disorders, according to a report published Online First by *Archives of Pediatrics & Adolescent Medicine*, one of the JAMA/Archives journals.

A major concern for health professionals is the possibility that the severity of [HIV](#) illness or use of specific highly active [antiretroviral therapy](#) (HAART) regimens may be associated with increased risk for mental health problems, the researchers note.

The study by Sharon Nachman, M.D., of Stony Brook University in New York, and colleagues is a cross-sectional analysis of entry data from an observational, prospective two-year study. Participants included 319 children and [adolescents](#) with HIV between the ages of 6 and 17 years enrolled in the International Maternal Pediatrics Adolescent AIDS Clinical Trials Group (IMPAACT) study.

A third of the patients included in the study met the criteria for at least one targeted psychiatric disorder in the study, which reviewed HIV illness severity markers and the severity of some psychiatric symptoms.

"Analyses of HIV disease variables and severity of psychiatric symptoms revealed few specific associations, and we feel compelled to emphasize that findings were variable, mixed and at times counterintuitive," the

researchers comment. For example, they note a lower entry CD4 (cells that help fight off infection) percentage was associated with less severe depression, but a higher entry RNA viral load was associated with more severe depression.

The authors cite previous research that did not find a significant association between HIV illness severity and development of psychiatric illness, and another study that suggested an association between a past Centers for Disease Control and Prevention AIDS-defining illness (class C [CDC-C]) and an increased risk of psychiatric impairment.

Researchers in the current study noted some evidence of an association of certain HIV variables (such as lower nadir CD4 percentage) with quality of life and cognitive, social and academic functioning.

"We found that more severe HIV disease (indicated by the nadir CD4 percentage) was associated with worse cognitive functioning and social skills, but our analyses do not allow us to make causal inferences about these associations," the researchers comment. "Our data, in conjunction with findings from other groups, suggest that receptive language, word recognition and educational problems are common in youth with perinatal HIV infection regardless of virologic suppression."

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