HIV care continuum in Oregon

What is the HIV care continuum?

Reducing the amount of HIV in the body helps people infected with HIV stay healthier and reduces the chances of infecting others. People who do not know they have HIV could spread the virus, so it is important to get tested regularly and into care as soon as possible if one has HIV. Preventing HIV requires early diagnosis, getting linked with and staying in medical care, and taking antiretroviral therapy (ART) continuously to suppress viral load. Viral suppression is achieved when the HIV viral load test result is 200 copies/mL or less. This level of HIV in the blood minimizes the risk of transmission and keeps down the amount of virus in the body.

The HIV care continuum describes a region's success in achieving key prevention milestones from infection to viral suppression. The HIV care continuum is used extensively at the Centers for Disease Control and Prevention (CDC) and in the National HIV/AIDS Strategy.(1, 2) The Oregon HIV Program uses information collected about people with HIV infection to create an HIV care continuum specifically for Oregon.

HIV care continuum definitions

- **Infected: persons diagnosed with HIV and those unaware of being infected with HIV.**
- **Diagnosed: persons diagnosed and confirmed by the Oregon HIV Program as cases**
- **Linked to care: persons with a lab result used to monitor HIV collected with 90 days of first diagnosis**
- **In care: persons with an HIV-related lab result collected in 2014**
- **On treatment: persons prescribed ART**
- **Suppressed: person whose last reported HIV viral load in 2014 was ≤ 200 copies/mL**

Oregon HIV care continuum, 2014*

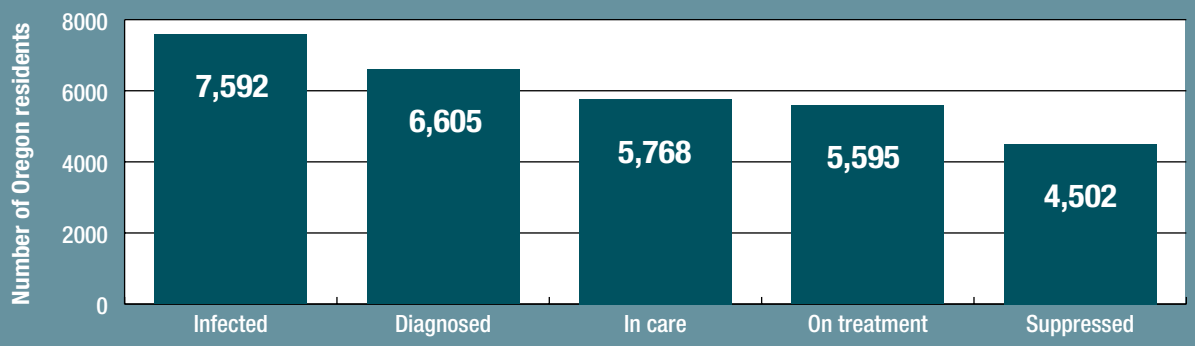

Figure 1

* The difference between "Infected" and "Diagnosed" is an estimate from the CDC (13% of infected are not diagnosed) and the "On treatment" estimate is based on Medical Monitoring Project data in Oregon, which observed 97% of people "In care" were prescribed ART.

The Oregon HIV care continuum gives us a picture of the HIV epidemic in Oregon at the end of 2014 (Fig1).

- An estimated 6,605 residents of Oregon had diagnosed HIV infection.
- Approximately 987 Oregonians were infected with HIV but remained undiagnosed.(3)
- 85% (1,023/1,202) of new diagnoses in Oregon (2010–2014) were linked to care in 90 days, and 94% were linked in a year (1,126/1,202) (not shown in Fig. 1).
- Approximately 837 residents diagnosed with HIV were not in medical care in 2014.
- 97% (5,595/5,768) of those in medical care with HIV were on ART.(4)
- Viral load suppression was achieved among more than 68% (4,502/6,605) of those living with diagnosed HIV, and may be as high as 79% if we take into account people who left Oregon and whose viral loads did not get reported to the HIV Program.

Viral suppression

In 2013, the CDC estimated that 30% of all people infected with HIV in the U.S.A. were virally suppressed.(1) This estimate included people with undiagnosed HIV and did not control for migration. If suppression were calculated the same way for Oregon, the estimate of suppression would be 59% (4,502/7,592). The difference between the national and Oregon estimates may be due to Oregon having more complete viral load reporting, more up-to-date residence information, or better access to care.

Some groups in Oregon were less likely to be virally suppressed. American Indian/Alaska Natives and Black\African Americans were less likely to be virally suppressed than Whites (25% and 20% vs. 9% non-suppressed).(5) Men who have had sex with men who have injected drugs (MSM/IDU) were less likely to be virally suppressed than MSM (17% vs. 9%). Other groups took longer after diagnosis to become virally suppressed: 20–24 year olds, males reporting heterosexual risk (partner's risk unknown) and female's heterosexual risk (partner's risk unknown).

Summary

The continuum is one tool for assessing the state of HIV care and treatment. Oregon's continuum suggests that most people with diagnosed HIV in Oregon achieved viral suppression and appear to stay there. This coincides with gradual declines in new HIV infections from 285 cases in 2005 to 231 cases in 2014 and with an estimated increase in the percentage of people with HIV on treatment from 93% in 2009 to 97% in 2013.(4)

Oregon's viral suppression estimates substantially exceed comparable CDC estimates. This suggests a robust and largely successful network of HIV treatment in Oregon. It also suggests efforts to increase access to and use of medical care for HIV in Oregon might yield relatively smaller increases in the number of people virally suppressed than these efforts elsewhere in the United States where access and use of care might be lower. Conversely, almost 1,000 Oregonians already infected with HIV do not yet know it. Because they have yet to be diagnosed, this population cannot possibly be moved to the viral suppression category by treatment. This suggests that further reductions in the number of new cases might rest on expanded screening

References:

(1) Linkage to and Retention in HIV Medical Care, Centers for Disease Control and Prevention, www.cdc.gov/hiv/prevention/programs/pwp/linkage.html www.cdc.gov/hiv/pdf/dhap_continuum.pdf

(2) National HIV/AIDS Strategy Overview at AIDS.gov
www.aids.gov/federal-resources/national-hiv-aids-strategy/overview/
National HIV/AIDS Strategy for the United States: Updated to 2030, July 2015
www.aids.gov/federal-resources/national-hiv-aids-strategy/nhas-update.pdf

(3) Hall HI, et al. Prevalence of Diagnosed and Undiagnosed HIV Infection – United States, 2008–2012. Morbidity and Mortality Weekly Report. 2015 June 26; 64(24).
www.cdc.gov/mmwr/preview/mmwrhtml/mm6424a2.htm

(4) Medical Monitoring Project, 2009–2013 unpublished chart abstraction data.

(5) Capizzi J, Schafer S. Alternative Approach to State Tipping Point Estimate, Abstract #2234. Poster presented at the 2015 National HIV Prevention Conference, Atlanta, Georgia
www.cdc.gov/nhpc/pdf/nhpc_2015_abstractbook.pdf

Oregon Health Authority
PUBLIC HEALTH DIVISION

Epidemiologic resources:

Oregon Health Authority, HIV/AIDS epidemiology:
http://public.health.oregon.gov/DiseasesConditions/CommunicableDisease/DiseaseSurveillanceData/HIVData/Pages/index.aspx

Centers for Disease Control and Prevention:
www.cdc.gov/hiv

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