

1540. New Faces of HIV Infection: Differences between Younger and Older Persons Presenting for HIV Care in Nashville, Tennessee

Kaylin Smith, MD¹; Todd Hulgan, MD, MPH²; Moises Huaman, MD, MSc³; Robertson Nash, MA, MBA, MSN¹; Stephen Raffanti, MD, MPH¹; Kehinde Equakun,¹; Anna Person, MD⁴; ¹Vanderbilt University Medical Center, Nashville, TN; ²Medicine, Vanderbilt University Medical Center, Nashville, TN; ³Division of Infectious Diseases, University of Kentucky, Lexington, KY; ⁴Department of Medicine, Division of Infectious Diseases, Vanderbilt University Medical Center, Nashville, TN

Session: 197. HIV 2: Testing and Changing Demographics

Saturday, October 11, 2014: 12:30 PM

Background. Although annual rates of new HIV diagnoses in the U.S. have remained stable, incidence among younger individuals is increasing within certain groups. Although some characteristics of this younger cohort have been reported, we sought to compare persons newly engaged in care <25 years old with those ≥25 years at the time of first provider visit at a large Southeastern clinic.

Methods. This retrospective study identified new patients attending at least one provider visit at the Vanderbilt Comprehensive Care Clinic from October 2010 through June 2012. Those <25 years old at the time of first visit were compared with those >25.

Results. Of 281 persons, 25% were <25 years old at first visit (Table). Those <25 were more likely to be black, MSM, and to report a prior negative HIV test. Although days from positive test to first provider visit and baseline HIV RNA levels did not differ by age group, those <25 had a significantly higher median CD4 T cell count than those ≥25 years old. In a multivariate model, age <25 ($p = 0.01$) and female sex ($p = 0.02$) were associated with higher CD4 count at enrollment to care after adjustment for race/ethnicity, substance use, and MSM risk.

| | Total (N=281) | >25 years (N=211) | <25 years (N=70) | P-value |
|----------------|------------------|----------------------|---------------------|---------|
| Race/Ethnicity | 138 (49) | 113 (54) | 25 (36) | 0.03 |

continued.

| | Total (N=281) | >25 years (N=211) | <25 years (N=70) | P-value |
|--|-------------------|----------------------|---------------------|------------------------------------|
| White | 122 (43) | 80 (38) | 42 (60) | (Black vs non-black $p=0.001$) |
| Black | 16 (6) | 14 (6) | 2 (3) | |
| Hispanic | 5 (2) | 4 (2) | 1 (1) | |
| Other | | | | |
| Prior Negative Test | 138 (49) | 94 (45) | 44 (64) | |
| Yes | 74 (27) | 61 (29) | 13 (19) | |
| No | 67 (24) | 55 (26) | 12 (17) | 0.02 |
| Unknown | | | | |
| Transmission Route | 173 (62) | 117 (55) | 56 (80) | 0.004 |
| MSM | 6 (2) | 5 (2) | 1 (1) | (MSM vs other $p<0.001$) |
| IDU | 74 (26) | 64 (30) | 10 (14) | |
| Heterosexual | 28 (10) | 25 (12) | 3 (4) | |
| Unknown | | | | |
| Days from test to 1st visit, med (range) | 61 (8- 6894) | 56 (8-6894) | 69 (11- 687) | 0.25 |
| Recent Hospitalization | 62 (22) | 54 (26) | 8 (12) | 0.02 |
| Baseline CD4 count (cells/mL ³) | 385 (176- 549) | 361 (111- 530) | 426 (342- 595) | 0.001 |

Data are N (%) or median (IQR) unless noted.

Conclusion. In a large Southeastern HIV clinic, 25% of new patients seen from 2010-mid 2012 were <25 years old. Those <25 were more likely to be black MSM. It is encouraging that despite being largely from underrepresented minorities, they did not have a longer time to presentation and had higher CD4 T cells. Further study is needed to better understand the changing dynamics of the U.S. HIV epidemic.

Disclosures. All authors: No reported disclosures.