

Intensive Care Coordination By A Community Health Worker Improved HIV Viral Load Suppression In Young Men Who Have Sex With Men

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Introduction

- Persons living with HIV, particularly young men who have sex with men (YMSM), face numerous challenges to engaging in routine HIV care and achieving HIV viral load suppression (VLS).¹⁻³
- Rutgers Infectious Disease Practice hired a Community Health Worker (CHW) to address the disparities in HIV infection rates, substance abuse and mental health issues experienced by YMSM's in our practice.
- We assessed the impact of pilot intensive care coordination by a peer (CHW) on VLS for YMSM in an urban population of color.

Methods

- This was a retrospective chart review of patients seen at IDP from June to August 2019
- Protocol was approved by the IRB
- Data abstracted included:
 - Age, race, presence of mental health or substance use disorder, health insurance
 - Laboratory results collected included HIV Viral Load (VL) and CD4 lymphocyte count
 - Retention in care

Activities

- Frequent telephone contacts by CHW
- Home visits
- Individual meetings to address barriers
- Emotional support

Results N(%)

Summary of the study population, June – August 2019, N=23

Mean age	28
Black	20 (83%)
Hispanic	4 (16%)
Mental Health Diagnosis	14 (61%)
Substance use Disorder	7 (30%)
Lapse in Health Insurance	8 (33%)
< 1 Medical visit last 12 months	8 (33%)
Baseline VLS <200	3 (13%)
Achieved VLS <200 copies/ml at 3 months	7 (32%)

- Our CHW was able to improve HIV VLS from 13% to 32% in a short period of time
- Retention in care was improved and 13 (56%) patients had at least one appointment in the last six months

Lessons Learned

Intensive targeted care coordination by a CHW can improve HIV VLS in YMSM. In our experience, exploration of barriers and emotional support offered proved to be key aspects to better engage YMSM in HIV care and treatment.

Limitations

- This was a retrospective study with possible unrecognized confounders
- The study was limited by the small number of patients

Conclusions

- Intensive care coordination by a CHW can improve HIV VLS in YMSM.
- Exploration of barriers and emotional support offered proved may be key aspects to better engage YMSM in HIV treatment.
- Retention in care and sustained VLS may be improved by addressing health disparities in this population and developing targeted interventions that would be implemented by CHW as well as the Medical Case Management team.

References

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