# Retained in Care but Not Virally Suppressed in Los Angeles County (LAC) – Where to Intervene?

Angela Castillo, MA; Janet Cuanas, MPP; Sona Oksuzyan, PhD, MD, MPH; Wendy Garland, MPH Los Angeles County Department of Public Health, Division of HIV and STD Programs

#### Introduction

- In 2018, Los Angeles County (LAC) reported 50,803 persons living with diagnosed HIV infection (PLWH) representing 4% of all US HIV cases and 40% of all California HIV cases.
- Among PLWH in LAC in 2018, 69% were engaged in care, 52% were retained in care (RiC) and 61% were virally suppressed.
- The "Treat" pillar of the National "Ending the HIV Epidemic" initiative identifies improvements in RiC and viral suppression as critical to reduce new HIV infections 90% by 2030 in 50 communities most impacted by HIV, that include LAC.
- Approximately 40% of PLWH in LAC were Ryan White Program (RWP) clients in 2018.
- RWP clients RiC with unsuppressed viral load (UVL) represent an accessible population and an opportunity to direct enhanced clinical and support services to promote viral load suppression.
- We present an analysis exploring socio-demographic characteristics associated with UVL among RWP clients RiC who accessed Medical Outpatient or Medical Case Management (MO/MCM).

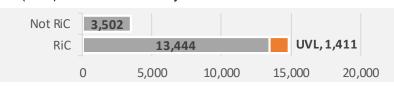
## Methods

- Data Sources: LAC RWP Reporting System and HIV Surveillance
- Study Population: RWP clients who used MO/MCC services from March 1, 2018-February 28, 2019 were selected because the services were the most utilized, clinic-based services in LAC with similar opportunities for intervention.
- Main Outcome: UVL: last viral load test in past 12m > 200 copies/mL. Clients with no reported test are categorized as UVL.
- Independent Variables: Gender, race, age, income, US born, language, insurance, housing, incarceration history, and mode of HIV transmission.
- Data Analysis:
  - Explore factors associated with UVL among RiC clients in bivariate analysis
  - Use multivariate logistic regression, adjusted for potential confounders and factors associated with UVL in the bivariate

- analysis.
- Present estimated odds ratios (OR) and 95% confidence intervals (CI).

### Results

- A total of 18,357 clients accessed MO/MCC, of which 14,855 (80%) were RiC.
- Majority of clients were Black (34%) or Latinx (47%); male (85%); US-born (69%); living at or below federal poverty level (79%). 34% were recently incarcerated and 20% homeless.



Among RiC clients, 1,411 (9%) had UVL.

Characteristic	Unsuppressed Viral Load (UVL)	aOR (95% CI)
	N (%)	
Gender		
Male	1,194 (9.5%)	Ref
Female	177 (9.1%)	0.9 (0.8-1.1)
Transgender	40 (13.8%)	1.1 (0.7-1.5)
Race		
White	240 (8.1%)	Ref
Black	477 (14.2%)	1.6 (1.4-1.9)
Latino	657 (8.4%)	1.5 (1.2-1.8)
Other/Unknown	37 (5.4%)	1.0 (0.7-1.4)
Age		
24 years and younger	64 (13.3%)	1.2 (0.9-1.6)
25-39 years old	500 (11.5%)	Ref
40-59 years old	735 (9.2%)	0.9 (0.8-1.1)
60 years and older	112 (5.5%)	0.5 (0.4-0.7)

# Results (cont.)

Characteristic	Unsuppressed Viral Load (UVL)	aOR (95% CI)
	N (%)	
US Born		
Yes	956 (12.2%)	Ref
No	438 (6.4%)	0.6 (0.5-0.7)
Income		
At or Below FPL	1,116 (11.5%)	1.6 (1.4-1.9)
Above 100% FPL	295 (5.8%)	Ref
Housing		
Permanent	998 (7.7%)	Ref
Homeless	275 (23.1%)	2.2 (1.9-2.6)
Institutional	94 (22.4%)	1.9 (1.5-2.5)
History of Incarceration		
No	927 (7.5%)	Ref
Yes	467 (20.0%)	2.0 (1.7-2.4)
<ul> <li>Increased LIV/I</li> </ul>	Lodde wore observed among Pla	

- Increased UVL odds were observed among Black or Latino; homeless; living ≤FPL; and recently incarcerated clients.
- Clients aged ≥60 and not US-born had decreased UVL odds.

#### Conclusion

- RiC clients who are not virally suppressed represent an easily accessible population in touch with the medical care system.
- These RWP clients should be a priority population for public health interventions, advancing LAC's progress towards achieving Ending the HIV Epidemic national strategy goals.
- In LAC, UVL among RWP clients RiC was low, but distinct disparities were detected among racial/ethnic minorities, low SES, homeless or recently incarcerated clients compared to their counterparts.
- More targeted and individualized interventions are essential for these groups of RWP clients with UVL.