# Same-Day HIV Treatment Plus Navigation Leads to Faster Viral Suppression

People who started treatment on the same day as their HIV diagnosis achieved an undetectable viral load sooner.

July 1, 2021 By Heather Boerner

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It's not a race, but wouldn't it be nice to experience an undetectable viral load one month into your HIV diagnosis instead of at three months? According to a study published in the journal AIDS, that's what happened when people walked out of their diagnosis appointment at one of New York City's sexual health clinics with a 30-day supply of HIV medications and the support of navigators who made sure they made it to their first regular HIV appointment.

The study adds to mounting evidence that when people leave their HIV diagnosis appointment with medication, they achieve an undetectable viral load sooner—and with it the associated long life and protection against transmitting the virus to others, known as Undetectable Equals Untransmittable, or U=U.

Following the lead of San Francisco's same-day antiretroviral therapy (ART) program, the JumpstART program ran from 2016 to 2019 at the New York City Department of Health and Mental Hygiene's (NYDOHMH) eight sexual health clinics. The program provided free or low-cost HIV treatment, HIV prevention services, sexually transmitted infection (STI) testing and treatment and pregnancy testing, along with navigation services, case management, adherence counseling, partner testing, connection to external HIV providers and follow-up care.

Between November 2016 and December 2018, a total of 363 people tested positive for HIV—36 previously diagnosed by a private provider who served as a control group and the rest diagnosed and treated using the JumpstART program. More than 1 in 10 (11%) were diagnosed with acute HIV, meaning the acquisition was recent, and 12% were diagnosed likely after years of living with the virus and had CD4 counts of 200 to 500.

All of the 230 JumpstART participants walked out of their first appointment with a one-month antiretroviral (ARV) starter kit. Two thirds successfully enrolled in HIV care outside the clinic and didn't return to the clinic, but one third weren't linked to external care and returned for at least one more month of ARV starter packs. What's more, similar proportions of people in each group

(65%) had a stable HIV provider after 30 days.

The good news is that by the end of the study period in 2019, 92% of all people diagnosed with HIV achieved an undetectable viral load—94% in the JumpstART group and 86% in the non-JumpstART group. But viral suppression occurred faster for people in the JumpstART group. One participant in the JumpstART group even reached an undetectable viral load just three days after receiving medications, compared with 24 days among the earliest to reach an undetectable level in the control group.

For most participants in both arms, it took longer than that, though. By three months post-diagnosis, 85% of JumpstART participants had achieved an undetectable viral load, compared with just 45% of those outside the program. Obviously, these findings depended on how quickly participants were able to get a regular doctor's appointment. Those who didn't start care at a regular HIV clinic within 30 days—presumably the 30% of JumpstART participants who returned for more starter packs as well as some in the non-JumpstART group—didn't reach viral suppression as quickly.

In the end, even when the researchers controlled for viral load at diagnosis (excluding the people with acute infection, whose viral loads would be much higher), people in the JumpstART program were three times more likely to achieve an undetectable viral load during the first three months.

"When newly diagnosed individuals have to be referred elsewhere to start ART, they are often faced with multiple disjointed steps and a complex system that can delay time to viral suppression, or effectively impede it altogether," wrote Preeti Pathela, DrPH, of NYDOHMH and colleagues.

Click here to read the study abstract.

Click here for more news about U=U and news about timely engagement in stable HIV care.

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