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*Left truncation in the context of competing risks*

An analysis involving left truncation in the context of competing risks will be presented. The goal of the analysis is to estimate the effect of co-infection with hepatitis C on the risk of developing cardiovascular (CVD) disease among HIV infected individuals. Time is measured from the date of initiation of antiretroviral therapy. Non CVD deaths are a competing risk to the event of interest. Left truncation occurs due to the fact that antiretroviral therapy may have been initiated before enrolment into the cohort. While left truncation of the competing risk, non-CVD death, is complete, some information is available on CVD events prior to enrolment into the study through the collection of medical histories. The degree of completeness of this data varies by calendar time and site, in this multi-site cohort study. The analysis is further complicated by the desire to model hepatitis C with a time dependent variable, since infection may clear spontaneously or with treatment. Results of this work-in-progress analysis will be presented, as well as plans for further work.