HIV/AIDS is a disease of public health importance which has become a chronic disease with the advent of antiretroviral therapy (ART) as against being a “death sentence” in the pre-ART era. Studies in this environment have shown that there is an improvement in the health related quality of life (HRQoL) of persons living with HIV/AIDS (PLWHA) on ART. However, no comparison in the HRQoL has been done in PLWHA before and after the commencement of ART. The aim of this study is to ascertain the perceived HRQoL of PLWHA before and six months after the commencement of ART, as well as the contributions of other supportive care with a view to examine their HRQoL.

This was a descriptive longitudinal hospital based study that involved 216 PLWHA who were yet to commence ART attending the antiretroviral clinic of the Federal Medical Centre, Owo. They were all consecutive patients that presented at the hospital during the period of the study who meet the inclusion criteria and consented to participate in the study. A pre-tested, semi-structured, interviewer administered questionnaire was used. The same questionnaire was re-administered after six months on ART. It consisted of sociodemographic characteristics, personal and family information, perceived social support, quality of life, family APGAR, presenting complaints, physical examination, and laboratory parameters. Data was analysed with SPSS version 15. Descriptive statistics was used to summarize the sociodemographic data. Mean scores were computed and linear regression was used to model for the predictors of quality of life (QoL).

Male: female ratio was 1:2. About two-third (65.7%) of the respondents were married and 86.1% of them were employed. The study showed that the mean QoL of respondents was significantly higher at six months after the commencement of ART in all domains except in the physical. Other predictors of QoL in this study were: marital status, female gender, unemployment, awareness period of HIV status and income.

Although HIV/AIDS still does not have a cure, ART and other supportive care remain the mainstay of management. PLWHA could be reassured that within six months on ART and other supportive
care, they are likely to have significant improvement in their HRQoL. Furthermore, the importance of family functionality should be emphasized by Family Physicians.