“Real Time” Update on Adolescent/Young Adult HIV Care

SUNY UPSTATE MEDICAL UNIVERSITY
Adolescent/Young Adult Specialized Care Center (SCC)

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10/26/2012
Topics to be discussed

- How does HIV Spread?
- Risk Factors
- Epidemiology
- Post-Exposure Prophylaxis (PEP)
- Pre-Exposure Prophylaxis (PrEP)
- New York State HIV Testing Requirements
- Adolescent/Young Adult Specialized Care Center
How Does HIV Spread?

- Through contact with body fluids
  - Blood
  - Semen
  - Vaginal secretions
  - Breast milk
HIV/STD Risk Factors

- Unprotected Sex (Anal, Vaginal, Oral)
- MSM
- Multiple Partners
- Injection Drug Use (IDU)
- Sexual Assault
- Other STD or Hepatitis Infection
Risk in College Population

Many students engage in risk behaviors:

- Multiple Sexual Partners
- Alcohol and Drug Use
- Inconsistent Condom Use
- Body Piercings
- Tattoos
- Lack of STD and HIV testing
In the United States*

- There are **1.1 million** people >13 years living with HIV/AIDS in the US
- About **20%** of infected individuals are unaware of their diagnosis
- There were an estimated **48,000** new infections in 2010
- **10,080** new infections were in people aged **15-24**
- Having an STD increases risk of acquiring HIV
- Chlamydia and Gonorrhea rates are highest among women aged 18-20 and men aged 20-24

*2010 CDC Surveillance Data*
Diagnoses of HIV Infection among Adults and Adolescents, by Sex and Transmission Category, 2010—46 States and 5 U.S. Dependent Areas

Males
N=37,910
- 77% Male-to-male sexual contact
- 12% Injection drug use (IDU)
- 4% Male-to-male sexual contact and IDU
- 7% Other
- <1% Injection drug use (IDU)

Females
N=10,168
- 86% Heterosexual contact
- 14% Other
- <1% Injection drug use (IDU)

Note. Data include persons with a diagnosis of HIV infection regardless of stage of disease at diagnosis. All displayed data have been statistically adjusted to account for reporting delays and missing risk-factor information, but not for incomplete reporting.

- Heterosexual contact includes contact with a person known to have, or to be at high risk for, HIV infection.
- Other includes hemophilia, blood transfusion, perinatal exposure, and risk factor not reported or not identified.
Diagnoses of HIV Infection among Adults and Adolescents, by Sex and Race/Ethnicity, 2010—46 States and 5 U.S. Dependent Areas

**Males**
- American Indian/Alaska Native: 24%
- Asian: 32%
- Black/African American: 41%
- Hispanic/Latino*: <1%
- Native Hawaiian/other Pacific Islander: <1%
- White: <1%
- Multiple races: 1%

**Females**
- American Indian/Alaska Native: 17%
- Asian: 18%
- Black/African American: 62%
- Hispanic/Latino*: 1%
- Native Hawaiian/other Pacific Islander: 1%
- White: <1%
- Multiple races: <1%

Note. Data include persons with a diagnosis of HIV infection regardless of stage of disease at diagnosis. All displayed data have been statistically adjusted to account for reporting delays, but not for incomplete reporting.

*Hispanics/Latinos can be of any race.
In New York State*

- There are a reported 128,653 people living with HIV/AIDS in New York State.
- 10,663 (8%) of those are aged 13-29 years.
- In 2010, 3,849 people were newly diagnosed with HIV.
- 1,343 (35%) of those are aged 13-29 years.
- 75% of new HIV diagnoses occur in males.
- 48% of newly acquired HIV is from male to male sexual contact.

*New York State 2010 Annual Surveillance Report
# of people living with HIV/AIDS in NYS in 2010 by age
Post-Exposure Prophylaxis (PEP)

- Needle-Stick Injuries
- Blood Exposure Injuries
- Sexual Assault

Most Post-Exposure events are identified through Emergency Room encounters
PEP Protocol Initial Requirements

- Offer HIV Prophylaxis treatment
  - Zidovudine 300mg bid
  - Lamivudine 150mg bid
  - Tenofovir 300mg qd
- As of 11/27/12, patient receives 7 day starter pack of PEP Prophylaxis from the ED*
- Arrange an appointment w/ HIV Provider for follow up to occur 24 hours to 6 days post ED visit*

* 2012 amended NYS Public Health Law
PEP Protocol

- Should begin HIV Prophylaxis within 36 hours of exposure
- Medical Management of HIV Exposure includes:
  - HIV Prophylaxis for 4 weeks
  - Management of Side Effects
  - HIV, STD and Hepatitis A, B, C tests: immediately, 1, 3 and 6 months post-exposure
PEP Considerations

- Make sure referral is in place from ED to community HIV Provider
- Assess availability of PEP medication beyond ED initial supply
- Encourage medication adherence through 4 weeks
- Encourage follow-up through 6 months
Pre-Exposure Prophylaxis (PrEP)

- Truvada® recently approved by FDA for prevention of HIV infection
- Indicated for:
  - Men who have sex with Men
  - Uninfected partner in stable relationship with HIV positive person
- Requires patient education, condom use and frequent medical follow up
- Patient must have a negative HIV test before starting treatment
PrEP Considerations

- Truvada is One Pill, Once a Day
- Weigh side effect risk vs. HIV infection risk
- Safer Sex Education
- Regular condom use
- Medical follow up at least every 3 months
- HIV Testing at least every 3 months
- Insurance may not cover cost
HIV Testing Strategy*

- In NYS, it is required that all individuals 13-64 years receiving hospital or primary care services are offered an HIV test at least once.
- High Risk patients should be offered testing more frequently (at least annually).
- Patients may opt out of testing.
- Testing Law applies to College Health Services.

*as of September 1, 2010
HIV Testing Strategy

- Provide the “7 Points” of HIV Testing

- Written Consent may be part of general consent with “opt out” language

- Rapid (less than 60 minutes)/CLIA waived testing requires only oral consent, noted in the medical record

- Follow up appointment for patients testing positive is required

- < 18 with “capacity to consent” do not need parental permission for any HIV or STD testing.
Barriers to Testing

- People are unaware of availability
- Provider discomfort
- Cost concerns
- Privacy concerns
- “What I don’t know won’t hurt me” (Denial)
- Embarrassment/Stigma regarding testing
- Avoidance
Strategies to Increase Prevention and Testing

- Offer up to date HIV/STD education including Safer Sex and Condom use education
- Be sensitive to privacy/confidentiality issues
- Increase awareness of testing, including free testing and off-site testing options
- Sponsor “Testing Day” events
- Normalize testing as Standard of Care
- Increase provider comfort level
- Ready referral sources for follow up care
SUNY Upstate Medical University
Adolescent/Young Adult Specialized HIV Care Center*

- Provide comprehensive care for adolescents and young adults with HIV infection
- Provide HIV/STD Testing and Treatment for at-risk adolescents and young adults
- Provide HIV/STD Education, Prevention and Testing awareness targeted at reaching at-risk adolescents and young adults

*NYS DOH AIDS Institute designation
Adolescent/Young Adult HIV Specialized Care Center

TEAM

- Physicians
- Nurse Practitioners
- Social Worker
- Family Therapist

- Nurses
- Dietician
- Adherence Specialist
- Developmental Psychologist
Resources

- CDC: [http://www.cdc.gov/hiv/resources/guidelines/index.htm](http://www.cdc.gov/hiv/resources/guidelines/index.htm)
- HIV Clinical Resource NYS Dept of Health: [http://www.hivguidelines.org](http://www.hivguidelines.org)
- Our website: [www.upstate.edu/uh/peds/aids](http://www.upstate.edu/uh/peds/aids)
- Facebook: [www.facebook.com/SUNY.PDAC](http://www.facebook.com/SUNY.PDAC)
- Phone: 315-464-6331
Thank You

Questions?