Racial Disparities in Unprotected Sex, HIV Infections, and Engagement in Care, Viral Load Suppression among Individuals living with HIV in Hyperendemic MSM Community of Washington DC

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Background

- After three decades of the HIV/AIDS epidemic in the United States, racial disparities is an ongoing observation in sexual behavior changes, the engagement in care and treatment among people living with HIV/AIDS.
- The purpose of this study is to examine the disparities between White and Black men who have sex with men (MSM) in infections, unprotected sex, engagement in care, and viral load suppression among individuals living with HIV in hyperendemic MSM community of Washington DC.

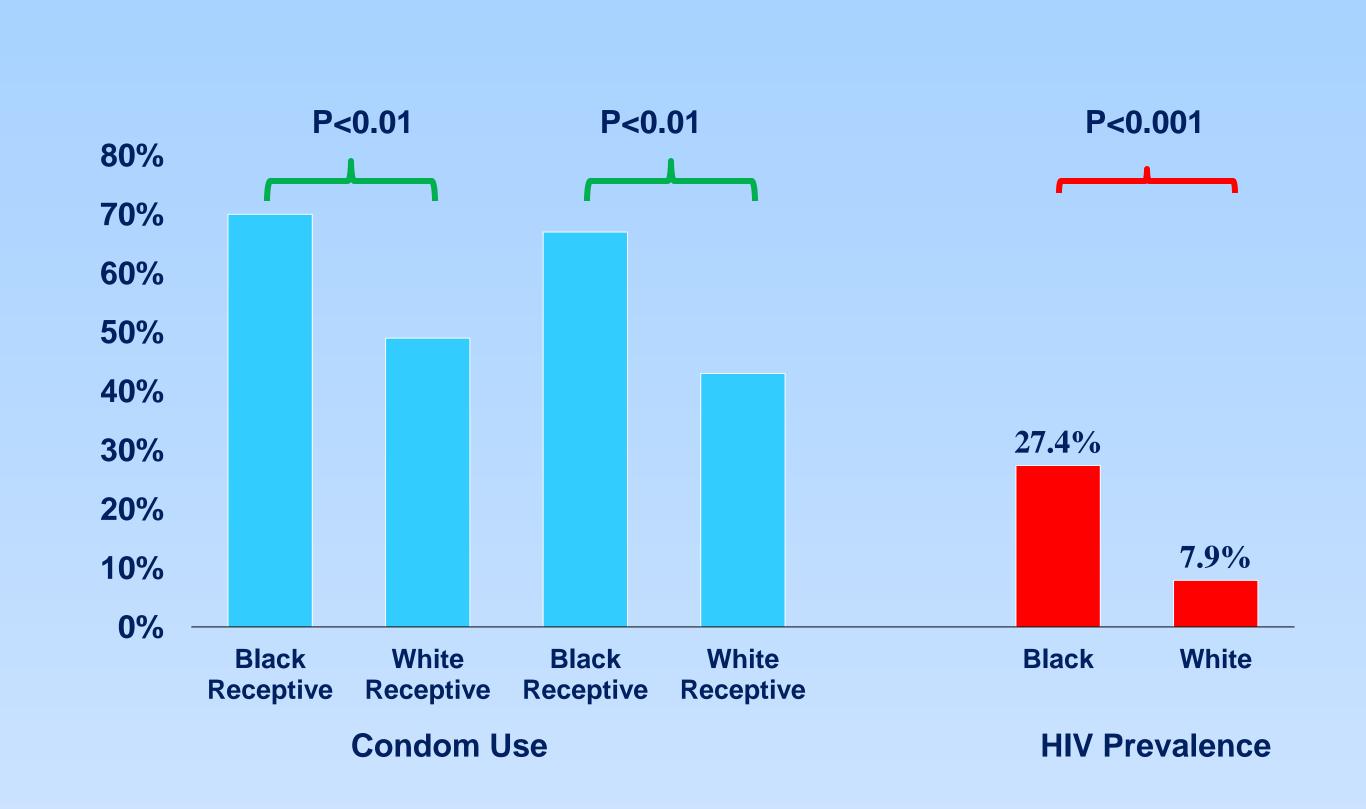
Methods

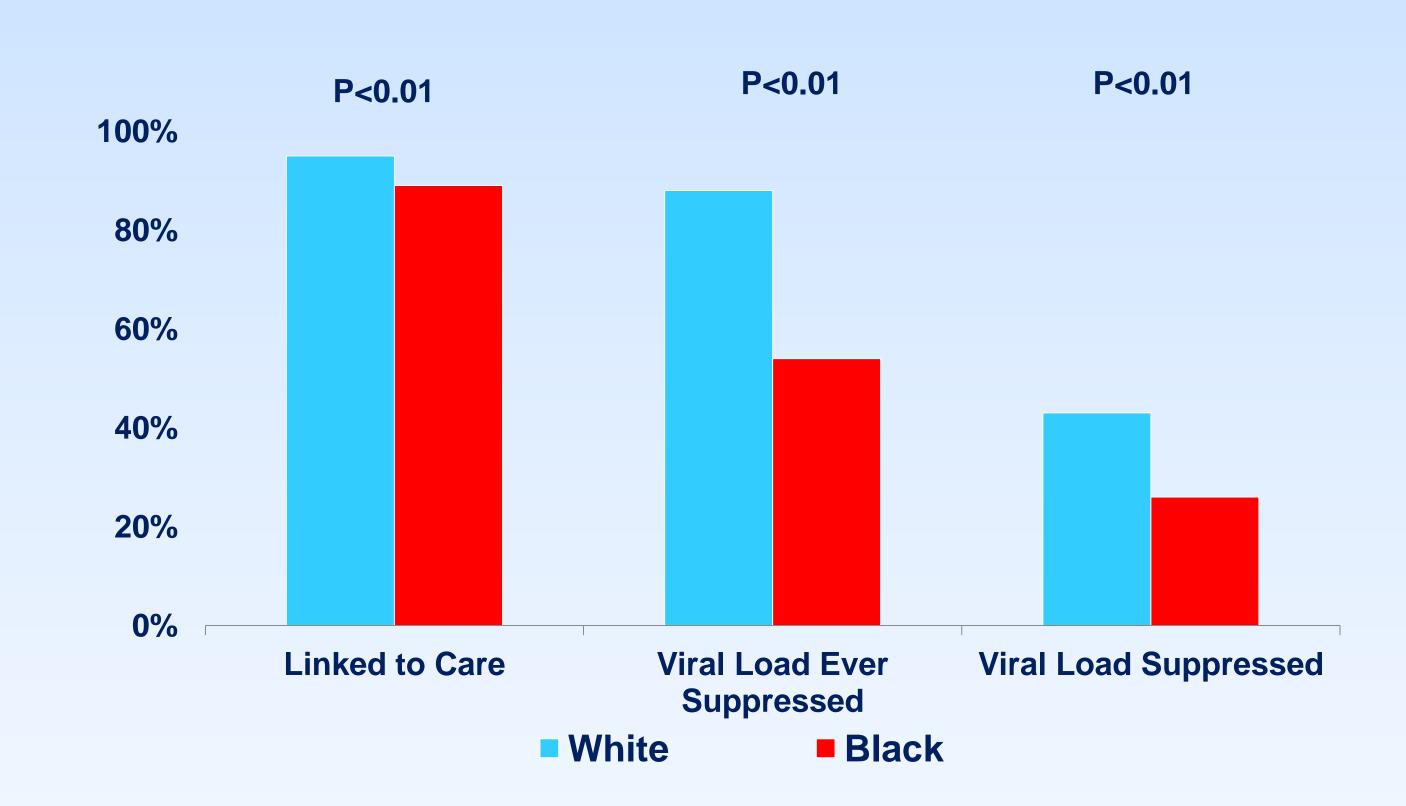
- The HIV-related the National HIV Behavioral Surveillance Survey (NHBS) among MSM in 2008 and HIV diagnosed cases as of the end of 2010 were analyzed.
- Linkage to care and viral load suppression (<200 copies/mL) were assessed.

Results

- Among 500 NHBS-MSM participants in Washington DC, Black (N=146) use condoms at higher rates (receptive: 70%; insertive: 67%) than white (N=229) (receptive: 49%; insertive: 43%) (both rates, P<0.01, Black versus White) (Fig 1).
- HIV prevalence rate is significant higher among Black MSM (27.4%) than that among White MSM (7.9%) (P<0.01) (Fig 1).

Results (continued)





- As of December 31, 2010, there were 5,853 adults and adolescents diagnosed and reported HIV/AIDS cases in DC among MSM with 3,299 of Black and 1,935 of White.
- Of the 1,095 HIV/AIDS newly diagnosed cases among Black MSM diagnosed and reported from 2005 to 2009, 88.7% of them were linked to care, and 54.1% had ever had viral load suppression, and 26.4.0% maintained viral load suppression as of the end of 2010; these rates are statistically significant

Results (continued)

lower than that among the 567 White MSM HIV cases diagnosed and reported from 2005 to 2009, of them, 95.1% were linked to care, and 88.7% had ever has viral load suppression and maintained viral load suppressed (43.0%) (all rates, Black versus White, P<0.01) (Fig 2).

Conclusion

- Higher rate of condom use among Black MSM versus White MSM indicates success of targeted prevention intervention, however, the rate of condom use may be not high enough to curtain the epidemic and address racial gaps because of the "sexual ecology", the dramatic racial disparities of HIV prevalence and engagement in care and treatment within the hyperendemic MSM community in Washington D.C.
- The findings underscore the continued needs to intensify the effective combination intervention measures, including continued condom promotion and prevention, as well as innovative approaches to expand HIV testing and evidenced-based prevention, improve engagement in care and adherent to antiretroviral therapy; all components needed to help addressing disparities particularly targeting Black MSM.

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