Screening for comorbid conditions among people with HIV in medical care

Rachael Lazar1, Laura Kersanske2, Sarah L. Braunstein1
New York City Department of Health and Mental Hygiene 1Massachusetts Department of Health

RESULTS

- Fewer than half of MMP participants were screened for any one of the comorbid conditions
- Those with at least 3 medical visits were more likely to have been screened for HCV (aOR=3.54) or an STI (aOR=3.84)
- Hispanic participants were more likely to be screened for HCV (aOR=1.72), compared with Black participants
- White participants were less likely to be screened for T2D (aOR=0.30), compared with Black participants

CONCLUSIONS

- Variable screening frequencies may point to a need for improved integration of HIV care with other clinical services and/or improved communication between patients and providers regarding risk
- More frequent HIV care was associated with higher screening for STI and HCV, possibly due to increased opportunity for testing or care related to the screened-for condition
- Risk factors for comorbidities should be regularly assessed at HIV care visits

REFERENCES


Figure 1: Participant characteristics, MMP 2012 (N = 439)

Table 1: Factors associated with screening for comorbid diseases among PLWH in medical care, MMP 2012