



High Rate of Viral Suppression Among Those New to HIV Care in NIH Study

The viral suppression rate in this group was considerably higher than that seen in the same clinics a decade before.

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Researchers assessing an intervention meant to improve HIV medical care outcomes observed an across-the-board high rate of viral suppression one year after people new to care for the virus first received antiretrovirals (ARVs).

Presenting their findings in a poster at the 2019 Conference on Retroviruses and Opportunistic Infections in Seattle, researchers in the iENGAGE study evaluated a behavioral intervention meant to provide education about HIV care and treatment to newly diagnosed individuals and promote their ongoing engagement in medical care and adherence to daily ARVs.

Funded by the National Institute of Allergy and Infectious Diseases, the study was conducted at four sites in the Centers for AIDS Research Network of Integrated Clinical Systems—in Baltimore; Seattle; Birmingham, Alabama; and Chapel Hill, North Carolina.

Between December 2013 and June 2016, 371 recently diagnosed people were enrolled in the study, all within 14 days of starting medical care for HIV. They were randomized to receive the behavioral intervention on top of typical care for the virus or to receive only such typical care. The intervention, which lasted for 48 weeks of ARV treatment, included four counseling sessions crafted to address participants' individual needs as well as phone support.

The study group had high rates of factors associated with lower engagement in medical care for the virus. About half reported needing supporting services, such as housing, employment, food or transportation assistance. Thirty-one percent had depression, and 30 percent had anxiety. One in three reported high-risk alcohol consumption, and 18 percent reported other substance use.

At the 48-week mark, the intervention had no apparent effect on HIV treatment success. Eighty-six percent of all participants had a fully suppressed viral load. The average time from the beginning of ARV treatment to viral suppression was 63 days. These rates did not differ between the two study groups.

By comparison, among those seen at these four clinics a decade prior, just 60 percent had a fully

suppressed viral load one year after first receiving ARVs.

The researchers theorize that the overall high degree of treatment success is a reflection of the recent evolution in how clinics provide care and treatment for the HIV population. In this era of universal HIV treatment, clinics increasingly stress the importance of treating the virus as soon as possible after diagnosis and strive to keep patients engaged in the medical system and adherent to their ARV regimens. Additionally, the recent advent of highly potent integrase inhibitors may have played a role in the improved treatment outcomes compared with those seen during the aughts.

To read a press release about the study, [click here](#).

To read the conference abstract, [click here](#).

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