Results Continued

- Ending the HIV epidemic requires optimizing primary and secondary prevention.
- Missed opportunities for HIV prevention are common.
  - At our institution, of 721 new HIV diagnoses between 2006-2017:
    - 36% had at least one missed opportunity for HIV screening in the previous 12 months.
    - 42% had a missed opportunity for linkage to preventive services given a negative HIV test.  
- Sexually transmitted infections are reliable markers of increased risk for HIV.
- We investigated missed opportunities for HIV prevention amongst individuals testing positive for an STI at a large academic medical center.

Methods

- An electronic sexual health dashboard was used to identify positive gonorrhea, chlamydia, and RPR tests from January 1, 2019 to August 23, 2019 in patients >18 years old who were seen at our institution.
- Positive tests occurred in 58 inpatient and outpatient locations.
- 1384 positive STI patient encounters (PE) were identified, 1374 with positive gonorrhea, chlamydia, and RPR results.
- 36% had at least one missed opportunity for HIV screening in the previous 12 months.
- 42% had a missed opportunity for linkage to preventive services given a negative HIV test.  
- Odds ratios were calculated to determine the effect of gender on clinical outcomes.

Results

- 1384 positive STI patient encounters (PE) were identified, 1374 were manually reviewed, and 856 PE in 815 unique patients were included in our final data analysis.
- Positive tests occurred in 58 inpatient and outpatient locations.
  - The most common locations were the family planning clinic (27.0%), the three emergency departments (27.7%), and the Young Men’s Clinic (14.8%).
- Multi-site testing was rarely performed (7.5% of PE).
- Men were more likely to have multi-site testing than women (20.3% vs. 0.36%, OR 69.9, 95% CI 17.0-285.71).

Discussion

- Documentation of PrEP discussion was rare (4.7% of PE) compared with safe sex (44.6%) and condoms (49.8%).
- PrEP was discussed almost exclusively with men compared to women (17% vs. 1.1%, OR 18.7, 95% CI 7.9-44.0).

Conclusion

- Gender disparities in HIV prevention persist.
- Effective interventions to increase referral of women for comprehensive HIV prevention care will require addressing provider practices through education and training across diverse patient care locations and specialties.

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References