NREPP SAMHSA's National Registry of Evidence-based Programs and Practices

Motivational Interviewing

Review 11

Rueda, S., Park-Wyllie, L. Y., Bayoumi, A., Tynan, A.-M., Antoniou, T., Rourke, S., & Glazier, R. (2006). Patient support and education for promoting adherence to highly active antiretroviral therapy for HIV/AIDS. *Cochrane Database of Systematic Reviews*, Issue 3, Art. No. CD001442. PubMed abstract available at http://www.ncbi.nlm.nih.gov/pubmed/16855968.

Objectives	Examine randomized controlled trials on the effectiveness of patient support strategies and education to improve adherence to highly active antiretroviral therapy (HAART).
Studies Included	Nineteen U.S. and international studies published between 1999 and 2005
Participants in the Studies	Children and adults who are HIV-positive, adults with a history of alcohol dependence
Settings	Academic centers, medical practices, county hospitals, outpatient clinics, community health centers, sexual health centers, AIDS service organizations
Outcomes	Treatment regimen adherence, immunologic and virologic outcomes, risky sexual behaviors
Limitations of the Studies	The studies were methodologically weak; some studies did not conceal treatment group allocation; there was use of subjective over objective adherence measures; there were design flaws in some of the studies that could lead to an overestimation of intervention effects. In many studies, interventions were delivered by different types of providers; treatment duration varied across studies; some studies were targeted for patients on an established regimen, while others were for patients initiating or switching treatment. These differences made it difficult to compare the studies.

Results

This review concluded that individual-level interventions were more successful than group interventions, and those interventions that were carried out in more than 12 weeks were more successful than those with a shorter duration. Improved adherence outcomes were associated with interventions targeting medication management skills, in contrast with cognitive behavioral or MI approaches, which targeted psychological constructs. Of the 19 included studies, 10 demonstrated a beneficial effect of the intervention on treatment adherence. The authors of the review were not able to determine whether effective adherence interventions were associated with improved immunological or virological outcomes.