Anxiety disorders are one of the commonly encountered psychiatric disorders in people living with HIV/AIDS. Previous studies have noted that comorbidity of psychiatric disorders in HIV/AIDS often impair treatment compliance and worsen disease progression.

This study assessed the prevalence of Anxiety disorders as well as described factors associated with Anxiety disorders in people with HIV infection.

The subjects were made of 300 patients selected by systematic random sampling attending HIV clinic in LUTH who consented and met the inclusion criteria. The instruments used include: Sociodemographic questionnaire, clinical profile questionnaire, General Health Questionnaire and the Schedule for Clinical Assessment in Neuropsychiatry.

The instruments were administered to the patients by the author over a period of four months. Data obtained were analysed using SPSS-15 to generate frequency table, cross tabulation, chi-square tests and logistic regression analysis.

A total of 300 subjects participated in the study. One hundred and fifteen (38.3%) of the subjects were males while one hundred and eighty-five (61.7%) were females. The mean age was 36.95 (±8.73) years. Majority of subjects were married (53.7%), 21% were single and 13.3% were widowed. Two hundred and thirty-eight (79.3%) subjects were Christians while sixty-two (20.7%) were Muslims. One hundred and forty-three (47.7%) subjects had secondary school education and ninety (30%) had tertiary education. The largest proportion (34.0%) was engaged in semi-skilled employment while 25.7% were unemployed. One hundred and seventy-four (58%) subjects had HIV counselling. The mean duration of HIV disease was 45.7 (±33.7) months.
Ninety (30.0%) subjects had GHQ score of 3 and above (cases) and Sixty-five (21.7%) subjects were diagnosed with Anxiety disorders based on SCAN. Eighteen (6%) subjects had Anxiety disorders unspecified and sixteen (5.3%) subjects had mixed anxiety and depressive disorders while one (0.3%) subject had obsessive compulsive disorder.

Majority of the subjects (67.7%) diagnosed with Anxiety disorders were females and married (36.9%). The mean age of subjects with Anxiety disorders was 34.96 (±9.08) years. Thirty (46.2%) subjects with Anxiety disorders had secondary education while twenty four (36.9%) had tertiary education. Twenty seven (41.5%) subjects with Anxiety disorders were unemployed. Twenty nine (44.6%) subjects with Anxiety disorders had family support while thirty six (55.4%) had no family support. Anxiety disorders was significantly associated with unemployment status (p-value =0.004), marital status (p-value= 0.016) and lack of family support (p-value =0.000). However, unemployment status and lack of family support were the factors that were still predictive of Anxiety disorders (family support OR=0.396, 95% CI=0.223-0.705, p-value=.002 and employment status OR=0.469, 95% CI=0.256-0.858, p-value=0.014).

A significant proportion of HIV positive subjects had Anxiety disorders and social problems like unemployment and absence of family support was associated as well as predicted the presence of Anxiety disorders. Prompt identification and treatment of mental disorders like Anxiety disorders as well as management of psychosocial problems in HIV patients should be integrated into HIV intervention in this part of the world.