Neuropsychological Performance in Acute HIV

Determinants of Baseline Performance and Effects of Immediate
Antiretroviral Therapy



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Background

- Despite antiretroviral therapy, some individuals with chronic HIV infection still manifest mild neurocognitive impairment.
- Is neurocognitive impairment present in the acute stages of HIV infection?
- Are there disease markers that correlate with impairment on neuropsychological testing?
- Does immediate antiretroviral therapy associate with improved neuropsychological performance in follow up?

Methods

- In a unique cohort of subjects identified during acute HIV infection by nucleic acid testing in Bangkok, we:
 - Investigated baseline predictors of neuropsychological performance
 - Days post HIV transmission, CD4 count, CD8 count, CSF HIV RNA, plasma HIV RNA, CSF WBC, CSF protein
 - Evaluated effect of immediate antiretroviral therapy on longitudinal neuropsychological performance
 - HAART = Tenofovir, Emtricitabine, Efavirenz
 - Mega-HAART = HAART + Raltegravir, Maraviroc

Methods

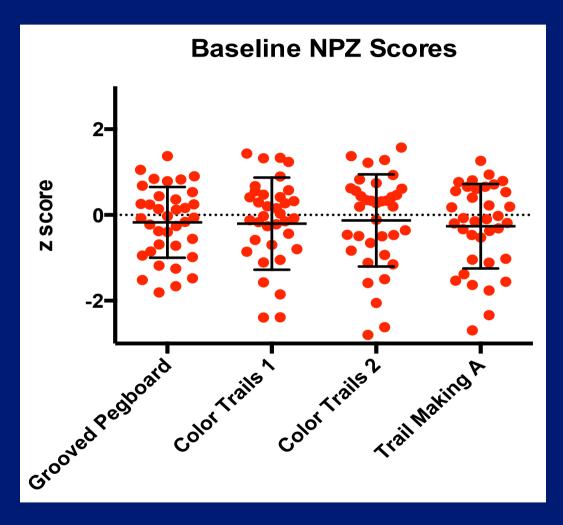
- 36 subjects assessed at baseline, 3 months, and 6 months
 - Neuropsychological testing (summarized as NPZ-4)
 - Motor = Grooved Pegboard
 - Processing speed = Color Trails 1, Trail Making A
 - Executive Function = Color Trails 2
 - Neuropsychological performance standardized to age/education matched HIV-uninfected Thai controls (n = 45)
- Blood and CSF measures
- Randomized to HAART or Mega-HAART
- Analysis: multivariable regression model, nonparametric tests

Baseline Characteristics of Acute HIV Subjects (n=36)

	Median (IQR) or Total (%)
Age	28 (24 – 33)
Male	32 (89%)
Bachelor's degree or higher	21 (58%)
Days post HIV transmission	19 (15 – 24)
Fiebig I/II	23 (64%)
CRF01_AE	31 (86%)
CD4 Count (cells/mm3)	411 (338 – 568)
CD8 Count (cells/mm3)	578 (399 – 1013)
Plasma HIV RNA (log10 copies/ml)	5.52 (4.56 – 5.87)
CSF HIV RNA (log10 copies/ml)	3.37 (2.19 – 4.35)
No drug use*	26 (72%)

^{*}Denies any lifetime drug use or any drug use in 4 months prior to enrollment

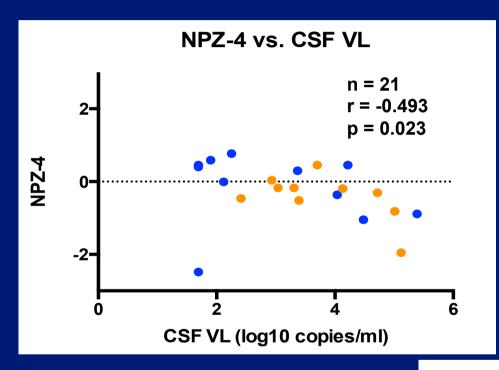
Baseline Neuropsychological Performance of Acute HIV Subjects

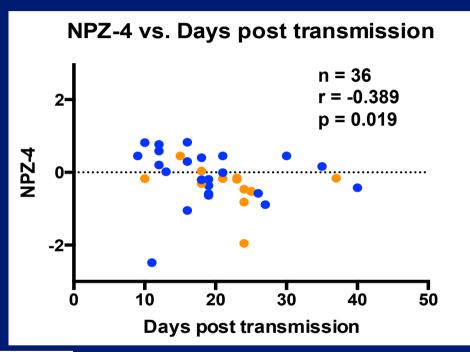


22% (n = 8) performed >1 SD below norm means on ≥2 NP tests

Lines and error bars represent means and SD

Baseline Neuropsychological Performance Modestly Correlated with CSF HIV RNA and Days Post HIV Transmission



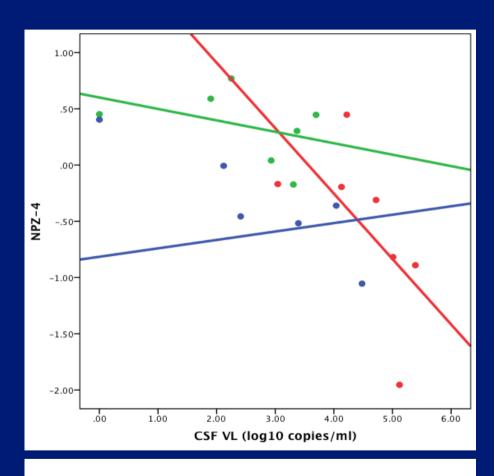


Fiebig I/IIFiebig III/IV

Neuropsychological performance scores did not significantly correlate with depression or anxiety measures at baseline or follow up

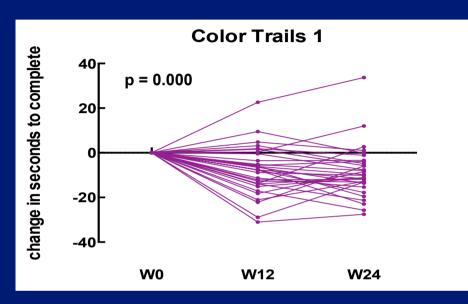
Moderating Effect of CD4 on Neuropsychological Performance

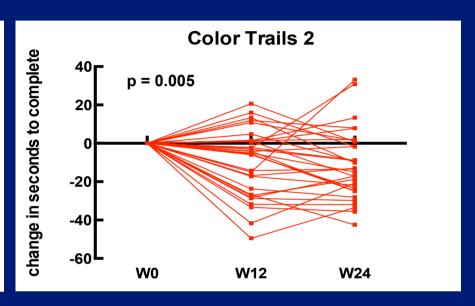
	Standard B coefficient	p-value
CD4	822	.004
CSF VL (log 10 copies/ml)	725	.013
Days post transmission	040	.849
CD4 CSFVL interaction	.663	.000

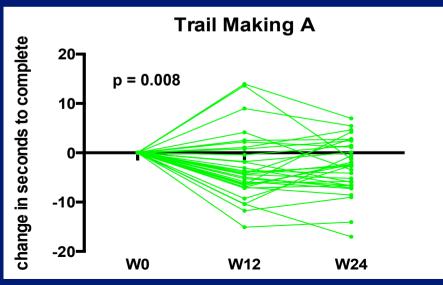


- Low CD4 (132-338 cells/mm3)
- $R^2 = 0.37$
- Moderate CD4 (339-555 cells/mm3)
- $R^2 = 0.16$
- High CD4 (565-970 cells/mm3)
- $R^2 = 0.02$

Improvement in Neuropsychological Performance after ART Initiated at Week 0

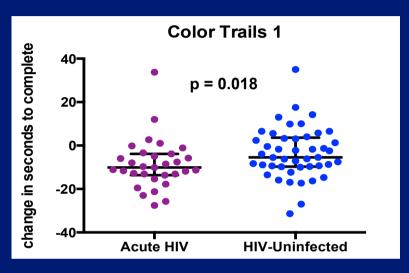


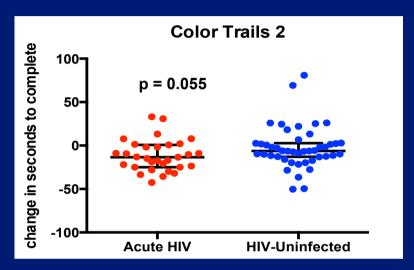


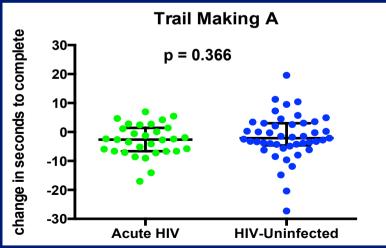


- Significant improvement from week 0 to week 12 in processing speed and executive functioning tests (no change in motor)

Comparison of Neuropsychological Performance Improvement in Acute HIV and HIV-Uninfected Controls



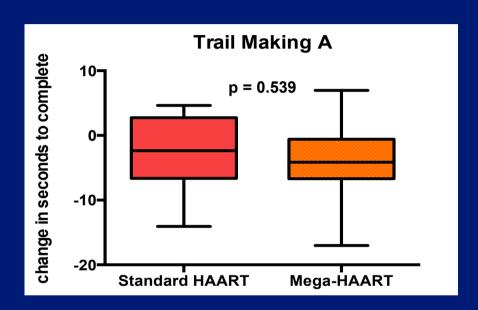


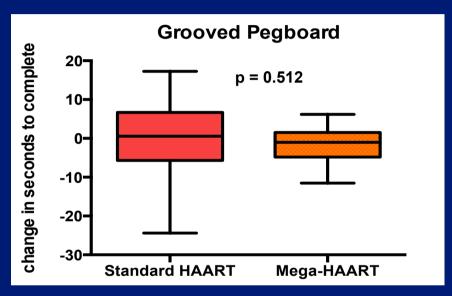


Only Color Trails 1 had greater change from baseline than HIV-uninfected controls at week 24

Lines and error bars represent medians and IQR

Comparison of Neuropsychological Performance in Standard HAART and Mega-HAART Groups after 6 months of Treatment





Similar longitudinal improvement in all domains between Standard HAART (n = 15) and Mega-HAART groups (n = 15)

Standard HAART = Tenofovir, Emtricitabine, Efavirenz Mega=HAART = HAART + Raltegravir, Maraviroc

Study Limitations

- Small sample size and short follow up time
- Unclear generalizability; predominantly Thai men, HIV clade CRF01_AE
- Brief neuropsychological battery
- Confounding factors of existing drug use and other variable demographic factors at baseline

Study Conclusions

- Neuropsychological performance inversely correlated with CSF HIV RNA and days post HIV transmission.
- No correlation between neuropsychological performance and depression/anxiety scores.
- CD4 possible protective factor, moderates association between CSF HIV RNA and neuropsychological performance.
- Only one processing speed test (Color Trails 1) had greater improvement than HIV-uninfected controls.
- Mega-HAART was not associated with greater neuropsychological improvement vs. standard HAART.

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