HIV Outcomes Among People With HIV Who Inject Drugs in West Virginia

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BACKGROUND

Historically West Virginia has had one of the lowest HIV prevalence rates in the United States. However, numbers of newly diagnosed HIV cases began to increase in 2018. Today, there are multiple HIV outbreaks in West Virginia, most of which are among people who inject drugs (PWID). This study examines HIV outcomes among PWID hospitalized with infectious complication related to injection drug use.

METHODS

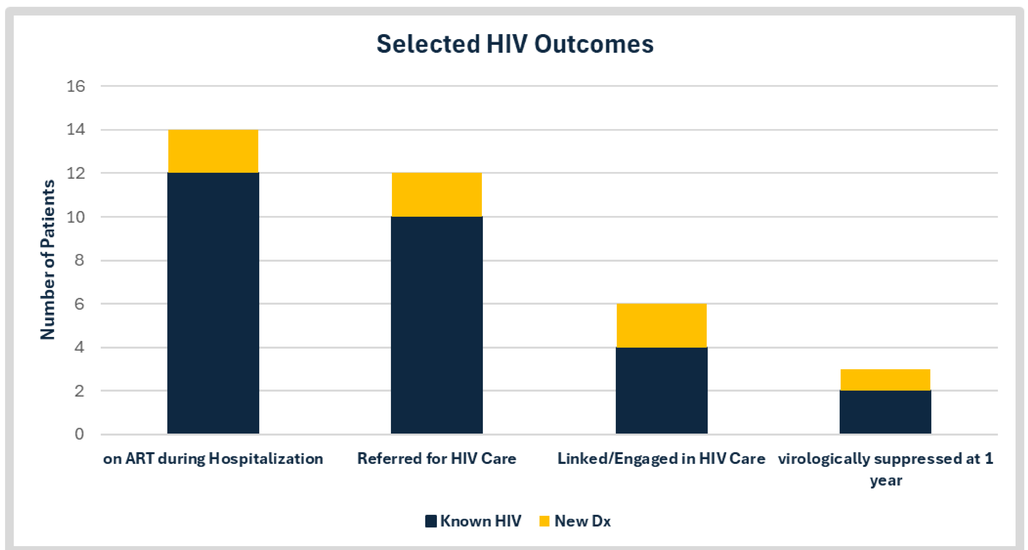
This retrospective study assessed electronic medical records of PWID admitted to Ruby Hospital, the flagship hospital for WVU Medicine from 2018 to 2022. Among those diagnosed with HIV, we assessed connection to care and virologic suppression, among other outcomes, over the 12 months following hospital admission.

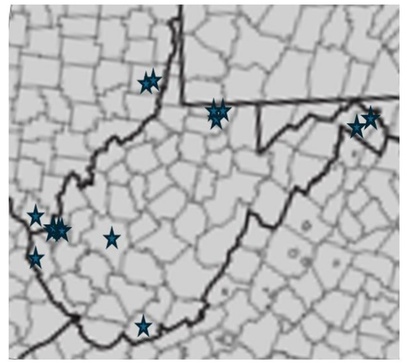
Demographics	
Age (mean)	31
Female	6 (40%)
White	14 (93%)
Medicaid	15 (100%)
Unstable Housing	7 (47%)
Social Deprivation index (SDI) (mean)	64
HCV infected	8 (53%)
CD4 < 200 cells/mm^3	8 (53%)
ART prior to admission	7 (47%)
Viral load < 20 copies	2 (13%)

These data suggest that concentrated focus is needed to improve the HIV outcomes among PWID in West Virginia.

RESULTS

A total of 810 PWID hospitalized with IDU-related infectious complications were identified during the four-year period, of whom 15 were HIV infected (2 were newly diagnosed during hospital admission). Eleven had planned discharge and 3 had patient directed discharge. One person died during the hospital stay. Other outcomes are shown (Figure 1). Importantly, only 3 persons (20%) were virologically suppressed one-year after hospitalization, 4 persons were not virologically suppressed, and 7 persons were lost to follow-up.





- 12 of 15 lived > 2 hours from Ruby Memorial likely impacting linkage to HIV care.

CONCLUSIONS

- **High percentage of patients with advanced disease (CD4< 200) highlight fracture in care**
- **High percentage with unstable housing, high SDI, and rurality that can all stand as barriers to engagement in care**
- **1-year outcomes show majority out of care remaining at risk for ongoing community transmission**

ADDITIONAL KEY INFORMATION

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