Assessing viral suppression amongst HIV patients accessing care in six cities using US HIV surveillance data for the TLC-Plus (HPTN 065) study

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BACKGROUND
Recent successes in clinical trials for HIV prevention have demonstrated the effectiveness of antiretroviral therapy both as treatment for an HIV-infected person and as prevention for an HIV-uninfected sexual partner.
A significant challenge for achieving real world benefits from a strategy of antiretrovirals as treatment and prevention is achieving consistent adherence to daily medication.

To test a novel strategy of financial incentives for maintaining viral suppression, the HPTN 065 study is utilizing HIV surveillance systems to monitor change in viral load suppression in communities in the US most affected by HIV.

HIV SURVEILLANCE SYSTEMS
NATIONAL SURVEILLANCE
All states have implemented name-based reporting of new HIV diagnoses to local Departments of Health since 2008.

MONITORING HIV CARE THROUGH LABORATORY RESULTS
Many Health jurisdictions require reporting for all CD4 counts and viral load tests directly from the commercial testing laboratories.
- Both New York and Washington DC have largely electronic reporting of laboratory results.
- Results are linked to known HIV cases in the jurisdiction by name and electronicadioButton.
- State and City jurisdictions exchange and reconcile data.
- Quality and completeness assessed and maintained through:
  - Monitoring laboratory volume
  - Field cases worker investigation
  - Periodic audits of medical records

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