



Assessing the HIV care continuum among transgender women in the Netherlands

Does HIV care retention differ from men who have sex with men?

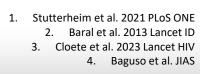
Disclosures

Nothing to disclose

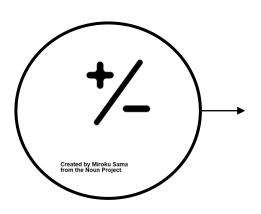


Background

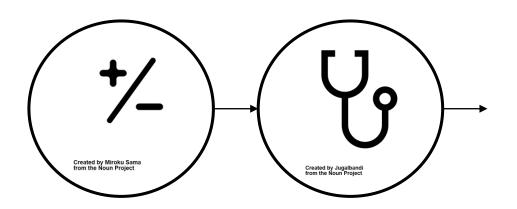
- Transgender women are at increased risk for HIV^{1,2}
- Retention in HIV care, uptake and adherence to ART and viral suppression are suboptimal among transgender women^{3,4}
- HIV care continuum is a pivotal instrument to monitor the HIV epidemic



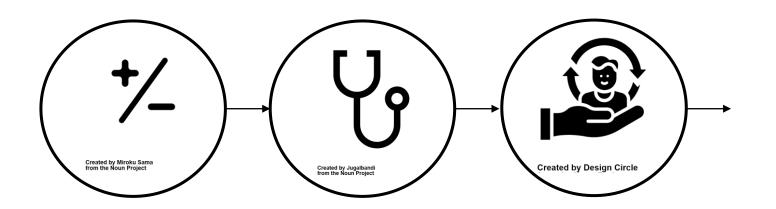




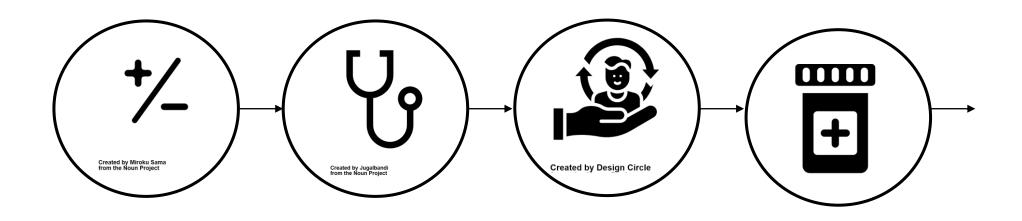




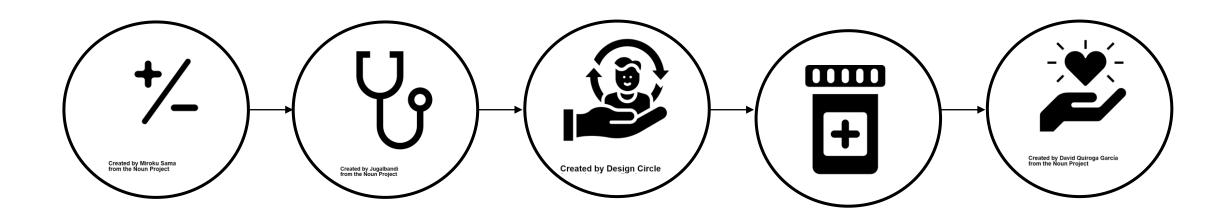








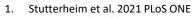


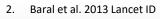




Background

HIV care continuum among transgender women in NL not previously assessed









AIM

- 1. Compare the stages of the HIV care continuum between transgender women and men who have sex with men (MSM)
- 2. Assess proportion of new HIV diagnoses among all people in care
 - 1. Assess proportion of late diagnoses
- 3. Assess disengagement from care



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Methods

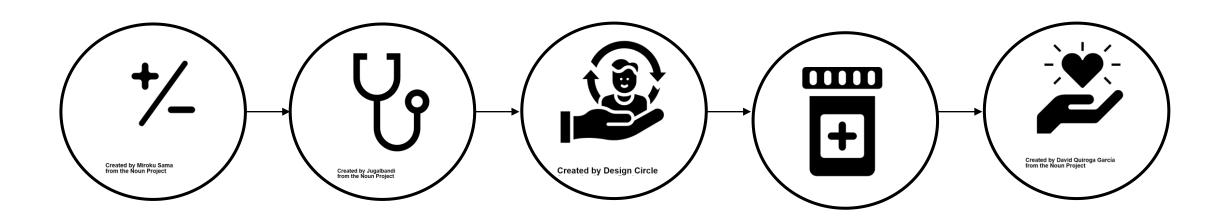
- HIV care is provided by 24 HIV treatment centres
- The Dutch HIV Monitoring Foundation collects data of 98% of individuals in care (ATHENA cohort)
- Data from 2011 to 2021



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Methods

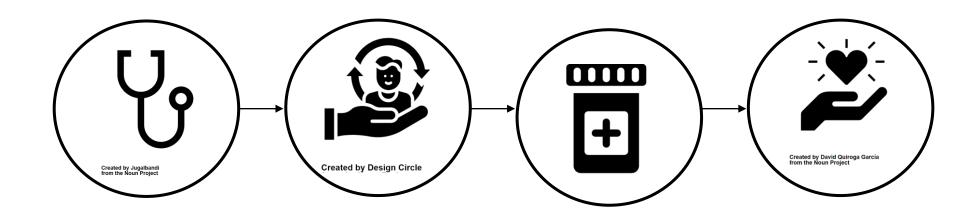
• HIV care continuum estimated for stage 2-5 of cascade





Methods

• HIV care continuum estimated for stage 2-5 of cascade





Methods



All individuals with HIV alive and in care as of 2010



Created by Design Circle

Linked individuals who attended ≥1 clinical visit



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Methods



Retained individuals who recived ART for ≥6 months



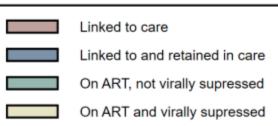
Individuals on ART with an undetectable viral load (<200 copies/mL)



- 15,819 individuals attended ≥1 clinical visit between 2011-2021
 - 260 transgender women
 - 15,559 MSM

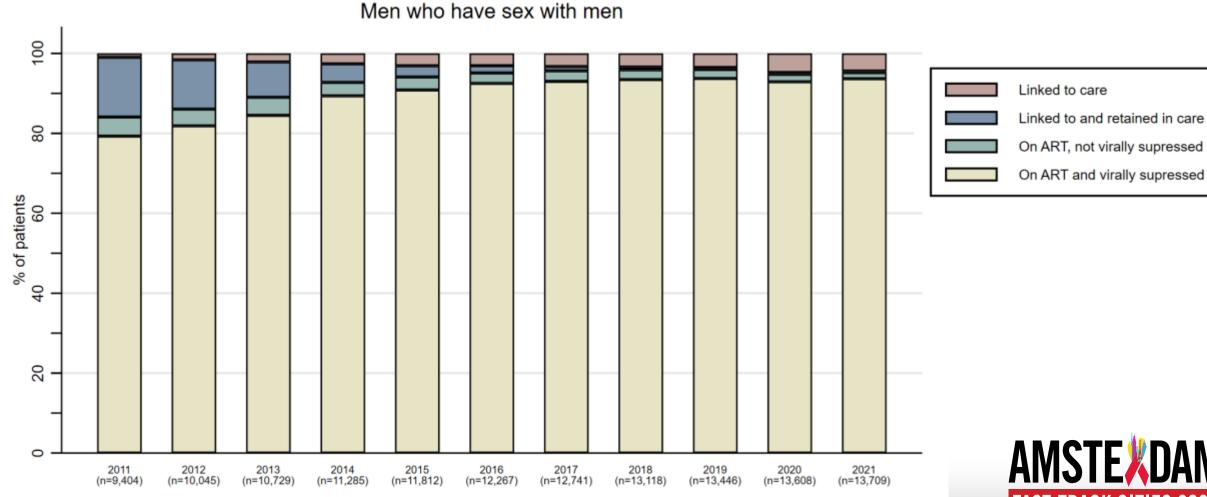






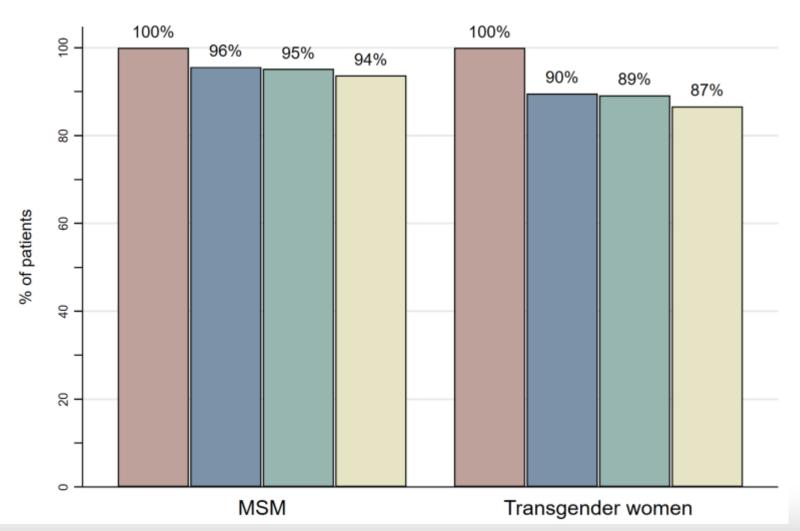


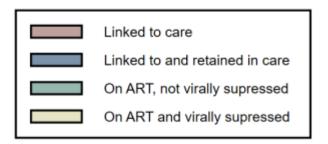




Results (2021)

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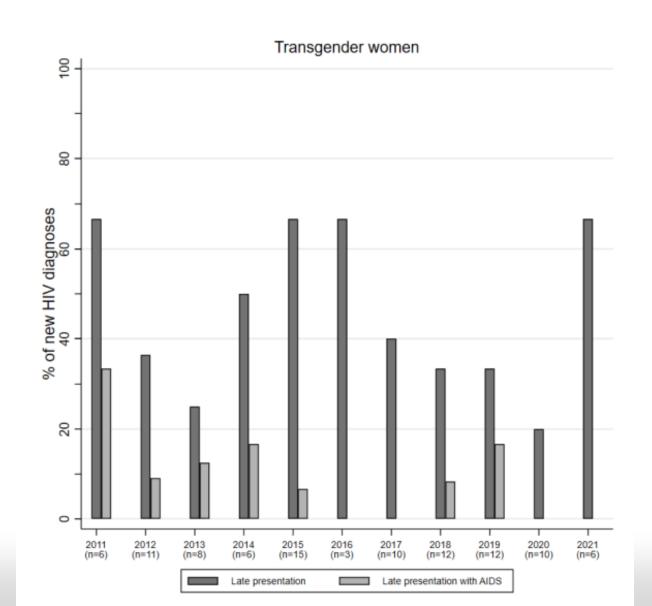
- New HIV diagnoses were stable between 2011 and 2021 for transgender women (p_{trend} =0.053)

 • Decreased for MSM (p_{trend} <0.001)



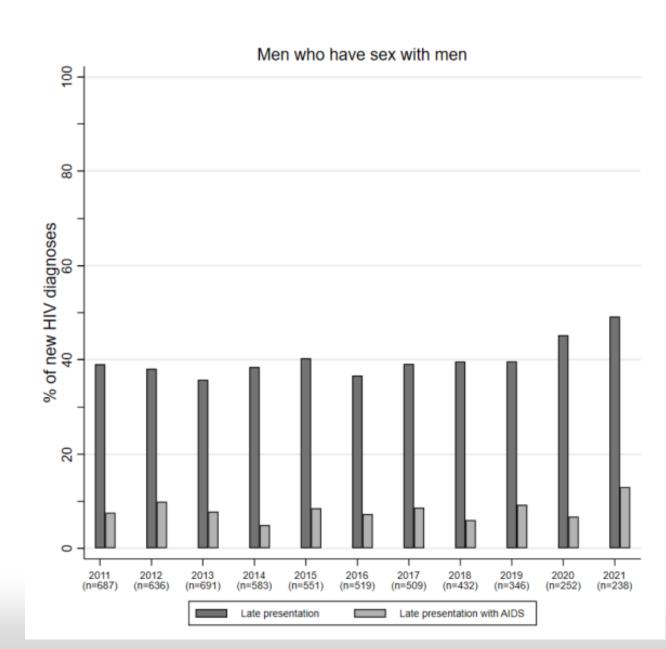
Results

 Late presentation fluctuated over time for transgender women



Results

 Late presentation increased for MSM (p=0.005)



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- 1,286/15,819 (8%) individuals were disengaged from care
- Incidence rate of disengagement was 1.91 (95%CI 1.33-2.75)
 times higher among transgender women than MSM
- Reason for disengagement: moving or unknown



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Conclusions

 Over 11 years, majority of transgender women with HIV were virally suppressed

- BUT HIV care continuum still less optimal across its stages for transgender women and less progress over time
- Late presentation is common



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Conclusion



 Design targeted intervention with the transgender community to improve HIV care retention and outcomes



Acknowledgements



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