Disparities In Viral Suppression Among U.S. Adults With Recently Diagnosed HIV

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Background

- Ending the HIV Epidemic (EHE) requires rapid and effective treatment of people with HIV to achieve viral suppression, which is associated with improved health outcomes and reduced HIV transmission risk.
- Assessing disparities in viral suppression among persons with recent HIV diagnoses has the potential to guide practice and research.

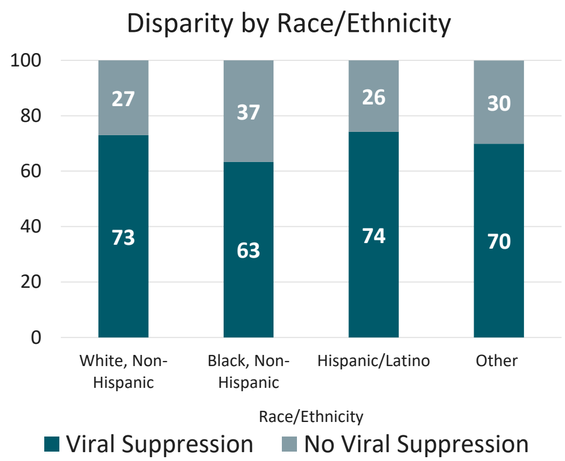
Methods

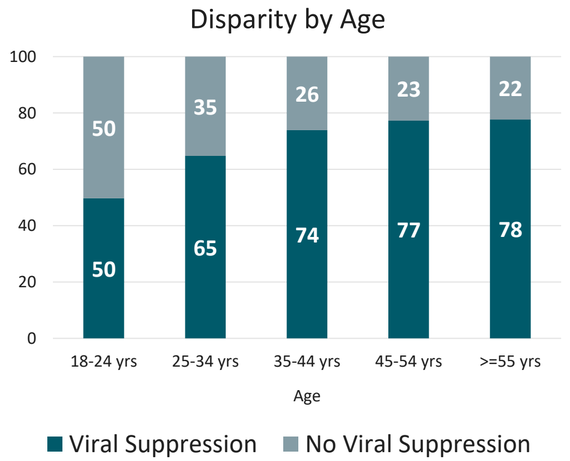
- Nationally representative data from the Medical Monitoring Project, 2015-2018.
- Included adults with HIV diagnosed in the 5 years prior to interview (N=1,869).
- Measures:
  - » Viral suppression was defined as <200 copies/mL or undetectable based on the most recent viral load.
  - » Generalized anxiety disorder (GAD) during the past 2 weeks was assessed using a validated scale and categorized based on clinically meaningful cutpoints.
  - » Persons who reported needing but not receiving services had unmet needs for these services.
  - » All characteristics were based on the past 12 months unless otherwise indicated.
- Assessed differences in viral suppression by selected characteristics using Rao-Scott χ^2 tests ($p<0.05$).

Results

31% of persons with recent HIV diagnoses were not virally suppressed.

The proportion of persons not virally suppressed differed by race/ethnicity and age.





Persons who had the following characteristics were less likely to be virally suppressed:

- History of homelessness (40% vs. 30%)
- Used non-injectable drugs (37% vs. 27%)
- Generalized anxiety disorder (38% vs. 29%)
- Unmet needs for
  - Medicine through the AIDS Drug Assistance Program (63% vs 29%)
  - HIV case management (55% vs. 28%)
  - Patient navigation services (67% vs. 28%)

Conclusions

- Nearly one third of persons with newly diagnosed HIV were not virally suppressed.
- The proportion of persons not virally suppressed varied by race/ethnicity, age, social determinants of health, anxiety, and unmet needs for care.
- Ensuring all persons with newly diagnosed HIV are virally suppressed will limit HIV transmission risk.
  - » A majority of transmission occurs from people who knew they had HIV, but did not get enough care and treatment to control the virus.
- Expanding adherence support and peer navigation programs may result in improved health outcomes and reduced number of new HIV infections, and supports the EHE initiative.

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