

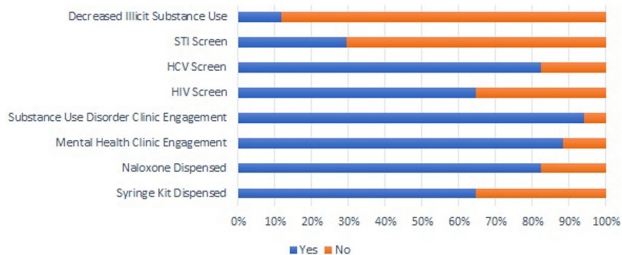
Process that veteran undergo when they engage with Orlando VA SSP
Contents of Standard SSP Kit Distributed to Veterans at Orlando VA



- Kit Materials**
- 2 Condoms
 - 10 Syringes
 - 5 Bandages
 - 10 ETOH swabs
 - 10 Cotton balls
 - 10 2x2 Gauze sponges
 - 1 Tourniquet

Results. Approximately 3000 syringes were dispensed. Of the 17 veterans, 65% received syringes, 82% received naloxone, 100% engagement in mental health and 94% engagement in substance use disorder clinics. In total, 65% were screened for HIV, 82% for HCV and 29% for sexually transmitted infections.

Rate of Engagement to Harm Reduction Tools Offered by Syringe Service Programs within VHA



Conclusion. These numbers, while modest, are notable, especially given the financial and organizational barriers that were in place. Furthermore, the COVID-19 pandemic impacted full implementation and outreach. With the recent, official clarification on syringe purchase and support for SSPs, the number of SSPs in the VA will grow, along with opportunity for more robust data collection. The experience of both facilities is a model for programs currently in development and moves us closer to ending the HIV epidemic by 2030.

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1198. Lyme Disease Post-Exposure Prophylaxis by Single-Dose Doxycycline in Three Healthcare Systems

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Background. Lyme disease, the most common tickborne disease in the United States, may be prevented by taking a single 200-mg dose of oral doxycycline after a high-risk bite from a blacklegged tick. Currently, it is not known how Lyme disease post-exposure prophylaxis (PEP) might vary by region and healthcare system. We identified single-dose doxycycline medication orders in three healthcare systems in states with high incidence of Lyme disease and compared associated patient and provider characteristics.

Methods. Electronic health record data during 2012 – 2016 were obtained from three healthcare systems: Geisinger (Pennsylvania), Marshfield Clinic (Wisconsin), and Mayo Clinic (Minnesota/Wisconsin). Creation of analytic variables and analysis were harmonized across the three sites. Medication orders for single-dose doxycycline ≤200 mg that were accompanied by specific key words or diagnostic codes (e.g., tick bite; Lyme disease prevention) were considered evidence of PEP. Manual chart review was performed from a random subset to evaluate the algorithms used to identify PEP.

Results. Among 2,937,585 patients with at least one medication order or clinical encounter during the study period, 14,102 single-dose doxycycline orders for Lyme disease PEP for 13,172 unique patients were identified. The typical patient receiving PEP was older (mean age 51 – 58 years), male (56 – 59%), and non-Hispanic White (81 – 98%). The annual seasonality of medication orders was bimodal, with peaks occurring during April – July and October – November. The most common encounter setting was an outpatient clinic or urgent care center (80 – 91%); medication orders after patient phone calls in the absence of an in-person visit occurred frequently (14 – 19%) in two health systems. Chart abstractions (n=600) revealed instances of PEP prescribed inappropriately (e.g., bite from a non-blacklegged tick; patient with symptoms of acute Lyme disease).

Conclusion. Lyme disease PEP with a single dose of doxycycline was frequently prescribed in healthcare systems where there is a high incidence of Lyme disease. PEP was most commonly prescribed to non-Hispanic Whites over the age of 50 years. Public health initiatives for tickborne disease prevention should include clinician education on the appropriate use of Lyme disease PEP.

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1199. Decreased Human Respiratory Syncytial Virus Activity during the COVID-19 Pandemic in Japan: An Ecological Time-Series Analysis, 2014 through 2020

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Background. Non-pharmaceutical interventions (NPIs), such as sanitary measures and travel restrictions, aimed at controlling the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), may affect the transmission dynamics of human respiratory syncytial virus (HRSV). We aimed to quantify the contribution of the sales of hand hygiene products and the number of international and domestic airline passenger arrivals on HRSV epidemic in Japan.

Methods. The monthly number of HRSV cases per sentinel site (HRSV activity) in 2020 was compared with the average of the corresponding period in the previous 6 years (from January 2014 to December 2020) using a monthly paired *t*-test. A generalized linear Poisson regression model was used to regress the time-series of the monthly HRSV activity against NPI indicators, including sale of hand hygiene products and the number of domestic and international airline passengers, while controlling for meteorological conditions (monthly average temperature and relative humidity) and seasonal variations between years (2014–2020).

Results. The average number of monthly HRSV case notifications in 2020 decreased by approximately 85% ($P < 0.001$) compared to those in the preceding 6 years (2014–2019) (Figure 1A). For every average ¥1 billion (approximately \$9,000,000/£6,800,000) spent on hand hygiene products during the current month and 1 month before (lag 0-1 months) there was a 0.22% ($P = 0.02$) decrease in HRSV infections (Table 1). An increase of average 1,000 domestic and international airline passenger arrivals during the previous 1–2 months (lag 1–2 months) was associated with a $4.6 \times 10^{-4}\%$ ($P < 0.001$) and $1.1 \times 10^{-3}\%$ ($P = 0.007$) increase in the monthly number of HRSV infections, respectively.