



**THE NETWORK**  
TOWARDS UNITY FOR HEALTH



Facultad de Medicina



THE NETWORK: TOWARDS UNITY  
FOR HEALTH & FACULTAD DE MEDICINA,  
UNAM, PRESENT

# TUFH2020 MEXICO

**VIRTUAL CONFERENCE**

"PRIMARY HEALTH CARE: A PATH  
TOWARDS SOCIAL JUSTICE"

SYSTEMS AND COMMUNITY BASED  
RESPONSES TO COVID-19

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## TUFH 2020 Abstracts

<b>Title</b>	<b>Hematological variations in patients with human immunodeficiency virus and it's relationship with antiretroviral therapy</b>
<b>Type</b>	TUFH Oral Presentation <i>Intersectoral Collaborations and the Social Determinants of Health</i>
<b>Presenting Author</b>	<b>Lina María Martínez-Sanchez</b>
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<b>Country</b>	Colombia
<b>Abstract N°</b>	TUFH278
<b>Content</b>	<p>Our main objective was to identify the most frequent alterations in patients with human immunodeficiency (HIV) from a low socioeconomic status in a university hospital, during 2017 to 2018. Methods: transversal analytical study. Included patients with HIV older than 18 years old with confirmed diagnosis by laboratory, from a lower socioeconomic status, without personal antecedents of hematological alterations prior to infection. Those patients lacking hematological variables in their clinical record were excluded. A non-probability sampling of consecutive cases was carried out. The statical analysis was calculated in the program SPSS V. 25, to the quantitative variables mean, median with interquartile range and minimum and maximum values were determined. And to the qualitative ones, absolute and relative frequencies expressed through proportions and percentages. Results: 30 clinic records were reviewed, the average age was 36 years old; 55,6% (15) corresponded to male. Regarding hospital management 66,7% (18) required it during the study, 59,3% (16) had detectable viral load. The most frequent infectious antecedents were Hepatitis B and tuberculosis; both 14,8% (4). According to the immunological classification 18,5% (5) had phase 1. 14,8% (4) phase 2 and 59,2% (16) phase 3. The 66,7% (18) of the patients received an antibiotic. The most frequent hematological alterations were anemia (51,9%), eosinopenia (48,1%) and hypochromia (18,5%). Conclusions: HIV is a disease that affects multiple systems; as the hematological, affecting different parameters of the hemoleucogram. However, it goes beyond being a series of comorbidities, it is a burden faced by thousands of people, from all social status.</p>