Post-Incarceration, People With HIV Have High Risk of Death

That’s according to an analysis of HIV-positive people released from jail or prison in Connecticut.

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During the first several years following release from incarceration, people with HIV have a high rate of death compared with the general population, MD Magazine reports.

Publishing their findings in The Lancet HIV, researchers identified 1,350 people with HIV who were released after 24 hours or more of incarceration in Connecticut between 2007 and 2014 and who had a median age of 45 years old. During a median follow-up period of 5.2 years, 184 (14 percent) of them died.

This translated to a death rate of 2,868 deaths per 100,000 cumulative years of follow-up. After adjusting the data to account for differences in age, race and sex, the researchers found that post-incarceration, the HIV-positive cohort had a death rate 6.97-fold greater than that of the general U.S. population and 8.47-fold greater than that of the general Connecticut population.

Among the 170 individuals for whom a primary cause of death was reported, the cause was HIV-related for 78 people (46 percent), drug overdose for 26 people (15 percent), liver disease for 17 people (10 percent), cardiovascular disease for 16 people (9 percent) and accidental injury or suicide for 13 people (8 percent).

The adjusted data set indicated that being Black, compared with being white, was associated with a 48 percent reduced risk of death, while having health insurance compared with being uninsured, being re-incarcerated at least once for 365 days or longer compared with no such re-incarceration, and receiving antiretroviral (ARV) treatment during a high proportion of re-incarcerations compared with less ARV coverage were associated with 91 percent, 59 percent and 92 percent reduced risk of death, respectively.

Factors associated with dying sooner included being 50 years old or older compared with being younger, having a CD4 count of 200 to 499 compared with having a higher CD4 count, having a high number of non-HIV health conditions compared with having a lower number, experiencing virologic failure on an ARV regimen compared with not doing so and having an unmonitored viral load compared with having a monitored one.

“To reduce mortality after release from incarceration in people with HIV, resources are needed to identify and treat HIV, in addition to medical comorbidities, psychiatric disorders, and substance use disorders, during and following incarceration,” the study authors concluded. “Policies that reduce incarceration and support integrated systems of care between prisons and communities could have a substantial effect on the survival of people with HIV.”

To read the study abstract, click here.

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