

Cascade of care of people diagnosed with HIV in New Zealand between 2006 and 2017

Authors:

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Background:

Early diagnosis and initiation of antiretroviral therapy (ART) improves the outcomes for people infected with HIV and, the associated suppressed viral load (VL) reduces an individual's risk of onward transmission. We estimated the proportion of people reported with HIV in New Zealand between 2006 and 2017 who were alive in 2017-2019, were on ART and had a suppressed VL; and explored their associated characteristics. This information is important to assess national progress against targets and identify gaps in health service provision.

Methods:

Data were anonymously linked to information on ART and VL within the data collection period (January 2017–August 2019) using the National Health Index (NHI), Ministry of Health and laboratory datasets, and information from clinical specialists. Logistic regression was used to test for associations. Sensitivity analyses were undertaken to estimate the range for the key proportions.

Results:

Overall, 2355 people were reported with HIV of whom 116 (5%) had died, 337 (14%) were overseas, and 1701 (72%) alive in New Zealand; for the remaining 201 (9%) the outcome was unknown. Clinical data was available for 1490/1701 (87.6%): 1408 (94.5%) of whom were on ART, 11 (<1%) not on ART, and for 71 (4.8%) this was unknown. Of those on ART, 1156 (82.1%) had a suppressed VL (<200 copies/mL), 34 (2.4%) unsuppressed, and for 218 (15.5%) this was unknown. The estimate of the proportion on ART ranged from 99% to 78%, and from 98% to 78% with a suppressed VL depending on the status of those for whom we could not obtain necessary data.

Conclusion:

Amongst people with HIV in New Zealand under care, a high proportion were on ART and had suppressed VL. Increasing collection of NHIs, more recently enabled by legislation, and better linkage with laboratory information will reduce the number with unknown information and provide more complete VL results in the future.

Disclosure of Interest Statement:

Funding for this study was from a Dunedin School of Medicine Deans Bequest Grant. The AIDS Epidemiology Group is funded by the New Zealand Ministry of Health.