Project Details	
Project Code	MRCPHS24Br Trickey
Title	Investigating cause-specific hospitalisations among people living with
	HIV on antiretroviral therapy
Research Theme	Population Health Sciences
Summary	This project aims to investigate rates of hospitalisations due to different
	causes among people with HIV on antiretroviral therapy, and how they
	differ by subgroups, for example, by gender or age. The student would
	have access to data from the largest collaboration of HIV cohorts across
	Europe and North America, with records for 200,000 people with HIV on
	antiretroviral therapy, including data on over 280,000 hospitalisations.
Description	Prior to the introduction of combination antiretroviral therapy in 1996,
	people with HIV had very high rates of mortality, mostly due to AIDS.
	Since then, life expectancies have increased dramatically as people with
	HIV have been able to successfully suppress the virus due to
	antiretroviral therapy, reducing the risk of AIDS and death. Over the last
	decade, more effective antiretroviral therapy regimens with fewer side
	effects have continued to become available. Increasing life expectancies
	have meant that people with HIV are ageing with reduced morbidity due
	to AIDS and increased morbidity due to other causes that are common in
	the general population (e.g., cardiovascular disease and cancer).
	Additionally, substance use and comorbidities such as nepatitis C tend to
	be more common among people with HIV than in the general
	population. Inerefore, the reduction in hospitalisations due to AIDS may
	not have translated into a net reduction in nospitalisations among
	people with HIV on antiretroviral therapy due to the emergence of other
	conditions associated with ageing. Also, trends in the causes of
	nospitalisations may vary across subgroups of people with fire. This
	people with HIV on antiretroviral therapy The student would have
	access to data from the Antiretroviral Therapy. Cohort Collaboration
	(ART-CC) the largest collaboration of HIV cohorts across North America
	and Europe, which has been publishing world leading research for over
	20 years. The 2018/19 ART-CC data undate contains records for 200 000
	people with HIV on antiretroviral therapy, including data on over
	280.000 hospitalisations, with a 2022/23 update currently being received
	and cleaned. The ART-CC's cause-specific hospitalisations data have not
	previously been analysed. Access to other datasets from outside of
	North America and Europe is also possible. During the PhD, the student
	would start by reviewing the literature on the causes and rates of
	hospitalisations among people with HIV on antiretroviral therapy. The
	project would involve developing an algorithm to define causes for
	hospitalisations in the ART-CC dataset. The student would then
	investigate how rates of cause-specific hospitalisations differ by
	subgroups, for example those defined by age, gender, or health status.
	The student would be able to choose the subgroups of interest.
	Additionally, there is some evidence that people with HIV on specific
	antiretroviral regimens are more likely to experience particular side-
	effects, such as weight gain or metabolic syndromes. The student could
	investigate whether specific antiretroviral therapy regimens are
	associated with increased rates of cause-specific hospitalisations. Once

	again, the student would have leeway to choose the scientific questions of interest. Over the course of the PhD, the student would learn about epidemiological survival analysis techniques such as Cox regression, as well as causal inference techniques where observational data are used to mimic randomised controlled trials. The student would also gain a background in literature searching and evidence synthesis and there would the opportunity for travel to international conferences on HIV research.
Supervisory Team	
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