Disposition of Referrals for Long-Acting Antiretrovirals at the Ward 86 HIV clinic in San Francisco

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Chesa Cox[1], Francis Mayorga-Munoz[1], Anthonia Chimenzie[1], Janet Grochowski[1], Diana Gleyzer[2], Matt Hickey[1], Katerina Christopoulos[1], Mary Shiels[1], Jon Oskarsson[1], Monica Gandhi[1]
[1]University of California, San Francisco, USA, [2]Chicago Medical School at Rosalind Franklin University of Medicine and Science, Illinois, USA

BACKGROUND

- Ward 86, a safety-net HIV clinic in San Francisco, serves ~2,600 publicly insured people with HIV (PWH), many with adherence challenges to daily oral ART
- Long-acting ART (LA ART) can be critical to support viral suppression among PWH experiencing barriers to daily adherence
- Since the approval of injectable cabotegravir/rilpivirine (CAB/RPV) in 2021 and lenacapavir (LEN) in 2022, Ward 86 has implemented the Special Program on Long-Acting Antiretrovirals to Stop HIV (SPLASH), a pharmacist-led program designed to use LA ART, regardless of viral suppression (VS) status
- This study examines the disposition of referrals to the SPLASH program over its first 4 years

METHODS

Study design and period:
Retrospective analysis of referrals to LA ART from January 1, 2021 – February 27, 2025

Data collection, extraction, and verification:
Collected data on patient demographics, referral outcomes (started LA ART, did not start etc.), and ART regimen used. Data extracted from electronic medical records and verified through clinician review.

Analysis:
Descriptive statistics assessed referral outcomes and patient characteristics. Calculated proportions for LA ART initiation, retention, and discontinuation. Categorized reasons for non-initiation and discontinuation. Created flow diagram (Figure 1).

KEY FINDINGS

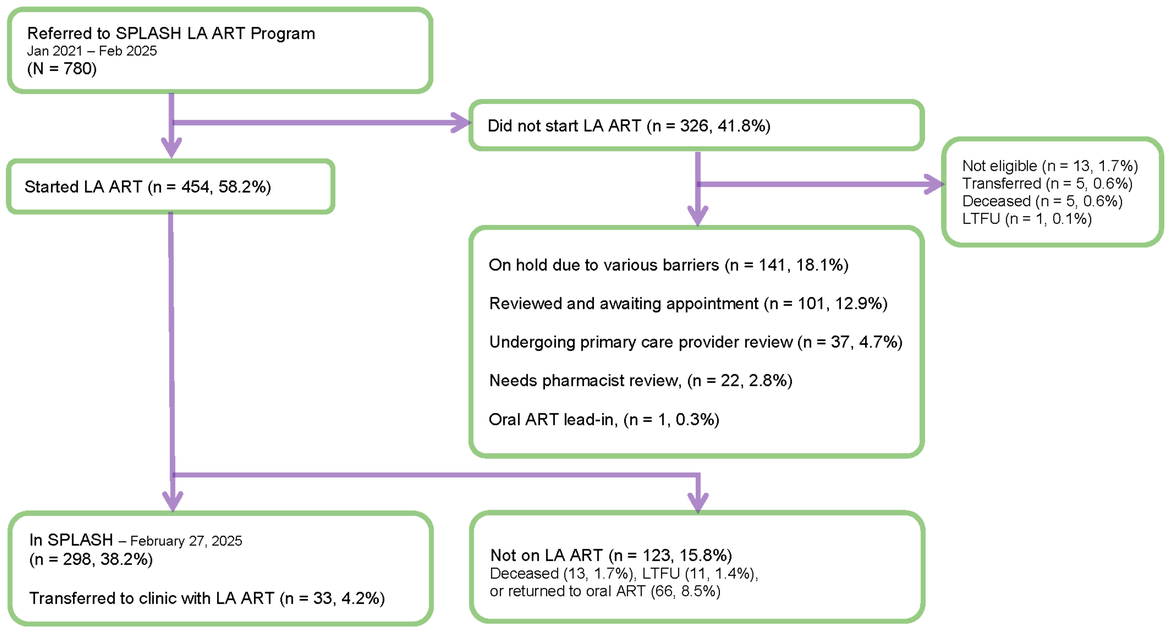
Approximately **30% of all PWH at Ward 86 have been referred for LA ART**

38.6% of referrals remain on hold due **to system- and patient-level barriers**

LA ART is increasingly accepted among patients and providers, especially for those struggling with adherence to daily oral ART

RESULTS – Referral Outcomes

Figure 1. Flowchart diagram of dispositions for 780 PWH referred to the SPLASH LA ART program. (454) initiated LA ART, while 41.8% (326) did not due to various barriers. Among those who started LA ART, 41.3% (289) remained in the program, while 11.0% (77) discontinued, choosing to return to oral ART after adverse effects like injection site reactions



RESULTS – Study Population & ART Regimen

780 PWH referred to SPLASH LA ART Program.

Demographics
- Median age 45; 82% men; 30% Latino/a; 37% White.
- 34.2% experienced unstable housing.
- 40.5% reported substance use.

LA ART regimens:
- 89.7% received LA CAB/RPV
- 5.2% received LA LEN + LA CAB
- 4.0% received LA LEN + LA CAB/RPV
- 1.2% received LEN + oral ART

CONCLUSIONS

Growing Uptake of LA ART: ~30% of PWH at Ward 86 referred to the SPLASH program, with 58.2% initiating LA ART, showing increasing acceptance.

Retention vs. Discontinuation: 72.9% remained, while 15.8% discontinued due to side effects, loss to follow-up, or death.

Path to LA ART Initiation: 38.6% of referrals remain on hold, highlighting the need for streamlined processes, improved accessibility, and patient education.

Impact on HIV Care: LA ART is a feasible option for PWH with adherence challenges; accessibility needed

AUTHOR CONTACT

Chesa Cox (Chesa.Cox@ucsf.edu)

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