Table 2. Linear Regression for the Difference of DI scores (post - pre), n = 376.

Table 2. Linear Regression for the Difference of DI scores (nost – nre) n = 376

Variable	Estimate	95% CI	p-value
Intercept (ref: 51 years old and Black/AA)	0.38	(0.01, 0.75)	0.05
Age	0.00	(0.00, 0.01)	0.13
White	-0.17	(-0.36, 0.02)	0.08
Other race (Hispanic/Latino, Asian, Native Hawaiian/Other Pacific Islander)	0.05	(-0.18, 0.29)	0.66
Viral suppression (Yes)	-0.17	(-0.38, 0.04)	0.11
Dolutegravir-based ART (Yes)	-0.18	(-0.50, 0.15)	0.28
Elvitegravir-based ART (Yes)	0.00	(-0.34, 0.34)	1.00
NNRTI-based ART (Yes)	0.23	(-0.11, 0.57)	0.19
PI-based ART (Yes)	-0.03	(-0.37, 0.32)	0.89
Interactions between the patient's ART and Cardiovascular Meds at Baseline (Yes)	-1.42	(-1.64, -1.19)	<.0001
Interactions between the patient's ART and Hyperglycemic Meds at Baseline (Yes)	0.02	(-0.23, 0.28)	0.85
Interactions between the patient's ART and Anti-inflammatory Meds at Baseline (Yes)	-1.90	(-2.14, -1.65)	<.0001
Interactions between the patient's ART and Pain Meds at Baseline (Yes)	-1.49	(-1.85, -1.13)	<.0001
Interactions between the patient's ART and Antiinfectives at Baseline (Yes)	-1.05	(-1.38, -0.72)	<.0001
Interactions between the patient's ART and Hormonal Therapies at Baseline (Yes)	-0.82	(-1.16, -0.48)	<.0001
Interactions between the patient's ART and Neurologic and Psychiatric Meds at Baseline (Yes)	-1.52	(-1.72, -1.32)	<.0001
Interactions between the patient's ART and Gastrointestinal and Urologic Meds at Baseline (Yes)	-1.51	(-1.79, -1.24)	<.0001
Interactions between the patient's ART and Polyvalent Supplements at Baseline (Yes)	-0.02	(-0.21, 0.17)	0.82
Interactions between the patient's ART and Other Meds at Baseline (Yes)	-0.86	(-1.27, -0.45)	<.0001

Conclusion. Switching ART to BIC/FTC/TAF can reduce the incidence of DIs among treatment-experienced PWH who are receiving CMs for a broad range of comorbid conditions.

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1045. Treatment-Related Physical, Emotional, and Psychosocial Challenges and

their Impact on Indicators of Quality of Life
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Session: P-47. HIV: Treatment

Background. Despite effectiveness of antiretroviral therapy (ART), some people living with HIV (PLHIV) still face barriers to daily oral ART adherence, including inconvenient scheduling, food requirements, adverse effects, and privacy concerns. We characterized treatment-related physical, emotional, and psychosocial challenges among PLHIV from 25 countries.

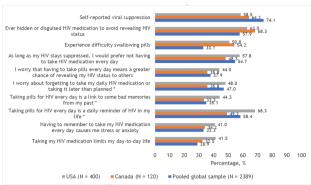
Methods. 2389 PLHIV adults on ART were surveyed in the 2019 Positive Perspectives Study, a standardized, self-reported survey of HIV patients aged 18-84 years on treatment. Data were collected on ART-related perceptions and behaviors. Descriptive and multivariable analyses were performed.

Results. Most participants were male (67.9%), aged < 50 years (70.7%), and reported viral suppression (74.1%). ART-related challenges included cueing of bad memories (58.4%), disguising HIV pills (57.9%), stress (33.3%), and difficulty swallowing pills (33.1%). Privacy and emotional challenges were generally similar between the USA and Canada (Figure 1). In the pooled sample, those who felt limited by their ART had higher odds of reporting suboptimal overall health (AOR 1.90, 95%CI:1.57-2.29), treatment dissatisfaction (AOR 2.21, 95%CI:1.82-2.69), and suboptimal adherence (AOR 1.90, 95%CI:1.57-2.29). Difficulty swallowing, any side effects, and privacy concerns were associated with increased odds of suboptimal overall health (AOR 2.10, 1.88, and 1.43, respectively) and suboptimal adherence (AOR 2.51, 1.50, and 1.87, respectively; all P< 0.05); results for other outcomes are in Figure 2. Overall, 12.6% (302/2389) had shared their HIV status solely with their primary HIV provider, whereas 6.8% (163/2389) "always" shared their HIV status. Only 52.0% were comfortable discussing ART-related privacy concerns with providers, although 29.0% overall missed ≥1 ART dose in the past month from privacy concerns. Overall, 54.7%

preferred a nondaily regimen if their HIV stays suppressed, while 72.3% were open to ART with fewer therapies.

Figure 1

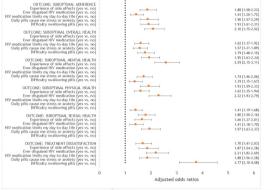
Figure 1. Percentage of people living with HIV aged ≥18 years from 25 countries who reported various physical and psychosocial challenges with their treatment, Positive Perspectives Study, 2019.



Asterisks (*) indicate statistically significant differences between the USA and Canada at P<0.05 using Chi squared tests

Figure 2

Figure 2. Adjusted odds ratios of the relationship between various treatment challenges and poor health and treatment dissatisfaction outcomes among people living with HIV aged ≥18 years from 25 countries, Positive Perspectives Study, 2019.



All analyses were adjusted for age, gender, race, education, region, and duration of disease. Suboptimal adherence was defined as a report of ≥1 reason for which the respondent missed ART doses ≥5 times within the past month.

Conclusion. This study identified several challenges with ART among PLHIV, underscoring the need for increased flexibility of ART delivery to meet diverse patient needs. Addressing these needs may improve overall health outcomes for more PLHIV

Disclosures. Patricia De Los Rios, MSc, GlaxoSmithKline (Shareholder) ViiV Healthcare (Employee) Chinyere Okoli, PharmD, MSc, DIP, ViiV Healthcare (Employee) Benjamin Young, MD, PhD, ViiV Healthcare (Employee) Garry Brough, BA Joint Hons in French/Italian, ViiV Healthcare (Employee, Independent Contractor, Other Financial or Material Support, Speakers Fees and Honoraria) Anton Eremin, MD, ViiV Healthcare (Advisor or Review Panel member) Marvelous Muchenje, BSW, MSc, in Global Health, ViiV Healthcare Canada (Employee) Nicolas Van de Velde, PhD, GlaxoSmithKline (Shareholder)ViiV Healthcare (Employee)

1046. Week 48 Outcomes from the BRAAVE 2020 Study: A Randomized Switch to B/F/TAF in African American Adults with HIV

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