Research in Youth

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Why We Did this Study

New HIV Diagnoses in the U.S. By Age, 2016

- Aged <13: 122 (0.3%)
- Aged 13-19: 1,675 (4%)
- Aged 20-29: 14,740 (37%)
- Aged 30-39: 9,943 (25%)
- Aged 40-49: 6,490 (16%)
- Aged 50-59: 4,882 (12%)
- Aged 60+: 1,930 (5%)

39,782 total new
What We Did

• An HIV Preexposure Prophylaxis Demonstration Project and Safety Study for Young MSM
  • 18-22 year old; 15-17 year old HIV negative
  • HIV transmission risk behavior in the previous six months
  • Daily tenofovir disoproxil fumerate/emtricitabine (Truvada)
  • Followed over 48 weeks
What We Found

Over half in each group achieved protective drug levels.

Adherence decreased with quarterly visits

Study resulted in label indication for PrEP for youth
What Our Results Mean

• Youth need additional supports to maintain high adherence to PrEP
• Itech is innovative technology project
• Aims to impact the HIV epidemic by conducting research on technology-based interventions across the HIV prevention and care continuum for adolescents and young adults.
Why We Did This Study

Aging up with perinatal HIV infection (1)

- With combination antiretroviral therapy (ART), increasing numbers of perinatally HIV-infected (PHIV) young women are reaching child-bearing age and becoming pregnant.

- PHIV young women are unique in their experience:
  - Life-long HIV infection.
  - Exposed to mono- and dual-therapy → resistance.
  - Challenge of maintaining long-term adherence to ART:
    - Transitioning to adulthood/adult care.
    - Experiencing depression, isolation, stigma, and parental loss.
# Why We Did This Study

## Aging up with perinatal HIV infection (2)

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<th>No.</th>
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<th>95% CI</th>
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What We Did

Pregnancy Rates and Postpartum Virologic Control among Perinatally HIV-Infected Young Women in AMP Up

Kunjal Patel, Brad Karalius, Kathleen Powis, Claire Berman, Deborah Kacanek, Anna-Barbara Moscicki, Mary Paul and Katherine Tassiopoulos
What We Found

Adjusted* GEE model of VL trajectories (N=140)

*pre-pregnancy VLs ≥400 c/mL (4 missing), age at sexual debut, black race (9 missing), Hispanic ethnicity, highest caregiver education level attained, and prior live birth
Why This Matters

- While we observed lower rates of pregnancies among PHIV women compared to PHEU women, a high percentage (42%) had at least one pregnancy.

- Increased postpartum support with respect to managing their HIV infection may be necessary for PHIV young women after delivering a live-born infant.

- End of pregnancy may be a good point to intervene to ensure adherence levels attained during pregnancy are maintained in the postpartum period.
Acknowledgments

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Texas Children’s Hospital

Harris Health System

Legacy Community Health

Community

Study Volunteers