Retention, ART Use, and Viral Suppression Among Young Adults Newly Linked to HIV Care

Abstract 840

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Background

- Retention in care (RIC), antiretroviral therapy use (ART), and HIV viral suppression (VS) are critical milestones for persons living with HIV (PLWH) to achieve soon after an HIV diagnosis
- The US National HIV/AIDS Strategy (NHAS) highlights key populations, including men who have sex with men (MSM) and minority women
- Trends in these indicators, particularly among young adult PLWH newly linked to care in the US, have not been examined

Methods

Study Population:

- 6,515 MSM and 2,382 women ≥18 to <30 years of age from 14 clinical cohorts in the NA-ACCORD who:
  1) were successfully linked to HIV care (≥2 HIV care visits in 12 months)
  2) were within 5 years of linkage to HIV care
  3) had ≥1 HIV care visit from January 1, 2004 to December 31, 2013

Outcomes:

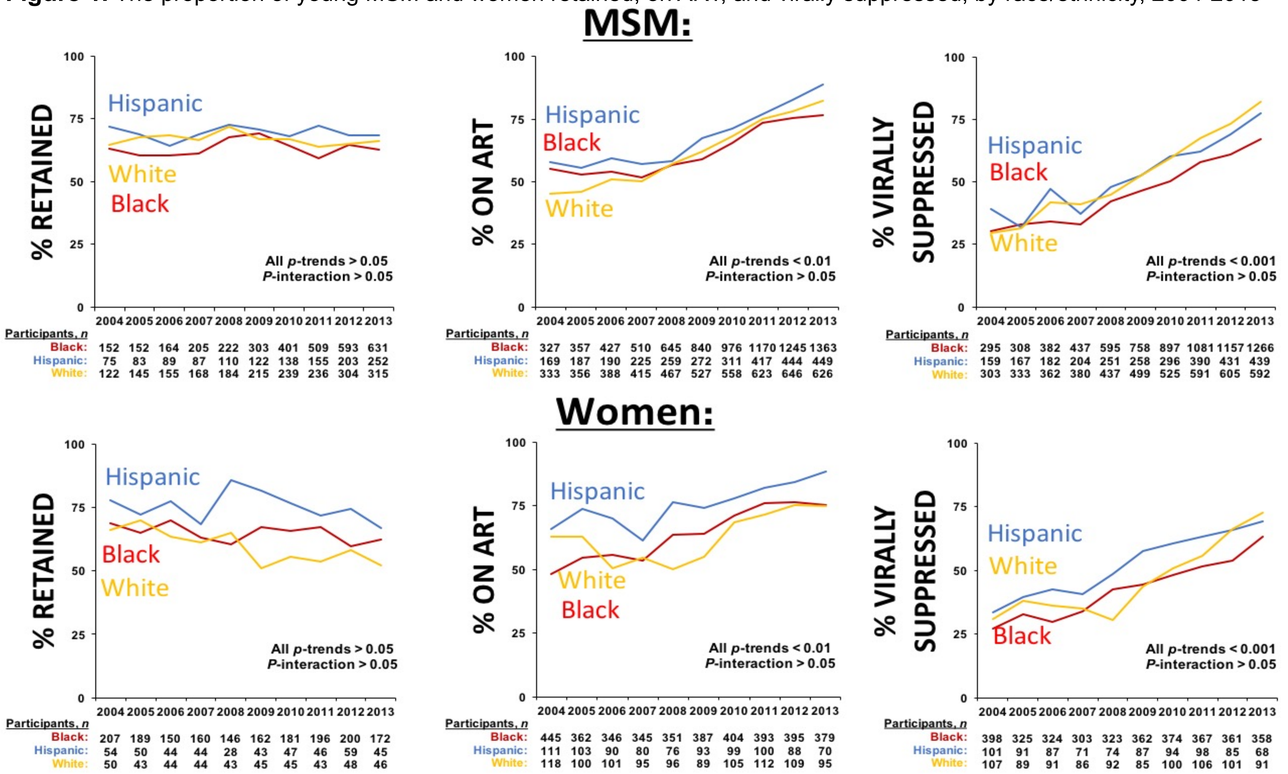
	1) RIC	2) ART	3) VS
Numerator:	≥1 HIV care visit in 4 consecutive semesters, ≥60 days apart	≥1 ART prescription	HIV RNA <200 copies/mL at last measurement
Denominator:	≥1 HIV care visit in the 1st semester	≥1 HIV care visit that year	≥1 HIV care visit & ≥1 HIV RNA measure that year

Statistical Analysis:

- Estimated serial cross-sectional annual proportions of RIC, ART, and VS from 2004-2013 for MSM and women, stratified by race/ethnicity
- P-values for trend estimated from log-binomial regression with generalized estimating equations (GEE) and an ordinal variable for calendar year
- Changes in racial/ethnic disparities evaluated using year-by-race/ethnicity interaction with a nested models approach

Results

Figure 1. The proportion of young MSM and women retained, on ART, and virally suppressed, by race/ethnicity, 2004-2013



Conclusions

- Despite increases over time, RIC, ART, and VS among young adult MSM and women linked to HIV care are low, and racial/ethnic disparities in these indicators persist
- Limitations include
  - no data on PLWH ages ≤18 years
  - small sample of women
  - use of cross-sectional measures of HIV care indicators in longitudinal cohorts
- Continued efforts to increase RIC, ART, and VS in young adult PLWH from key populations are needed to achieve NHAS 2020 goals

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