

Sustaining Viral Suppression

ART Adherence and Consistent Clinical Care

The Medical Monitoring Project (MMP)

- MMP is a surveillance activity funded by the Centers for Disease Control and Prevention and implemented by state and local health departments. It collects behavioral and medical data about people living with diagnosed HIV (PLWDH) in the United States.
- From 2015 to 2019, MMP interviewed 1,036 adults living with HIV in California, excluding San Francisco and Los Angeles County. Their responses reflect their experiences during the 12 months before their interview, unless otherwise noted. All data presented are weighted.

Sustained Viral Suppression

- Sustained viral suppression improves health outcomes and quality of life for PLWDH, and helps reduce the risk of transmitting HIV to HIV-negative partners.
- **High adherence to antiretroviral therapy (ART)** and **consistent HIV care** are key to sustaining viral suppression.
- Groups who may need higher levels of support to reach ART adherence and/or retention in care are highlighted in the table below.
- Reasons for missing ART doses and barriers to care are reported in the following page.

ART Adherence, Clinical Care, and Viral Suppression by Characteristics

Characteristics	100% ART Dose Adherence, Past 30 Days ¹ (%)	Retained in Care Past 12 Months ^{2,3} (%)	Retained in Care Past 24 Months ^{2,3} (%)	Sustained Viral Suppression ^{3,4} (%)
Total	59	79	58	61
Age (years)				
18-29	50	66	44	45
30-39	49	83	49	61
40-49	62	80	62	61
>=50	62	80	60	63
Gender				
Male	59	79	58	60
Female	60	83	64	68
Transgender ⁵	49	67	51	41
Race/Ethnicity				
Black /African American	53	75	56	60
Hispanic/Latinx	56	81	59	59
White	59	79	60	65
Other/Multiracial	60	80	51	57
Sexual behavior/orientation				
Men who have sex with men	54	79	57	63
Men who have sex with women	62	84	60	52
Women who have sex with men	61	82	66	71

All data are from the 12 months prior to the interview unless specified otherwise; ¹Self-reported 100% adherence in past 30 days; ²≥2 HIV medical visits at least 90 days apart within the year; ³As documented in the medical record; ⁴All viral loads in past 12 months undetectable or <200 copies/ml; ⁵Less than 30 individuals in category.

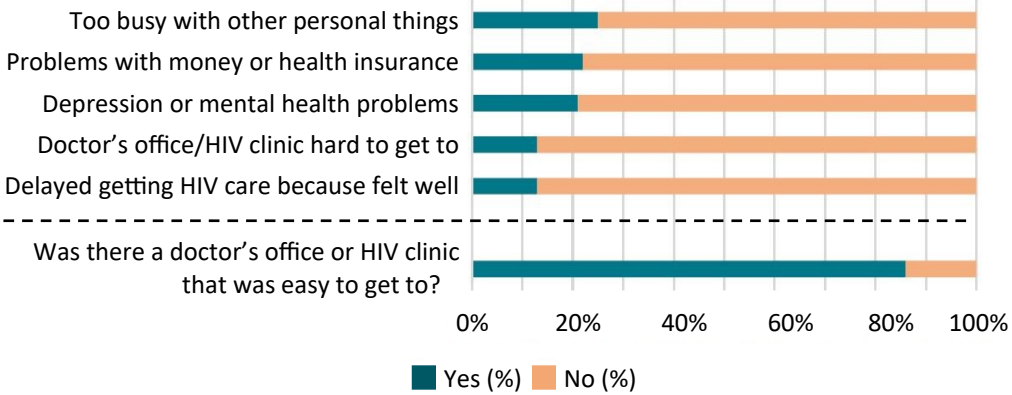
Seeing an HIV care provider at least 2 times each year for 2 years, with appointments at least 90 days apart, increased the odds of achieving sustained viral suppression by **250%**.

Having 100% ART adherence increased the odds of achieving sustained viral suppression by **110%**.

Adjusted Odds Ratio for Sustained Viral Suppression ¹ by Care and Adherence Measures			
	Adjusted OR	95% CI	P-value
100% ART Dose Adherence, ² Past 30 Days	2.1	1.5 - 2.9	<0.001
Retained in Care, ³ Past 12 Months	4.9	3.1 - 7.9	<0.001
Retained in Care, ³ Past 24 Months	3.5	2.5 - 5.0	<0.001

¹All viral loads in past 12 months undetectable or <200 copies/ml; ²Self-reported 100% adherence in past 30 days; ³≥2 HIV medical visits at least 90 days apart within the year as documented in the medical records; Logistic regression models were adjusted for age, gender, race/ethnicity, sexual orientation, education, employment status, and insurance; OR = Odds Ratio; 95% CI = 95% Confidence Interval.

Reported Barriers to Care/Ease of Access



1 in 4 reported being busy with personal things, like family or work, as a barrier to receiving care.

1 in 5 reported problems with money or health insurance as a barrier.

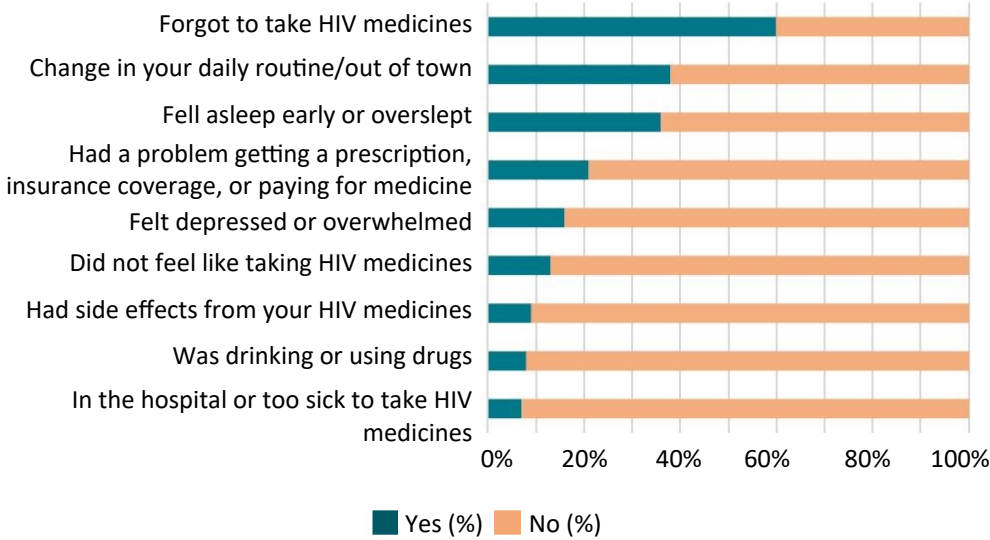
1 in 5 reported depression or mental health problems as a barrier.

The 2018 and 2019 surveys included questions regarding barriers to receiving HIV clinical care. 441 responses were included in the data for this graph.

Top 3 Reported Reasons for Last Missed ART Dose:

- 1) Forgetting to take medicine(s)
- 2) Having a change in usual routine, or being out of town
- 3) Falling asleep early or oversleeping

Reason for Last Missing ART Dose



Things to consider for those having difficulty with medication adherence or difficulty staying in care:

ART Adherence

- Is there a reason or a major life change that makes taking daily medication difficult?
- Are there other medications that can ease side effects from ART?
- Does the patient need help connecting to AIDS Drug Assistance Program (ADAP)?
- Are there practical and daily cues that will help the patient remember their medication on busy days?

HIV Care Retention

- Can a case manager join the patient's care team if needed?
- Is the patient's mental health a priority and being supported fully?
- Would a support group help encourage a patient during difficult care times?
- Are transportation or housing needs making it difficult for patients to come to their appointments?

Resources for Patients

Health Insurance:

[Helping Californians get the health care they need - Health Consumer Alliance](#)

Ryan White HIV Care and Treatment:

[Get HIV Care and Treatment | HIV/AIDS Bureau \(hrsa.gov\)](#)

Housing Resources:

[HOPWA: Housing Opportunities for Persons With AIDS - HUD Exchange](#)

Substance Abuse and Mental Health Services Administration Hotline:

[SAMHSA's National Helpline – 1-800-662-HELP \(4357\) | SAMHSA](#)

Mental Health and HIV:

[Mental Health | HIV.gov](#)

Questions? Contact us:

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CDC MMP: <http://www.cdc.gov/hiv/statistics/systems/mmp/>

Office of AIDS MMP: <https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OAsre.aspx>

