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INTRODUCTION

- ❖ Telehealth could address many of the factors identified as barriers for retention in HIV care. In this study
- ❖ People with HIV (PWH) who are not retained in care report transportation-related challenges, longer travel time to HIV specialty clinics, competing life events as barriers to attending clinic visits and managing their HIV infection. Stigma and fear of HIV status disclosure hinder PWH from attending HIV clinic visits
- ❖ In this study we explore PWH's attitudes about using a telehealth program for HIV care instead of face-to face clinic visits.

METHODS

- ❖ Cross-sectional study consisting of a self-administered survey and chart review of PLWH presenting to an HIV clinic in Houston, Texas, between February and June 2018.
- ❖ Survey was used to assess PWH's attitudes towards and concerns for telehealth
- ❖ The survey assessed factors that could influence the participants' preferences and willingness to use telehealth for their care
- ❖ We extracted the date of birth, HIV viral load test result closest to the survey date, and the current ART regimen from the electronic medical records
- ❖ We conducted logistic regression analysis to examine the associations of patient characteristics with likelihood of using telehealth.

RESULTS

- ❖ 371 participants completed the survey; median age 51 yrs; (IQR 41 – 57), 36% female, 63% African-American and 26% Hispanics,
- ❖ Most participants were US-born (83%), 65% reported heterosexual transmission as HIV risk factor, 29% had some college degree
- ❖ 56% had been living with HIV for > 10 yrs, 49% were on ART for > 10 years, 67% had an undetectable HIV viral load

Items	Scale	Response values			
		1	2	3	4
% below					
Acceptability of telehealth for HIV care					
1. If you can use live video calls (like skype, facetime, live chat...) to see and talk to your doctor instead of coming to clinic appointments how likely would you use it?	1–5 ^a	13	14	17	31
2. If you can use live video call to see and talk to your doctor instead of coming to clinic appointments, how often would you use it?	1–5 ^b	17	20	26	15
Benefits of telehealth for HIV care					
3. This service will help me because it will fit better my schedule	1–5 ^c	23	46	11	15
4. This service will help me because I will not need to travel to clinic	1–5 ^c	21	42	10	18
5. This service will be good for me because I will have more privacy at home	1–5 ^c	19	43	10	22
6. This service will be good for me because no one will see me at the HIV clinic	1–5 ^c	12	26	11	39
Concerns about telehealth for HIV care					
7. My doctor will not be able to examine me well	1–5 ^d	21	16	14	21
8. My personal information will not be safe using the internet	1–5 ^d	20	8	11	14
9. I will not be able to express myself very well	1–5 ^d	14	9	14	19
10. I will use too much data on my phone service or internet	1–5 ^d	12	5	8	13

^a 1= very unlikely, 2= unlikely; 3= uncertain, 4= likely, 5=very likely

^b 1= never, 2= rarely; 3= sometimes, 4= frequently, 5= always

^c 1= strongly agree, 2= agree; 3= uncertain, 4= disagree, 5= strongly disagree

^d 1= extremely concerned, 2= moderately concerned; 3= somewhat concerned, 4= slightly concerned, 5= not at all concerned

Table 1: Survey items and response distributions (by percent %).

RESULTS

- ❖ Overall 57% of respondents were more likely to use telehealth for their HIV care if available, as compared to one-on-one in-person care
- ❖ 37% would use telehealth frequently or always as an alternative to clinic visits
- ❖ Participants reported many benefits including ability to fit better their schedule (69%), decreasing travel time (63%), and privacy at home (62%)
- ❖ 52% still considered telehealth beneficial even if they are still required to present for labs and medication pickup
- ❖ Participants expressed concerns about the telehealth, most commonly the inability of the physician to perform a good physical exam (37%), safety of personal information on the internet (28%), and not being able to properly express issues and concerns to the provider (23%)
- ❖ Factors associated with high likelihood of using telehealth include: US-born, men who have sex with men, higher educational attainment, higher HIV-related stigma perception.
- ❖ Factors associated with low likelihood of using telehealth include: Long standing HIV, having difficulty attending clinic visits, not knowing about or not having the necessary technology
- ❖ There was no association between age, sex, race, household income, drug use, alcohol use, uncontrolled HIV, or low medication adherence with the likelihood of using telehealth

CONCLUSIONS

- ❖ Overall positive attitude toward the use of telehealth for HIV care among PWH
- ❖ Telehealth appeals to a large group of people not only the young, and those with higher income
- ❖ Some barriers and concerns: safety of personal information, ability of effective communication and examination, availability and confidence using various technologies need to be addressed to increase acceptability and usage of telehealth among PWH