Atlanta Hospital Program to Improve Linkage to HIV Care Shows Promise

However, there is still room for improvement in ensuring a largely indigent population of people with HIV gets access to medical care.

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An intervention instigated by an Atlanta hospital to improve rates of linkage to medical care among a largely indigent population of people with HIV demonstrated success in a recent study, the National AIDS Treatment Advocacy Project reports. However, the study authors found there was still room for improvement.

Presenting their findings at the IDWeek 2017 conference in San Diego, the investigators designed a single-center retrospective chart review of adults newly diagnosed with HIV in Atlanta's Grady Health System. The members of the study cohort were all admitted to Grady Memorial Hospital between January 2016 and September 2016 and were followed for six months. As of January 2015, none of the participants were taking antiretrovirals (ARVs).

The study authors defined being enrolled in HIV care as a participant keeping an HIV-related clinic appointment within 30 days of their discharge from the hospital. Viral suppression, under their definition, meant that an individual's viral load was 200 or below within six months of being discharged from the hospital.

A total of 109 people were included in a study group whose follow-up time preceded the May 2016 introduction of a multidisciplinary method of prompting early treatment of HIV after diagnoses. Another 86 people were followed after the intervention was put in place.

The pre- and post-intervention groups had populations that were a respective 87 percent and 78 percent Black.

After the intervention was put in place, proportions of the pre- and post-intervention groups that began ARVs while an inpatient at the hospital were a respective 19.8 percent and 39.1 percent. A respective 41.9 percent and 65.2 percent were enrolled in HIV care within 30 days. A respective 26.7 percent and 60.9 percent kept an HIV-related appointment within 30 days. The median time elapsed between the study cohort members' hospital discharge and first HIV-related appointment was a respective 35 days and 12 days.

A total of 44.2 percent of those in the pre-intervention group were virally suppressed after six months of follow-up, compared with 52.2 percent of those in the post-intervention group. However, this difference was not statistically significant, meaning it may have occurred by chance.

The study authors found that the intervention, however apparently successful, still had its shortcomings, considering that 61 percent of the participants did not begin ARVs before their discharge from the hospital.

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