Analysis of compliance with Antiretroviral (ARV) drinking of HIV patients in Regional General Hospitals Central Bangka District

Taufik Kurrohman^{1*}, Elvi Sunarsih², Rico Januar Sitorus³, Legiran Legiran ⁴, Yunindyawati Yunindyawati ⁵

Anak Bangsa University, Indonesia¹ Sriwijaya University, Indonesia²⁻⁵ salimbadui@yahoo.com



Article History

Received on 25 April 2024 1st Revision on 30 April 2024 Accepted on 14 May 2024

Abstract

Purpose: The aim of this research was to analyze knowledge, attitudes, and compliance with antiretroviral (ARV) antidotes among HIV patients at the Central Bangka Regional General Hospital.

Methods: This study used a qualitative method with a phenomenological approach. The technique for taking respondents was a non-probability sampling technique, purposive sampling. Nine informants participated in 9 people. The data were collected using an in-depth interview guide.

Results: Findings from the research show that there were still several informants who had insufficient knowledge about compliance in taking ARV antidotes. Even though the informants' attitude towards compliance with antiretroviral (ARV) antiretrovirals was relatively good, there were several key informants who stated that they had stopped taking antiretroviral (ARV) antidotes for several months because they felt healthy. However, several months later, they experienced adverse effects that resulted in a decline in their health.

Recommendation: Based on the findings of this research, it is recommended that the Person in Charge of HIV at the Central Bangka Regional Hospital should increase the level of supervision of HIV patients with the aim of ensuring that they remain compliant, consistent, and sustainable in taking HIV antidotes. The Central Bangka Health Service is also advised to improve cross-program coordination in HIV prevention efforts as well as to monitor the schedule for taking ARV antidotes through collaboration with health workers and those in charge of HIV patients at the Central Bangka District Hospital.

Keywords: Antiretrovirals, HIV, HIV patients, ARV antidotes **How to Cite:** Kurrohman, T., Sunarsih, E., Sitorus, R. J., Legiran, L., & Yunindyawati, Y. (2024). Analysis of compliance with Antiretroviral (ARV) drinking of HIV patients in Regional General Hospitals Central Bangka District. *Journal of Multidisciplinary Academic and Practice Studies*, 2(2), 197-201.

1. Introduction

Antiretroviruses (ARV) are antidotes that aim to inhibit the reproduction of retroviruses, which are viruses present in HIV. However, it should be noted that this antidote is not used to prevent transmission of HIV from one infected individual to another, is not to treat HIV infection, and does not have the ability to eliminate the virus completely. Its function is to inhibit or block the viral replication process, help minimize the number of viruses in the body, and slow down damage to the immune system. This aims to ensure that individuals infected with HIV feel more comfortable and live their daily lives normally (Rahakbauw, 2016).

The availability of ARV antidotes for people living with HIV/AIDS (PLWHA) is still insufficient because compliance with ARV antidotes is very important for the success of antidotes. This lack of compliance can result in low virological efficacy of first-line antiretroviral antidote regimens as well as the spread of virus variants that are resistant to antiretrovirals, potentially causing a public health disaster. In contrast to many other diseases, it is very important for PLWHA to take all doses of the antidote to prevent the development of resistance and to increase their chances of survival (Wasti, Simkhada, Randall, Freeman, & van Teijlingen, 2012).

PLWHA compliance with taking ARVs is influenced by internal factors such as the drive to maintain health and the desire to prolong life, as well as supportive external factors such as support from family, support from groups of peers who experience similar conditions, and support from health workers (A. Azwar, 1996; S. Azwar, 2011).

Based on the data obtained from the Central Bangka District Hospital in 2019, there were six HIV sufferers (three people stopped using the antidote, one person was disobedient in taking the ARV antidote, one person stopped using the antidote, and one person was referred out of the area). In 2020, the number of HIV sufferers decreased to four (two people were non-compliant in taking ARV antidotes and two people were referred out of the area). Meanwhile, in 2021, there were three HIV sufferers (one person adhered to taking the ARV antidote, one person stopped using the antidote, and one person died) (Central Bangka Hospital, 2021).

According to a survey and initial interviews conducted by researchers with HIV patients at the Central Bangka District Hospital on June 27, 2022, HIV patients' non-compliance in taking ARV antidotes was caused by boredom from taking antidotes every day for a long time. Apart from that, there are complaints about access being too far and a lack of transportation to go to health services to take ARV antidotes.

This study aimed to analyze the knowledge and attitudes of HIV patients related to compliance with antiretroviral (ARV) antiretrovirals at the Regional General Hospital of Central Bangka Regency.

2. Methodology

Utilizing a phenomenological perspective, the research methodology was qualitative. In the social sciences, qualitative research is a methodology that prioritizes direct meetings with participants and direct observation of events that occur using the language and terms they use. Research using a qualitative approach aims to obtain in-depth understanding, detailed information, or a complete narrative about the subject and its social context. The researcher then interpreted the meaning contained in the expressions and activities of the research subject, which was then translated into a scientific statement (Hansana et al., 2013; Karyadi, 2017).

3. Results and discussions

3.1 Research Results

3.1.1 Knowledge

Based on the results of the primary research, it can be concluded that information on HIV awareness among patients at the Central Bangka Regional Hospital is about the importance of consistency in taking ARV antidotes continuously without interruption. All informants stated that adherence to ARV antidotes can reduce HIV symptoms and make the body feel more comfortable and healthy. This finding is strengthened by the results of interviews with supporting informants, which showed that supervision in taking ARV antidotes, especially by the patient's family, is considered important. However, there was one supporting informant who stated that some HIV patients may not be compliant in taking the antidote (Latif, Maria, & Syafar, 2014; Mulyasa, 2010; Sarafino & Smith, 2014).

Based on the results of interviews with key informants, it was concluded that their knowledge of the benefits of using antiretroviral antiretrovirals is that taking antiretroviral antidotes can increase

endurance, provide a sense of comfort, and improve overall health. This information is supported by the results of interviews with supporting informants, who stated that HIV patients had been given information about the benefits of ARV antidotes by the doctors who treated them.

It can be concluded from the results of interviews with key informants that their knowledge of how to obtain antiretroviral antidotes is by going to the nearest hospital, health center, or village health post in their area. This is also supported by the results of interviews with supporting informants, who stated that HIV patients received ARV antidotes through visits to hospitals and were assisted by doctors.

3.1.2 Attitude

This can be concluded from the results of key informant interviews that their attitudes regarding regular CD4 testing every six months still show that some key informants are inconsistent in carrying out CD4 testing according to the schedule scheduled by the officer in charge of HIV (Notoatmodjo, 2012; Prawirohardjo, 2014; Tae, Ratoebandjoe, & Daeng, 2021).

This information is supported by the results of interviews with supporting informants, who stated that HIV patients are required to carry out regular CD4 tests every 6 months, and doctors who treat HIV have prepared facilities for patients to carry out CD4 tests. Although HIV testing at Regional General Hospitals is free, its implementation is not optimal.

This can be concluded from the results of key informant interviews that, it is concluded that the informants' attitudes regarding the consumption of ARV antidotes are sometimes influenced by feelings of feeling healthy and cured. Several informants stated that they stopped taking ARV antidotes because they felt that they had recovered. However, after several months, they experienced negative impacts and side effects from not taking the antidote (Aurora, Tisnanta, & Triono, 2023; Latifa & Purwaningsih, 2016; Nurihwani, 2017; Nursalam, K., Misutarno, & S., 2018).

This information is supported by the results of interviews with supporting informants, who stated that after HIV patients felt positive changes after taking the antidote, they tended to stop taking the antidote. However, a few months later, their condition worsened and they returned to the hospital with more serious conditions.

3.2 Discussion

3.2.1 Analysis of informants' knowledge regarding Adherence to Taking Antiretroviral (ARV) Antiretrovirals in HIV Patients at the Central Bangka Regional General Hospital

The results of interviews regarding informants' knowledge of compliance in taking Antiretroviral Antiretrovirals (ARVs) show that most of the main informants stated that ARVs can inhibit the development of HIV. Compliance with this antidote is thought to reduce HIV symptoms and make the body feel healthy and comfortable. They realized that if they did not take ARV antidotes, HIV symptoms could become more severe and even fatal, potentially causing death. The informant also suggested counseling with health workers and seeking information at a Regional Hospital or Community Health Center. They realize the benefits of ARV antidotes to increase body resistance or immunity. In addition, they realize the importance of carrying out CD4 tests and that taking ARV antidotes must be done long-term and for life.

Minimal or inadequate knowledge about the spread of HIV is closely related to its spread of the HIV virus and has a significant impact on the level of patient compliance with the use of antidotes. This is because people tend to feel that they are not infected with the HIV virus or do not feel symptoms of illness, so they are less compliant with taking the antidote. They tend to feel that they do not need to use antiretroviral antidotes because of a lack of understanding of the risks and impacts of HIV (Notoatmodjo, 2012). Based on research conducted by Rahmadani and colleagues entitled "Factors that influence HIV patients' compliance with antiretroviral therapy in Manahan Health Center Surakarta in 2018", it was concluded that there is a correlation between the level of knowledge and the level of compliance of HIV/AIDS patients undergoing antiretroviral therapy.

From the results of research conducted by researchers through in-depth interviews with informants, to collect information regarding their knowledge about Adherence to Taking Antiretroviral (ARV) drugs, it was revealed that of the nine main informants interviewed, some still had insufficient knowledge related to the use of ARV antidotes. This can be seen from the answers of several informants who expressed their ignorance regarding the impact or risks of forgetting to take ARV antidotes, duration of antiretroviral antidote use, and duration of antiretroviral antidote use. In addition, some informants admitted that they did not know the steps to be taken before starting to use antiretroviral antidotes.

3.2.2 Analysis of informants' attitudes regarding Adherence to Taking Antiretroviral (ARV) Antiretrovirals in HIV Patients at the Central Bangka Regional General Hospital

The results of the interviews showed that the majority of the main informants' attitudes stated that taking ARV antidotes according to a doctor's prescription can prolong the life span and increase endurance. They realized that ARV antidotes do not cure HIV, but help maintain the body's resistance. The informants believed that the use of ARV antidotes could benefit their survival.

4. Conclusion

- 1. The results of an in-depth analysis of informants' knowledge regarding compliance with antiretroviral (ARV) Antiretrovirals in HIV Patients at the Central Bangka Regional General Hospital, among the 9 main informants, there are still several informants still lack knowledge regarding compliance with taking ARV antidotes.
- 2. The results of an in-depth analysis of informants' attitudes regarding adherence to taking antiretroviral (ARV) antidotes in HIV patients at the Central Bangka Regional General Hospital showed that informants' attitudes regarding adherence to taking antiretroviral (ARV) antidotes are quite good; however, there are still main informants who stated that they had stopped using ARV antidotes for several months because they felt that their body condition had improved. However, after several months, they experienced negative impacts and side effects from not receiving the antidote, which caused a decline in their health.

References

- Aurora, S. D., Tisnanta, H., & Triono, A. (2023). Right to health services for people with HIV/AIDS in Bandarlampung: Challenges and fulfillment. *Annals of Justice and Humanity*, 2(2), 77-87.
- Azwar, A. (1996). *Menjaga mutu pelayanan kesehatan: aplikasi prinsip lingkaran pemecahan masalah.* Jakarta: Pustaka Sinar Harapan.
- Azwar, S. (2011). Sikap dan perilaku dalam: sikap manusia teori dan pengukurannya. *Yogyakarta: Pustaka Pelajar*, 3-22.
- Hansana, V., Sanchaisuriya, P., Durham, J., Sychareun, V., Chaleunvong, K., Boonyaleepun, S., & Schelp, F. P. (2013). Adherence to antiretroviral therapy (ART) among people living with HIV (PLHIV): a cross-sectional survey to measure in Lao PDR. *BMC public health*, 13, 1-11.
- Karyadi, T. H. (2017). Keberhasilan Pengobatan Antiretroviral (ARV). *Jurnal Penyakit Dalam Indonesia*, 4(1).
- Latif, F., Maria, I. L., & Syafar, M. (2014). Efek samping obat terhadap kepatuhan pengobatan antiretroviral orang dengan HIV/AIDS. *Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)*, 9(2), 101-106.
- Latifa, A., & Purwaningsih, S. S. (2016). Peran masyarakat madani dalam mengurangi stigma dan diskriminasi terhadap penderita HIV & AIDS. *Jurnal Kependudukan Indonesia*, 6(2), 51-76.
- Mulyasa, E. (2010). Penelitian tindakan kelas. Bandung: PT Remaja Rosdakarya.
- Notoatmodjo, S. (2012). Metodologi Penelitian Kesehatan Tahun 2012.
- Nurihwani, N. (2017). Hubungan Dukungan Keluarga terhadap Kepatuhan Pengobatan Antiretrovial (ARV) pada Orang dengan HIV dan AIDS (ODHA) di Puskesmas Jungpandang Baru Tahun 2017. Universitas Islam Negeri Alauddin Makassar.
- Nursalam, N., K., N. D., Misutarno, M., & S., F. K. (2018). *Asuhan keperawatan pada pasien terinfeksi HIV/AIDS*. Jakarta: Penerbit Salemba Medika.
- Prawirohardjo, S. (2014). Ilmu kebidanan sarwono prawirohardjo. *Jakarta: PT. Bina Pustaka Sarwono Prawirohardjo*.

- Rahakbauw, N. (2016). Dukungan keluarga terhadap kelangsungan hidup ODHA (Orang Dengan HIV/AIDS).
- Sarafino, E. P., & Smith, T. W. (2014). *Health psychology: Biopsychosocial interactions*: John Wiley & Sons.
- Tae, M., Ratoebandjoe, P. N. L., & Daeng, E. (2021). Implementation of the Family Hope Program in Oelpuah village, Central Kupang district, Kupang regency. *Journal of Social, Humanity, and Education*, 1(3), 171-183.
- Wasti, S. P., Simkhada, P., Randall, J., Freeman, J. V., & van Teijlingen, E. (2012). Factors influencing adherence to antiretroviral treatment in Nepal: a mixed-methods study. *PloS one*, 7(5), e35547.