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Resilience and frailty in people living with HIV during the lockdown experience in Italy in March-May 2020: are they two complementary constructs?

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Background: The construct of resilience is defined as an individual's "positive adaptation within the context of significant adversity". Therefore, we tried to assess the impact of the lockdown experience in Italy caused by the first COVID-19 epidemic wave in March–May 2020 in PLWH through a validated resilience score in relation to frailty.

Methods: In May 2020, all PLWH attending Modena HIV Metabolic Clinic at least once from 1 January 2019 were offered to complete an electronic questionnaire including health-related questions and the resilience score questionnaire (CD-RISC-10, short version [1]). A subset of these patients had a frailty evaluation within the previous year, assessed using 1) a 72-item Frailty Index (FI) that evaluated multiple health domains, 2) a 10-item HIV Index (HIVI) scoring the most significant HIV variables and 3) a 10-item Protective Index (PI) including socio-behavioural domains [2].

Results: Out of 1100 PLWH reached via mail, 506 (50%) completed the questionnaire. Median age was 54 (IQR 49 to 59), HIV duration >20 years was present in 63%. According to our cross-sectional survey, only 9% of PLWH worsened the general health status. The same proportion reported difficulties in reaching physicians and having access to HIV drugs. PLWH resilient to the lockdown event were 329 (73.13%). In a multivariable logistic regression these individuals were more likely to be in the age category > 60 (OR 0.43, 95% CI 0.22 to 0.85) and having a partner (OR 2.25, 95% CI 1.48 to 3.42), after correction for gender, working status and HIV variables. In the subset of 235 of PLWH who were assessed for frailty, CD-RISC-10 median score was $-0.87 (\pm 3.14)$ in frail and $0.08 (\pm 2.29)$ in non-frail individuals ($p = 0.02$). In logistic regression analysis, resilience was not associated with FI, HIVI and PI.

Conclusions: Intervention to relieve social isolation and loneliness in PLWH are urgently needed to cope with the challenge of COVID-19 crisis. Resilience and frailty constructs may represent two complementary constructs of vulnerability in PLWH and they should be addressed simultaneously.

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Impact of COVID pandemic among men who have sex with men living with HIV during COVID lockdown in Argentina

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Background: The Argentinean government established an early enforced lockdown to mitigate the spread of COVID-19 [1]. The risk for severe illness from COVID-19 among PLWH has not been established yet [2,3]. However, it is known they are at increased risk for mental health complications [4]. This cohort study examines the impact of COVID-related stress and enforced lockdown on treatment adherence among men who have sex with men living with HIV (MSMLWH) in Argentina.

Methods: Participants were people with HIV enrolled in a private/social security clinic network, the largest provider for HIV healthcare in Argentina. Participants completed an anonymous online survey assessing adherence to HIV treatment, COVID-19 prevention behaviour, disruptions to resources, psychosocial factors and substance use. For this analysis, we focused on MSMLWH outcomes.

Results: A total of 1336 participants (892 men and 444 women), aged between 18 and 82 years, residing mostly in Buenos Aires Metropolitan Area (94.1%), completed the online survey. Among men, 596 participants self-reported as men who have sex with men with a median age of 44 years (35 to 52). MSMLWH reported high adherence to lockdown (96.8%), loss of employment in their household (55.4%), difficulty in obtaining basic necessities such as food or clothing (36.6%) and 27.2% reported challenges to access internet-delivered medical services. Disruption in obtaining non-HIV medication was reported by 7.7% of the subjects, and 4.9% in the case of HIV medication; 29.9% reported suboptimal adherence. Mental health challenges were frequent: depression (14.1%), loneliness (15.6%) and anxiety (20.2%). Abuse (sexual, emotional or physical) was reported by 6.5%. 13.1% reported an increase in their alcohol consumption.

Conclusions: High adherence to prevention measures was reported among MSMLWH at the beginning of the lockdown. However, it challenged the access to health services and may have impacted on medication adherence. COVID-19 pandemic has significantly deteriorated the country's economy, and our study shows its impact on MSMLWH access to resources. Lockdown and COVID-stress have also affected MSMLWH's emotional health. Our study highlights the importance of strengthening HIV healthcare services to promote treatment adherence and mental health support during COVID pandemic, especially in lockdown periods.

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