Gonorrhea and Chlamydia Prevalence Among Patients Living with HIV Receiving Services in Two Urban Publically Funded Sexual Health Clinics in Baltimore City, Maryland, USA

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BACKGROUND

- Individuals co-infected with HIV and bacterial sexually transmitted infections (STIs) such as gonorrhea and chlamydia may have increased likelihood of transmitting HIV.
 - Gonorrhea and chlamydia infection has been associated with increased HIV viral load levels, a biomarker of transmission potential.
 - Gonorrhea and/or chlamydia infection are indicators of condomless sex.
- Our objective was to determine prevalence of gonorrhea and chlamydia among patients living with HIV/AIDS (PLWH) receiving care at two urban, publically-funded sexual health clinics in Baltimore City, Maryland, a U.S. city with high rates of HIV, gonorrhea, and chlamydia.

METHODS

Study Population

- Data from electronic medical records for all patient visits among PLWH receiving STI or HIV continuity care services (HIVCC) in 2017 were used
 - Patient visits where gonorrhea and/or chlamydia testing were performed were included.
 - For patients tested multiple times over the study period, only the first visit was included.

Measures

- Gonorrhea and chlamydia prevalence: the proportion of patients with laboratory confirmed infection.
- Engaged in HIVCC: patient had an HIVCC service visit 6 months prior to the visit when gonorrhea and/or chlamydia testing was performed.
- Demographic characteristics included: Sex at birth, race, age, and sex partner gender. Men who have sex with men (MSM) were defined as patients whose sex at birth was male and who self identified as gay/bisexual/same-gender loving or who reported sex with a man during the past 3 months.

Analysis

- Chi squared tests were used to compare gonorrhea, chlamydia prevalence across groups.

RESULTS

- Between January - December 2017, there were 1,004 clinical evaluations among 459 PLWH
 - 81% (n = 356) PLWH were gonorrhea and chlamydia tested at least once during this period
- Among the 356 PLWH included in the analyses:
 - 63% were engaged in HIV continuity care
 - 85% were male
 - 52% were MSM
 - 93% were aged 25 years and older

RESULTS

Figure 1. Gonorrhea Prevalence among Patients Living with HIV/AIDS attending Urban, Publically-funded Sexual Health Clinics, Baltimore, Maryland 2017

Figure 2. Chlamydia Prevalence among Patients Living with HIV/AIDS Attending Urban, Publically-funded Sexual Health Clinics, Baltimore, Maryland 2017

CONCLUSIONS

- Gonorrhea and chlamydia prevalence among PLWH attending urban sexual health clinics in Baltimore City, Maryland are high, especially among MSM PLWH. These results are similar to those observed in other urban setting in the U.S. and underscore the need for STI prevention among HIV-infected MSM.
- Gonorrhea prevalence was 3-fold higher among those not enrolled in HIV continuity care compared to those who were. In addition to not being virally suppressed, the potential for HIV transmission among those not engaged in HIV continuity care may be further increased by higher prevalence of STIs.
- Our results suggest that HIV continuity care may be associated with fewer STIs and highlight the importance of offering both STI and HIV continuity care in urban, publically-funded sexual health clinics.