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Impact of the COVID-19 Pandemic on Time to HIV Viral Suppression in the U.S. Deep South

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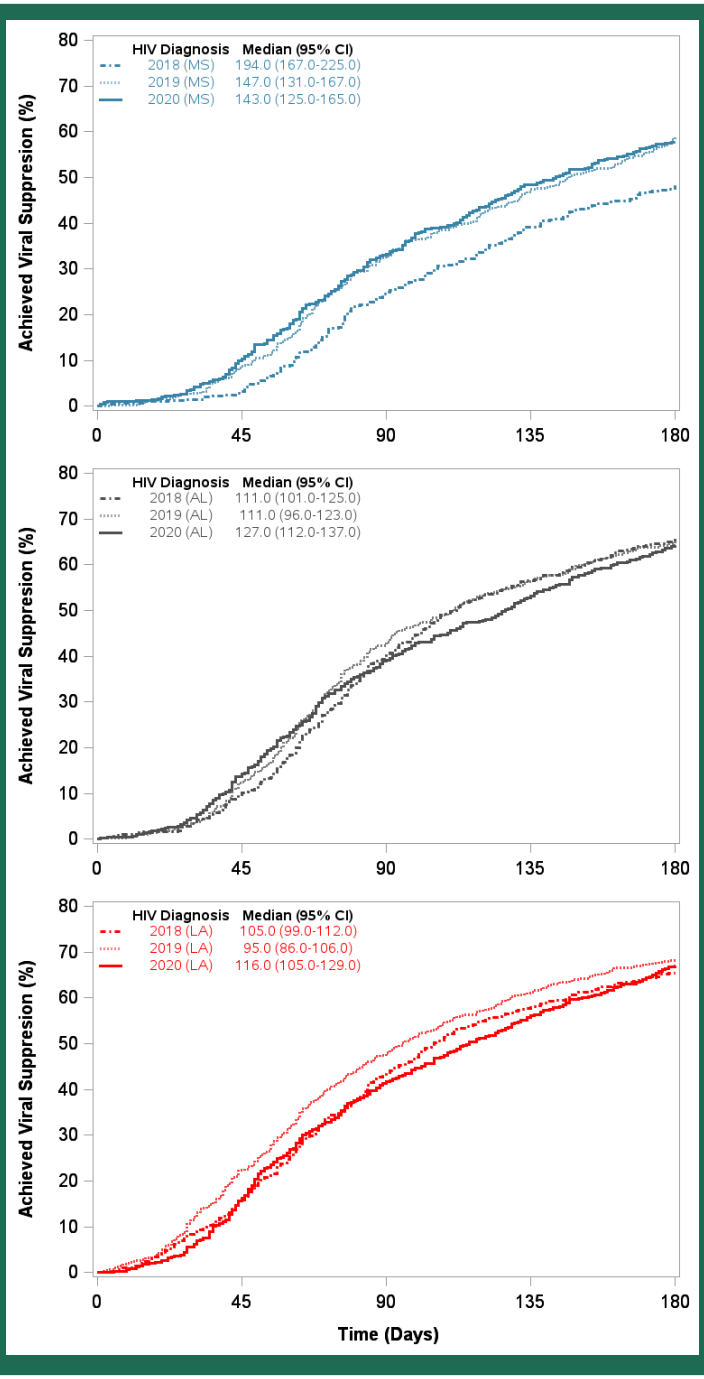
Background: Between 2012 and 2018, states in the United States (US) Deep South, the epicenter of the US HIV epidemic, achieved year-over-year reductions in time to viral suppression (VS) following HIV diagnosis, critical to improving outcomes and reducing transmission. However, the COVID-19 pandemic disrupted HIV services and may have reduced previous gains.

Methods: We conducted a retrospective, population-based cohort study of all persons ≥ 13 years with newly diagnosed HIV from 2018-2020 in Alabama (AL), Louisiana (LA), and Mississippi (MS), using data collected from the Enhanced HIV/AIDS Reporting System (eHARS), a standardized HIV surveillance system maintained in each state. We used the Kaplan-Meier method to describe time in days to VS by year of diagnosis.

Results: In AL (N=570) and LA (N=703), median time to VS in 2020 increased 21 and 16 days, respectively, while MS (N=412) improved by 4 days compared to 2019, reversing prior trends in rates of improvement from 2018 (Figure 1). The proportion achieving VS at 180 days also decreased in 2020 compared with 2019 (AL: 64.1% vs 64.9%, MS: 57.7% vs 59.1%, LA: 66.9% vs 68.3%).



Conclusions

Our analysis demonstrates the complicating impact of the COVID-19 pandemic on trends in time to VS in the U.S. South. Challenges in access due to concerns regarding acquiring COVID-19 infection, clinic and laboratory closures, and delays in reporting may all have contributed to these findings. Additional analyses evaluating persistence and geospatial composition of these trends can inform ongoing interventions to end the epidemic in the Deep South.

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https://github.com/JRBassler/AIDS-2022-Conference/blob/main/TablesFigures.md

More tables, figures, and results can be found here