Effectiveness of Telephone Accompaniment in the Lifestyle of People Living With HIV

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Purpose: Mobile technologies considered innovative tools to improve access and quality of health care, revealing themselves as satisfactory cost-effectiveness instruments, and has been used in the habitual care of people living with HIV (PLHIV), to enlarge the link to the service, increasing the relationship of trust and creating opportunities to clarify doubts and desires. Among the PLHIV side effects associated with anti-retroviral therapy (ART) cause multiple metabolic disturbances, making the treatment of metabolic problems and the risk of cardiovascular disease (CVD). The CVD risk factors can be prevented or modified through lifestyle changes, being necessary the development and evaluation of interventions to improve the lifestyle of people with Human Immunodeficiency Virus (HIV). The objective of this study was to evaluate the effectiveness of telephone attendance in the lifestyle of people living with HIV.

Methods: Study almost-experimental, made in two services of Specialist Care in AIDS of Fortaleza, Brazil, between 2016 and 2017. Participated 118 people living with HIV, a control group (CG) with 65 members, who received routine care and 53 were integrated into the intervention group (IG) and received telephone calls, in addition to routine care. The study was divided into three moments: recruitment (baseline); monitoring and evaluation of outcomes. For data collection was used a sociodemographic characterization form, life habits of people living with HIV and The Instrument for assessing the Individual Lifestyle Profile. The telephone follow-up lasted 18 weeks and during this period, fortnightly calls were made, totaling ten calls for each participant. For each call, there was a main theme to be addressed, namely: presentation of telephone accompaniment; accession to the ARV; eating habits; physical activity; social support; self-esteem; anxiety and depression; practice of preventive behavior, sexuality and finalization. After 4 months of recruitment, the outcomes were reevaluated. Fisher’s test was used to evaluate the homogeneity of the control group and the intervention group. To investigate the effects of telephone follow-up on lifestyle components, the Generalized Linear Models (MLG) technique was used, the effect of the group (control or intervention) and time (before or after 4 months) on the components of lifestyle.

Results: The groups were homogeneous regarding socio-demographic characteristics, lifestyle habits and lifestyle components. A statistically significant difference was observed only between sex (p=0.042) and participants age (p=0.050). There was no cross-effect between group and time on any component of lifestyle. Dietary habits were statistically more adequate in IG, when the effect of time (p=0.024) and group (p=0.047) was analyzed.

Conclusion: It was concluded that, although telephone follow-up did not demonstrate a statistically significant change in relation to lifestyle components, it was considered viable in the care of people living with HIV because of the proximity and support needed to reach a healthy lifestyle.
Title:
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References:


Abstract Summary:
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Content Outline:
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