

Title:

Efficacy of a Home-based Neurocognitive Remediation Program in Adults with HIV

Shameka C. Humphrey

School of Nursing, University of Alabama at Birmingham (UAB), Birmingham, AL, USA

Session Title:

Rising Stars of Nursing Invited Posters - Group 1

Slot (superslotted):

RSG STR 1: Thursday, September 25, 2014: 9:45 AM-10:30 AM

Slot (superslotted):

RSG STR 1: Thursday, September 25, 2014: 2:30 PM-3:15 PM

Keywords:

AGING, HIV/AIDS and SPEED OF PROCESSING

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Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE	TIME ALLOTTED	FACULTY/SPEAKER	TEACHING/LEARNING METHOD	EVALUATION/FEEDBACK
Example Critique selected definition of the term, "curriculum"	Example Definitions of "curriculum" Course of study Arrangements of instructional	Example 20 minutes	Example Name, Credentials	Example Lecture PowerPoint presentation Participant feedback	Example Group discussion: What does cultural training mean to you?

	<p>materials</p> <p>The subject matter that is taught</p> <p>Cultural "training"</p> <p>Planned engagement of learners</p>				
<p>Recognize how a home-based speed of processing training program influences neurocognitive functioning, particularly speed of processing, in middle age to older adults with HIV</p>	<p>10-hour home-based speed of processing training program</p> <p>Pre-post Useful Field of View (UFOV) results</p> <p>Exit survey responses</p>	<p>30 minutes</p>	<p>Shameka Humphrey, MSN, RN</p>	<p>Poster Presentation</p>	<p>Discussion: How will speed of processing training in alternative settings contribute to improved neurocognitive functioning and facilitate successful aging in adults with HIV?</p>
<p>Discuss neurocognitive gains from a home-based speed of processing training program and its</p>	<p>Posttest results of Timed Instrumental Activities of Daily Living (TIADL)</p> <p>Exit</p>	<p>30 minutes</p>	<p>Shameka Humphrey, MSN, RN</p>	<p>Poster Presentation</p>	<p>Discussion: How does the advantages of a home-based speed of processing training on everyday functioning influence quality of life for adults with HIV? What is the nurse's role in educating patients about these</p>

ability to transfer to improvements in everyday functioning	survey responses				types of alternative neurocognitive remediation programs?
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Abstract Text:

Efficacy of a Home-based Neurocognitive Remediation Program in Adults with HIV

Shameka Humphrey[†], Pariya Fazeli[‡], & David Vance^{†*}

[†]University of Alabama at Birmingham, School of Nursing

[‡]University of California at San Diego

*UAB Center for Palliative Care and the AIM Program

Purpose: Despite the life-sustaining effects of Combination Antiretroviral Therapy (cART), adults with HIV continue to experience neurocognitive impairments. In fact, over half of adults with HIV experience HIV-Associated Neurocognitive Disorders (HAND). As neurocognitive impairments continue to emerge among adults with HIV, more private settings such as the home may facilitate greater use of neurocognitive remediation therapies such as speed of processing training to enhance neurocognitive and everyday functioning. The efficacy of a home-based speed of processing training was examined in middle-aged and older adults with HIV (i.e., age 40+).

Methods: In this pre-post experimental design, fifteen middle-aged and older adults with HIV received a neurocognitive battery and instructions to complete a 10-hr speed of processing training at their homes. Six weeks after initiation of training, participants received a neurocognitive posttest and a survey about their training experience and any observed cognitive gains.

Results: Higher ($t(14) = 2.80, p = .01, d = 0.44$) Useful Field of View (UFOV[®]) scores post-training indicated significant improvement in speed of processing and executive function. There was a significant improvement on the Timed TIADL Test ($t(14) = 2.14, p = .05, d = 0.22$). Survey responses ($1 = not at all, 3 = moderately, 5 = extremely$) indicated, on average, participants liked the training *moderately* ($M = 3.69; SD = 1.03$) and observed cognitive improvements in the following domains: memory ($M = 3.54; SD = 1.05$), speed of processing ($M = 3.77; SD = 0.83$), and attention ($M = 4.08; SD = 0.76$).

Conclusions: Home-based speed of processing training has neuroprotective value and can be used to accommodate adults who lack accessibility to neurocognitive remediation therapies and those facing stigma who prefer to receive training in a more private setting.

Nursing Implications: Nurses are in a unique position to distribute this home-based neurocognitive program and teach their patients about alternate methods for preserving neurocognitive function. It is possible that an increasing number of adults with HIV may seek healthcare services if they are aware of more discrete options.