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The present study aimed to assess the factors associated with HIV/AIDS patients' in need of CD4+ T-cell count services at selected health centers in Addis Ababa. Semi-structured questionnaires were administered to 240 clients to assess their sociodemographic factors as well as reasons for and barriers to accessing CD4+ T-cell count services. Descriptive analyses and logistic regression analyses were performed. Over two-thirds of the participants were ≤ 35 years old, had graduated from secondary school, and were single (71.7%). Of the participants, 66.4% and 66.0% were covered by non-governmental organizations and the national health insurance, respectively. The estimated proportion of the clients who needed CD4+ T-cell count services was 88.3%. The most frequently cited reasons for consulting CD4+ T-cell count services were to determine the causes of immune suppression and to obtain anti-retroviral drugs (70.6%). The main barriers to accessing CD4+ T-cell count services included financial problems, availability of services and long waiting times (69.0% and 68.2%, respectively). There was a significant positive association of the benefits of non-governmental organizations with the need for CD4+ T-cell count services (adjusted odds ratio [aOR] = 4.50; 95% confidence interval [CI] = 1.90-10.53). There was a significant negative association of the lack of financial problems with the need for CD4+ T-cell count services (aOR = 0.12; 95% CI = 0.03-0.51). The major outcomes of the study showed that there was a high demand for CD4+ T-cell count services at the sampled health centers. Non-governmental organizations played a prominent role in the provision of services. The provision of free CD4+ T-cell count services and better access to financial assistance should be urgently considered. Cognitive differences between HIV-seropositive homosexual men, gay bisexual men and heterosexual men: a neuropsychological comparison. Impaired intellectual function is a recognized complication of HIV disease. This study used a comprehensive neuropsychological test battery to test the hypothesis that patients with HIV infection demonstrate a greater degree of impairment in cognitive function as compared to other groups without HIV infection. Forty-one homosexual men with HIV seropositivity and 50 homosexual men without HIV infection were grouped into non-AIDS and AIDS groups and compared. The data demonstrated cognitive deficits for

