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Discrepancies between self-report and objective measures among HIV+ stimulant users: cognitive, psychological, and behavioral health correlates

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Background

While it has long been recognized that self-reported drug use may be at variance with objective data such as urine toxicology assays, few studies have explored the behavioral correlates of such discrepancies. The goals of the current project were to identify a sub-group with discrepancies between data obtained via the two methods and characterize this sub-group in terms of their neuropsychological functioning, medication adherence rates, and approach to self-report measures.

Materials and methods

Participants were 166 ethnically diverse, community dwelling, HIV seropositive adults (138 male, 28 female) recruited as part of a study of antiretroviral medication adherence. Average age was 41.3 (6.6). The UCLA Brief Drug History Questionnaire (UCLA-BDH) was used to ascertain self-reported stimulant drug use, and urine toxicology screening was used as the objective measure of stimulant drug use. Participants completed a battery of commonly used, standardized neuropsychological tests and the Millon Clinical Multiaxial Inventory- III (MCMI-III).

Results

After matching the urinalysis results (positive or negative) for stimulant drugs with the participants' self-report, three groups were identified: "Discrepants" (n=29) (negative self report matched with positive urinalysis), "True Positives" (n=29), and "True Negatives" (n=104). ANOVA revealed that the discrepant group had the poorest medi-

cation adherence, cognitive performance, and were more defensive than the other groups.

Discussion

A sub-group of HIV-infected individuals were identified that are likely to be at greater risk for poor health outcomes. The present study underscores the need to verify patient self-report, particularly with regards to sensitive areas of inquiry such as drug use and medication adherence.