VEPE529 ksalters@cfenet.ubc.ca

Complex health challenges facing HIV-positive individuals with a history of incarceration in British Columbia, Canada

Q IAS 2013

Kate A Salters¹, Zi-Shan Cui¹, Hasina Samji¹, Will Small^{1,2}, Yalin Chen¹, Julio SG Montaner^{1,3}, Robert S Hogg^{1,2}

1- BC Centre for Excellence in HIV/AIDS, Vancouver BC; 2- Faculty of Health Sciences, Simon Fraser University,

Burnaby BC; 3- Faculty of Medicine, University of British Columbia, Vancouver BC

Background

- Research suggests HIV-positive individuals with a history of incarceration may face unique barriers in obtaining HIVrelated treatment and care, even in a context of universal health care.
- We sought to examine the prevalence and correlates of incarceration among a cohort of harder-to-reach people living with HIV/AIDS (PHA) in British Columbia (BC) as well as independent predictors of viral suppression within this specific population.

Methods

- The Longitudinal Investigation into Supportive and Ancillary health services (LISA) cohort is a prospective study examining treatment and care experiences of harder-to-reach PHA in BC.
- Interviewer-administered surveys collected information regarding housing, drug use, sexual behaviour and other relevant socio-demographic factors.
- Clinical variables, such as CD4 cell count and viral load, are obtained through linkages with the Drug Treatment Program at the BC Centre for Excellence in HIV/AIDS.
- Multivariable analyses identified factors associated with selfreported history of incarceration.
- Viral suppression was defined as having ≥2 sequential pVL of less than 50 copies per mL

Results

Table 1: Bivariate comparison of those with and without a history of incarceration

Variable		No history of incarceration (n=438; 48%)	History of incarceration (n=476; 52%)	p-value
Gender	Male Female MtF	321 (49%) 114 (46%) 3 (33%)	337 (51%) 133 (54%) 6 (67%)	0.571
Ethnicity	Caucasian Aboriginal Other	301 (51%) 92 (37%) 45 (63%)	294 (49%) 156 (63%) 26 (37%)	<0.001
Supportive Services, frequency of use	Daily Weekly Monthly ~3 months	91 (27%) 125 (44%) 56 (67%) 30 (81%)	247 (73%) 159 (56%) 28 (33%) 7 (19%)	<0.001
ART re-fill, frequency	Daily <daily other<br="">Bimonthly</daily>	49 (20%) 375 (59%) 10 (59%)	197 (80%) 262 (41%) 7 (41%)	<0.001
Attacked or assaulted, previous 6 months	No Yes	140 (62%) 295 (43%)	87 (38%) 388 (57%)	<0.001
Adherence, previous 12 months	≥95% <95%	240 (55%) 127 (38%)	193 (45%) 209 (62%)	<0.001
Achieved viral suppression, ever	No Yes	7 (23%) 431 (49%)	23 (77%) 452 (51%)	0.006
Viral suppression, time of interview	No Yes	133 (38%) 291 (56%)	218 (62%) 232 (44%)	<0.001
Quality of life- medical worries (median, IQR)		67 (50-83)	58 (42-67)	<0.001
Nadir CD4, (median, IQR)		140 (50-210)	90 (30-150)	<0.001
Alive, time of interview	No Yes	18 (23%) 420 (50%)	59 (77%) 417 (50%)	<0.001

Figure 1: History of incarceration and viral suppression

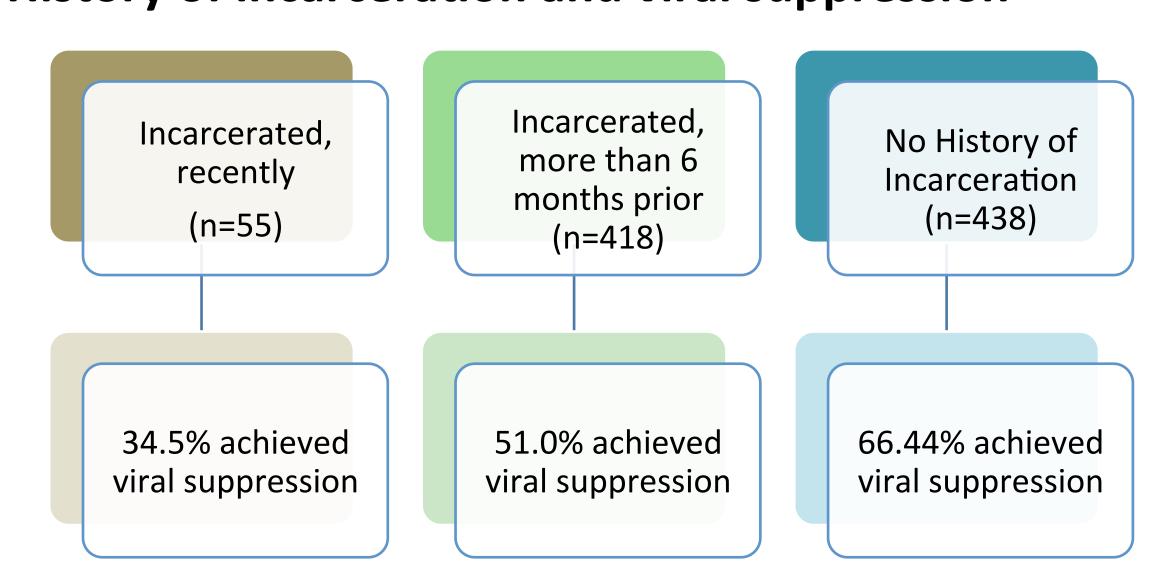


Table 2: Multivariable model of factors independently associated with history of incarceration

Variable	Adjusted Odds Ratio (95% Confidence Interval)	
Supportive services, frequency of use		
daily	1.000	
weekly	0.669 (0.450-0.996)	
monthly	0.314 (0.176-0.559)	
~3 months	0.195 (0.073-0.521)	
Physician satisfaction		
very dissatisfied	1.00	
dissatisfied	1.985 (1.052-3.745)	
neutra	/	
satisfied	,	
very satisfied	3.217 (1.491-6.941)	
ART prescription re-fill		
< daily or other	1.000	
daily	1.462 (1.609-3.768)	
bi-monthly	0.379 (0.087-1.641)	
Attacked in the previous 3 months (vs no)	1.880 (1.234-2.864)	
Viral suppression at interview (vs no)	0.623 (0.436-0.891)	
Never achieved viral suppression (vs no)	2.835 (0.857-9.373)	
Mortality (vs alive)	1.749 (0.914-3.344)	
Quality of life- medical worries (vs lower)	0.981 (0.973-0.989)	
CD4 Nadir (vs lower)	0.997 (0.995-0.999)	

Table 3: Factors associated with viral suppression among those ever incarcerated

Variable	Adjusted Odds Ratio (95% Confidence Interval)	
Age	1.029 (1.002-1.057)	
Gender		
male	1.000	
female	0.638 (0.408-0.998)	
MtF	0.562 (0.096-3.283)	
Emergency room use within 3 months (vs no)	0.861 (0.549-1.350)	
Individual health assessment		
better	1.000	
same	1.282 (0.784-2.096)	
worse	0.642 (0.389-1.059)	
On ART (vs not)	0.232 (0.138-0.388)	
Adherence <95%	0.415 (0.255-0.674)	
CD4 cell count at interview	1.000 (0.999-1.001)	

Discussion

Experiences of incarceration among PHA are associated with poorer clinical outcomes including viral non-suppression, lower CD4 cell count, and higher mortality. PHA who have a history of incarceration may also be more likely to have experiences of violence and and more medical concerns. PHA who have been incarcerated may require more frequent care that responds to their need for stability after periods of incarceration including daily medication support and support from community organizations.

Acknowledgements

The authors thank the LISA participants, nurses, physicians, pharmacists and volunteers who continue to support them. We also thank Cameron Collins, Benita Yip, Nada Gataric and Kelly Hsu for their support. The authors also want to thank Colin Davey for his help with poster development and knowledge translation for LISA.











