Prevention for HIV-infected Persons in HPTN 065: Room for Improvement

W M EI-Sadr¹, A Kurth², J Farrior², K Buchacez³, B Hanscom³, L McKinstry³, R Elliot⁴, V Patel⁴, D Donnell⁵, B Branson⁶ for the HPTN 065 Study


CONCLUSIONS

- Few data are available on the perspectives of HIV-infected patients about the effect and use of antiretroviral therapy (ART) prevention.
- As part of the Prevention for Positive component of HPTN 065, we surveyed a sample of HIV-infected patients in care to assess their knowledge and attitudes about ART use for treatment and prevention, and its influence on sexual risk behaviors.

METHODS

- We recruited patients at 10 HIV care sites (Bronx 4, DC 6) that participated in the HPTN 065 study. Care sites included hospital-based HIV clinics, private physician practices, and community-based organization clinics.
- To be eligible, patients were required to be established in care at a participating HIV care site and must have attended one or more care visits in the seven months prior to screening.
- Patients used a computer tablet to complete a survey at baseline and during a 12 month follow-up visit, from December 2013–December 2014.
- Data from the tablets were locally stored on a server and then uploaded on a regular basis to the site to the data center. Site staff were unable to view patient responses.
- Data from the 12 month follow-up surveys were included in this summary.

RESULTS

- 725 participants completed the 12 month follow-up survey. Key patient demographic characteristics are noted in Table 1.

TABLE 1. Participant Characteristics (N=725)

| Median Age (range) | Gender | Black | Hispanic/Latino | White | Other | ART
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>52 years (16, 77)</td>
<td>Male</td>
<td>449/725 (62%)</td>
<td>140/725 (19%)</td>
<td>307/725 (42%)</td>
<td>39/725 (6%)</td>
<td></td>
</tr>
</tbody>
</table>

ART Use for Prevention

- Of Participants on ART (N=691) was provided with this statement: "Studies have shown that patients taking HIV medications early have lower viral load and are much less likely to transmit HIV to their partners."
- They were then asked: “What does this mean to you personally?” Responses are noted in Figure 1. Fifty-two percent reported that they would have initiated ART sooner.

FIGURE 1.

- Participants were asked whether they agree or disagree with the following statement: “HIV medicines lower the chance of passing HIV to others during sex without a condom.” Participants responded that they:
  - agree/strongly agree (62%)
  - disagree/strongly disagree (35%)
  - missing/do not know/refuse to answer (3%)

- Participants were asked whether they agree or disagree with the following statement: “HIV medicines lower the chance of passing HIV to others when injecting drugs and sharing needles.” Participants responded that they:
  - agree/strongly agree (48%)
  - disagree/strongly disagree (41%)

- Participants were asked whether they agree or disagree with the following statement: “HIV medicines lower the chance of passing HIV to others when injecting drugs and sharing needles.” Participants responded that they:
  - agree/strongly agree (28%)
  - disagree/strongly disagree (57%)

- Participants were asked whether they agree or disagree with the following statement: “HIV medicines lower the chance of passing HIV to others when injecting drugs and sharing needles.” Participants responded that they:
  - agree/strongly agree (38%)
  - disagree/strongly disagree (57%)

- Participants were asked whether they agree or disagree with the following statement: “HIV medicines lower the chance of passing HIV to others during sex without a condom.” Participants responded that they:
  - agree/strongly agree (62%)
  - disagree/strongly disagree (35%)

Provider Counseling

- Fewer than half of the 614 (85%) participants who saw an HIV provider within the last 3 months reported discussing the following topics with a member of the health care team:
  - sex partners (48%)
  - condom use (48%)

ACKNOWLEDGEMENTS

- We sincerely thank the participating sites and the following investigators for their support: Dr. Theo Hodge (Capital Medical Associates Clinic), Angela Wood (Family Medical and Counseling Service), Dr. Princy Kumar (GeorgeTown University), Dr. Gary Simon (George Washington University), Dr. Fred Gordin (Washington DC VA Medical Center), Dr. Rick Elion (Whitman-Walker Health), Dr. Jason Leider (Jacobi Medical Center), Dr. Barry Zingman (Montefiore Medical Center), Dr. Viraj Patel (Montefiore Medical Center), and Dr. Sheldon Brown (JUP NY VA Medical Center) for their support.

- The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institute of Allergy and Infectious Diseases, the National Institutes of Health, or the Centers for Disease Control and Prevention.

- HPTN 065 (TLC-Plus) Study is supported by NIAID, NIMH, and NIDA (Cooperative Agreement U01AI068510; U01AI068517) and the National Center for HIVAIDS, Viral Hepatitis, STD, and TB Prevention, US Centers for Disease Control and Prevention.

- We found no evidence of any significant increase in unsafe sexual practices since starting HIV medicines among patients on ART. Only a very small percentage of participants on ART stated that they had more sex partners or used condoms less often since starting ART.
- Overall, participants favored using ART for their own health. Participants had more limited knowledge about the effect of ART and low viral load on the risk of HIV transmission to partners.
- Most participants reported the health care team had not discussed risks for HIV transmission during their most recent visit.
- HIV providers need to better utilize patient encounters to answer ongoing HIV risk behaviors and to discuss the importance of ART and viral suppression for the prevention of HIV transmission.