



SHE Clinic

Medical Care at the Intersection of Exchange Sex, HIV, STIs, and the Opioid Epidemic

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Disclosures

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Financial Disclosures

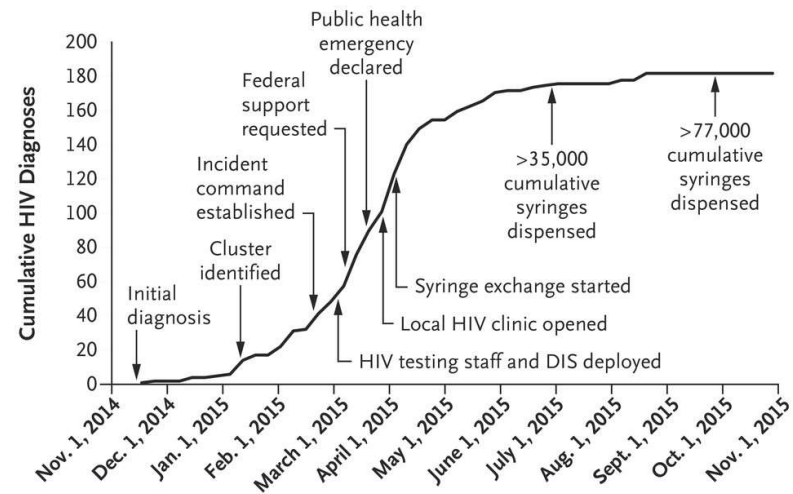
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Goals of Talk

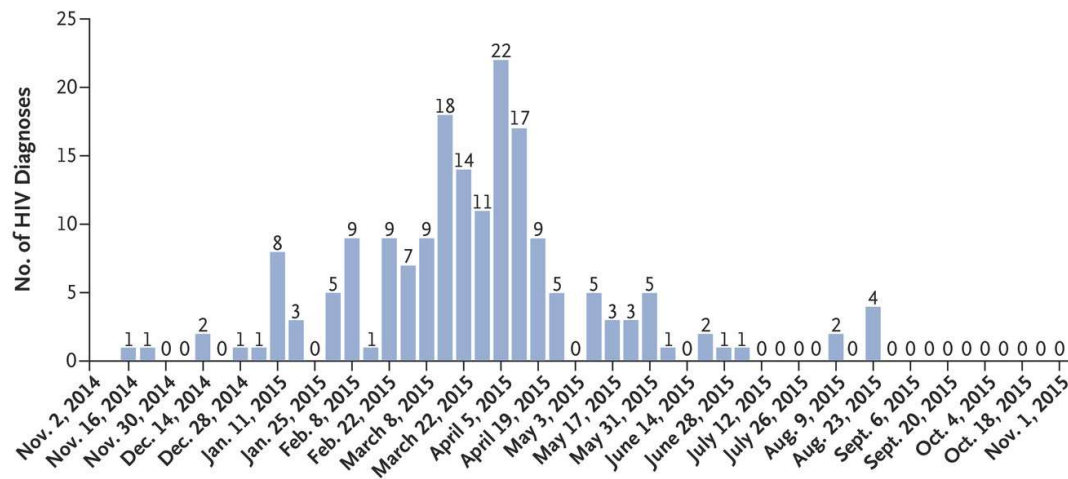
- Review epidemiology of recent HIV outbreak in King County among heterosexual persons who inject drugs
- Review model of the SHE Collaborative and Clinic
- Present overview of the demographics and outcomes of the women seen in the SHE clinic

Outbreak of HIV Infection in Southeastern Indiana

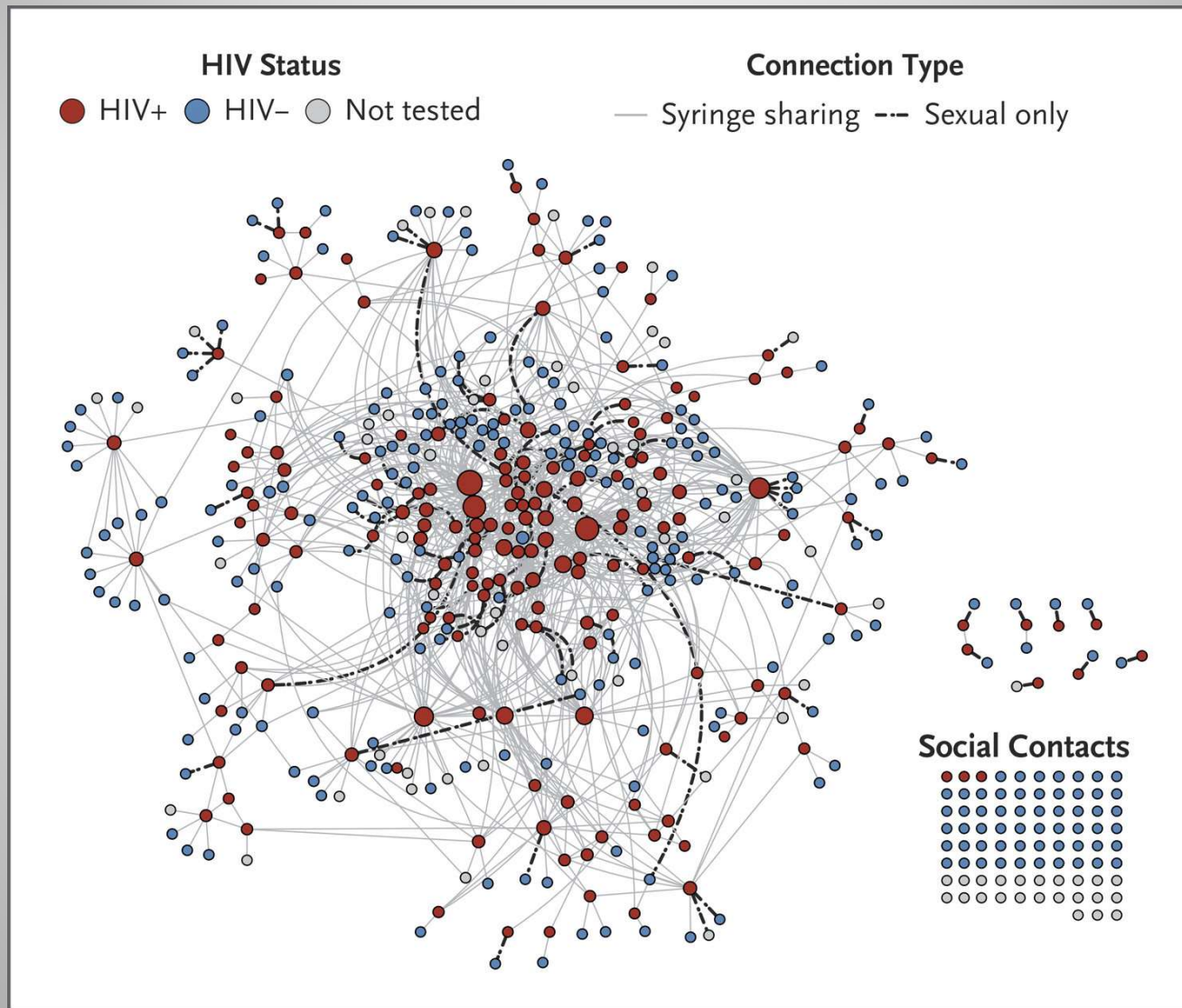
A Cumulative HIV Diagnoses and Public Health Response



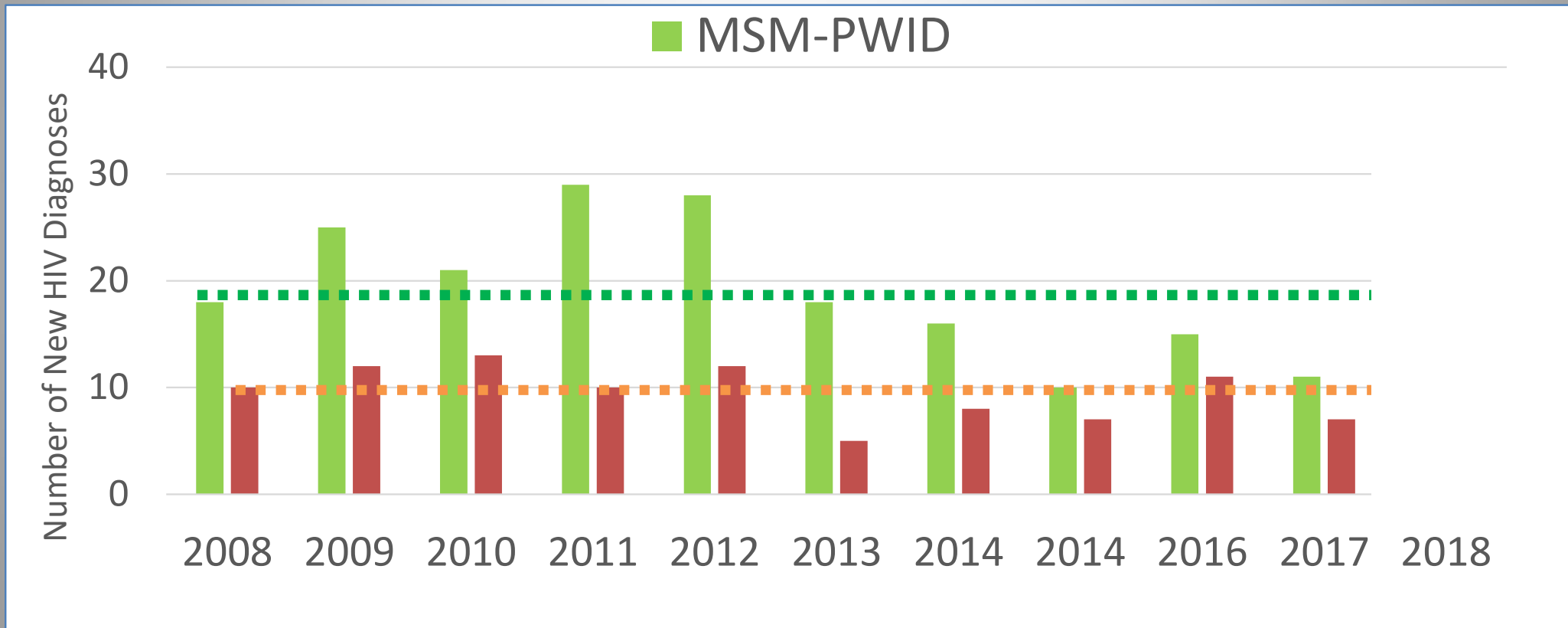
B HIV Diagnoses According to Week of Testing



Syringe-Sharing Network of Persons with Newly Diagnosed HIV Infection in Indiana Outbreak

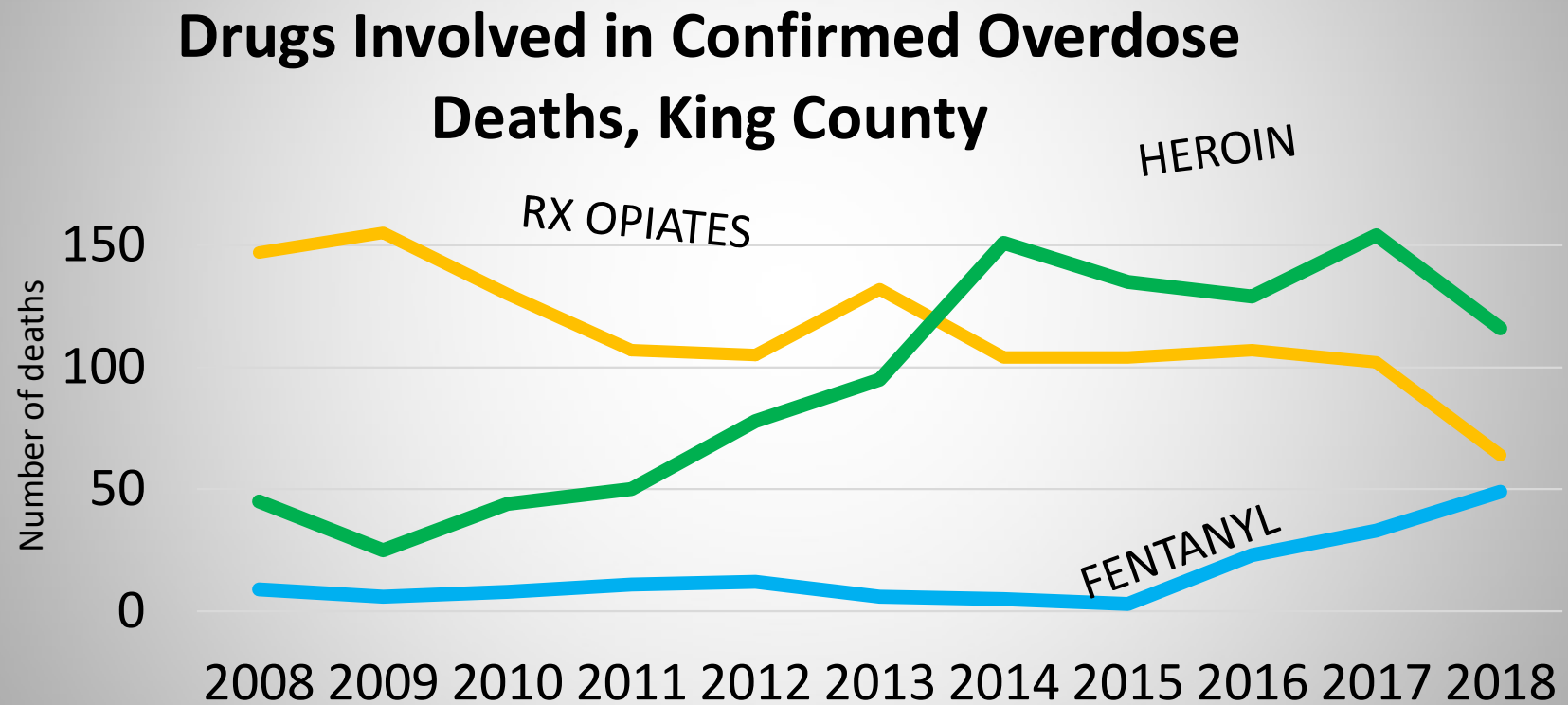


New HIV Diagnoses, King County PWID, 2008-18



Note: HIV surveillance data through 1-3-19
Slide courtesy of Sarah Glick, PhD, MPH

Increase in the PWID population size?

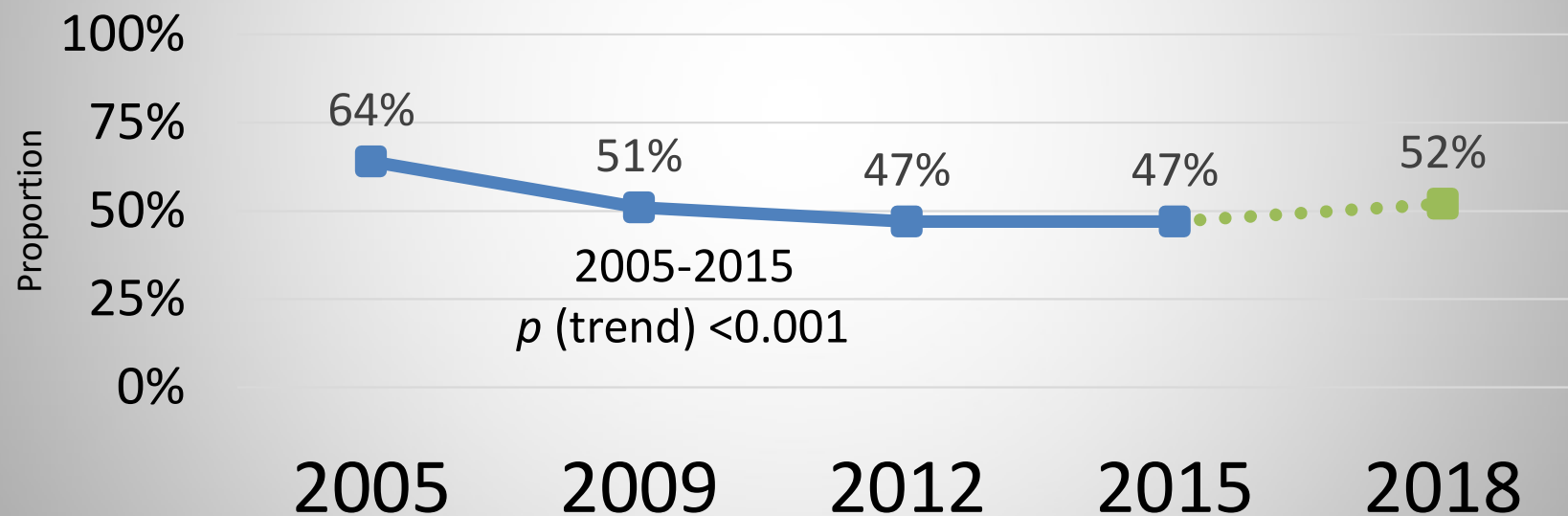


Slide courtesy of Sara Glick, PhD, MPH

Ref: <https://www.kingcounty.gov/depts/health/examiner/overdose.aspx>

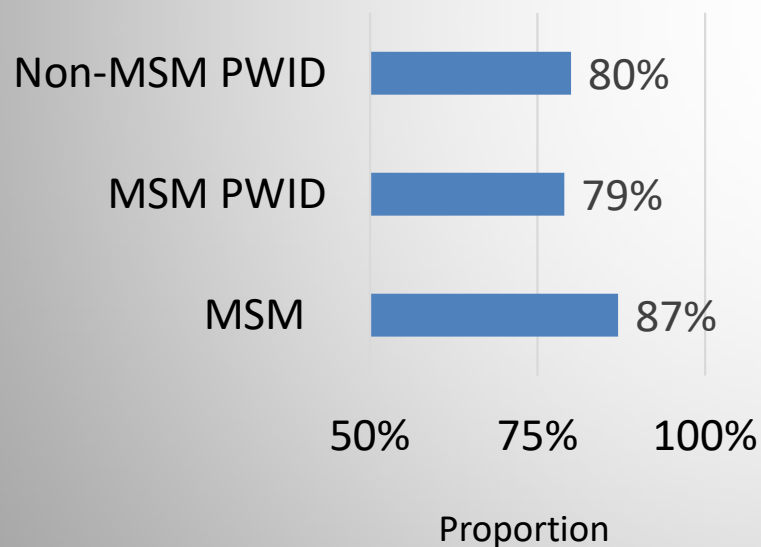
Change in HIV Testing among PWID?

HIV Testing among PWID in the Past 12 Months, NHBS-IDU

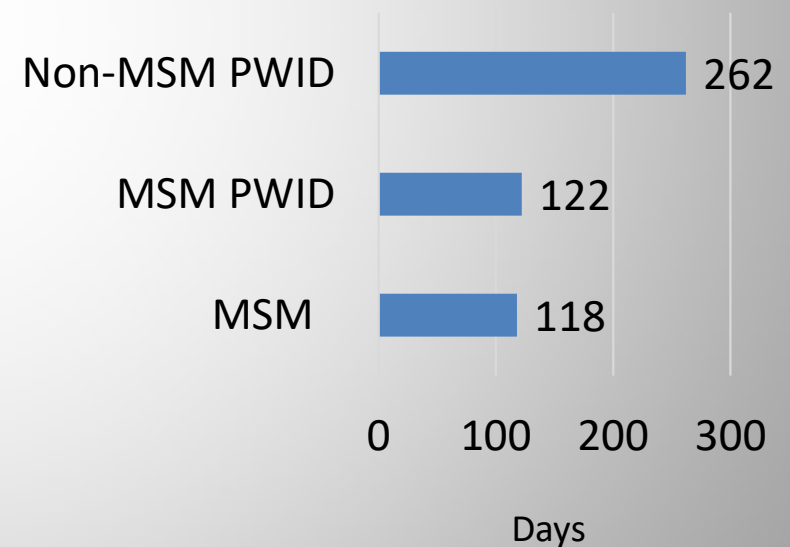


Low Viral Suppression among PWID?

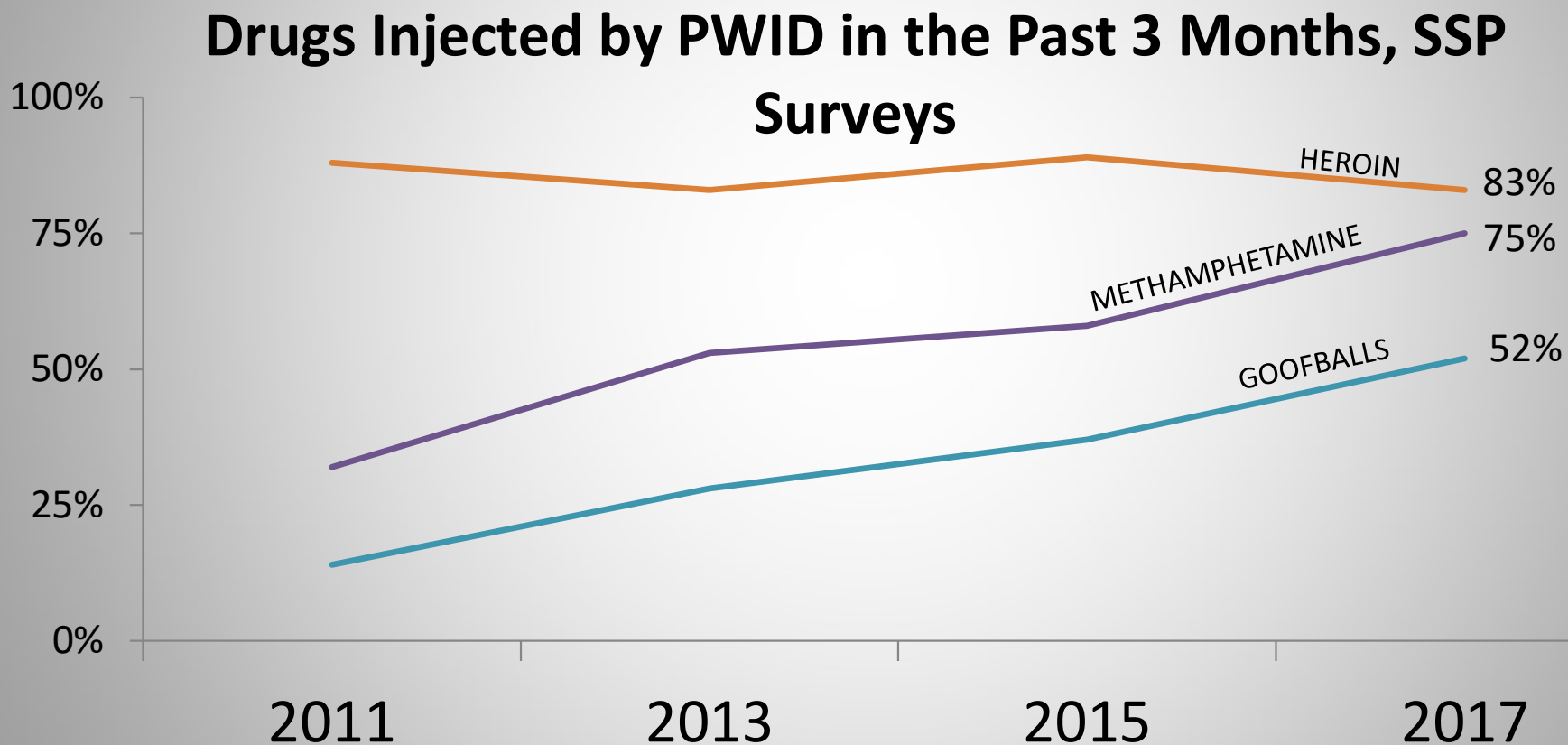
HIV Viral Suppression, 2017



Mean Days to HIV Viral Suppression, 2013-2016



Increasing Methamphetamine Use?

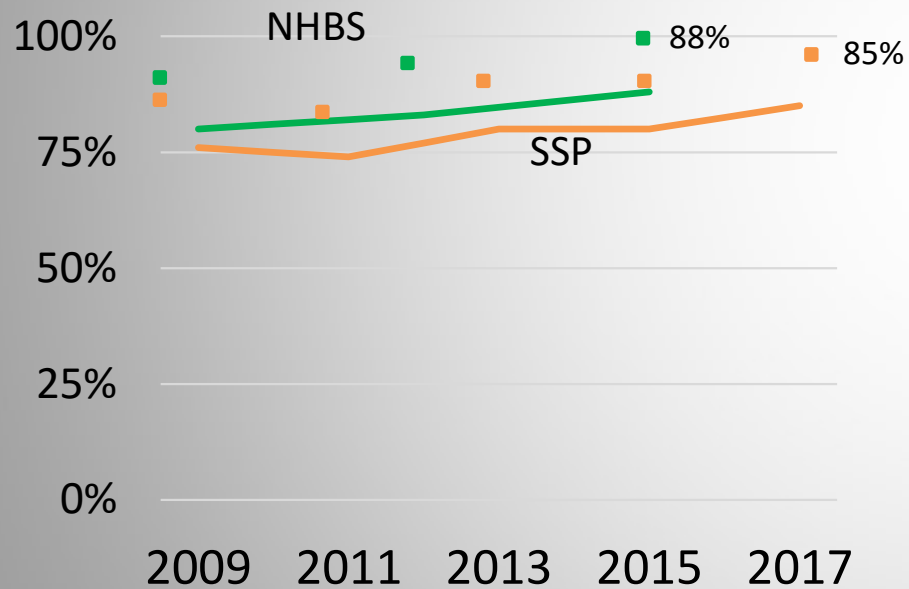


Slide courtesy of Sara Glick, PhD, MPH

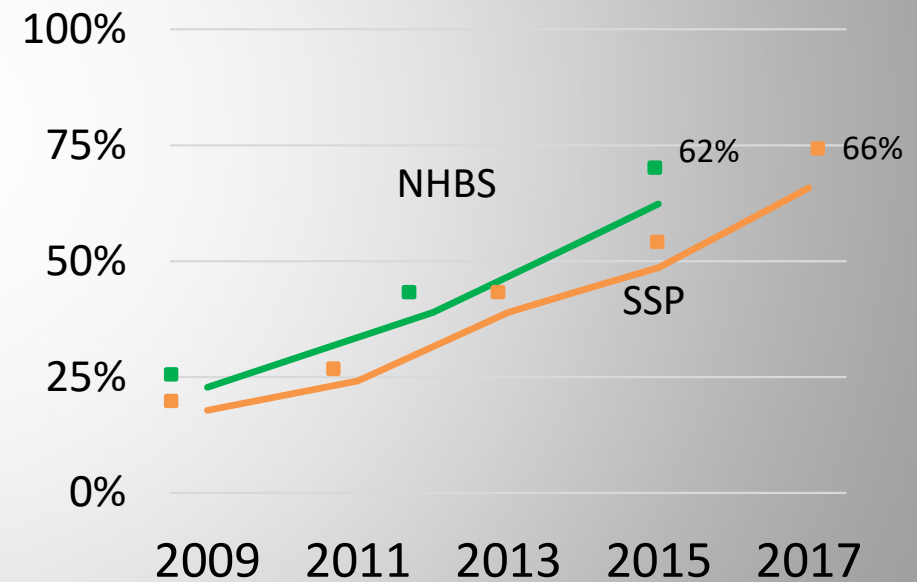
Ref: King County HIV Epidemiology Report, <https://tinyurl.com/KCHIVReport>

Increasing Methamphetamine Use?

Any Recent Meth Use, MSM PWID

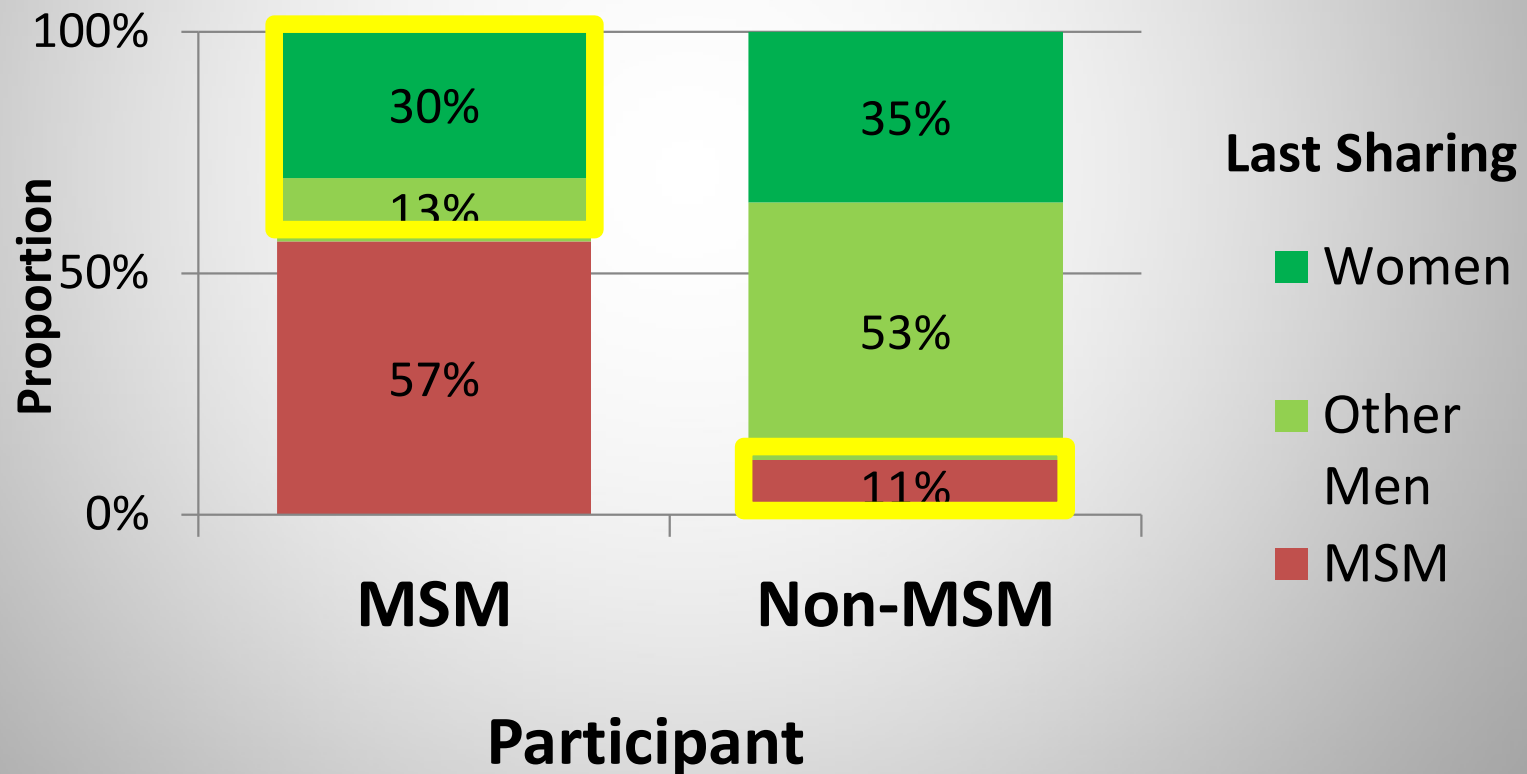


Any Recent Meth Use, Non-MSM PWID

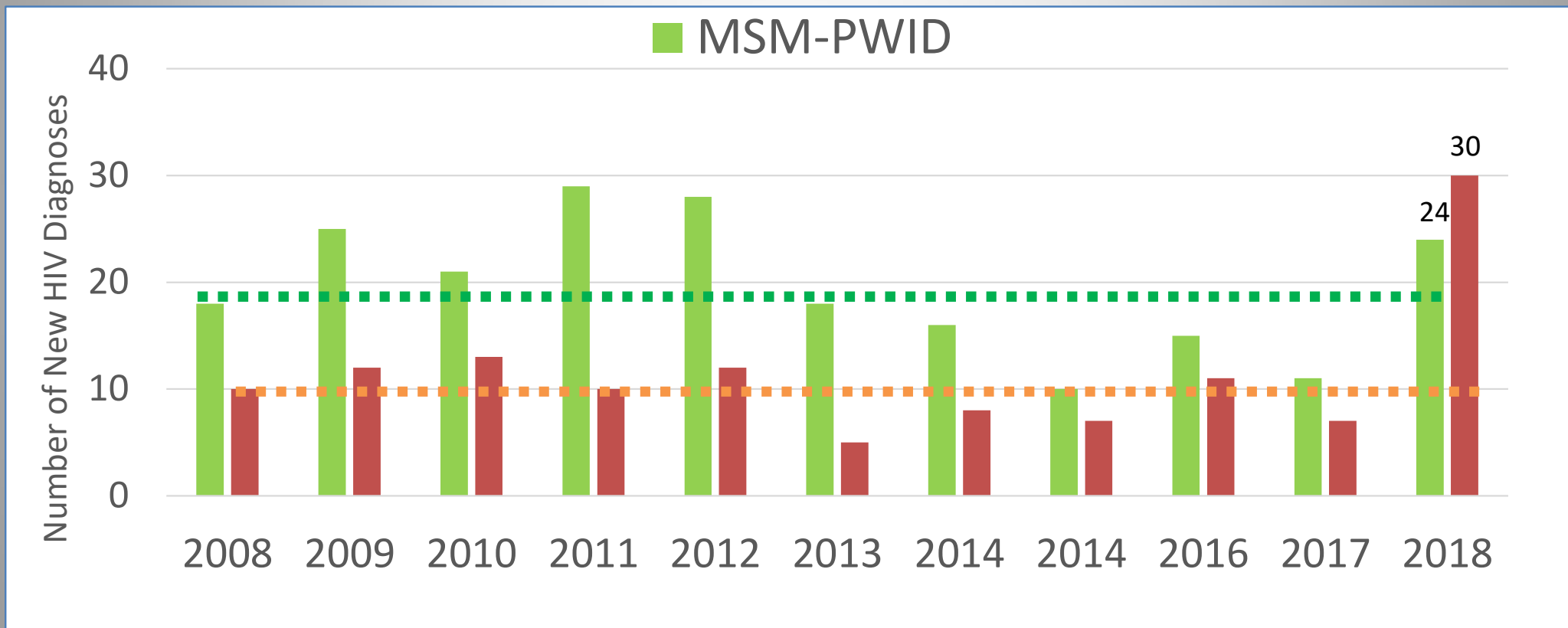


Evidence of Equipment Sharing between MSM and Non-MSM Who Inject Meth

PWID who Report Injecting Meth and Sharing Injection Equipment (2009-2015)



New HIV Diagnoses, King County PWID, 2008-18

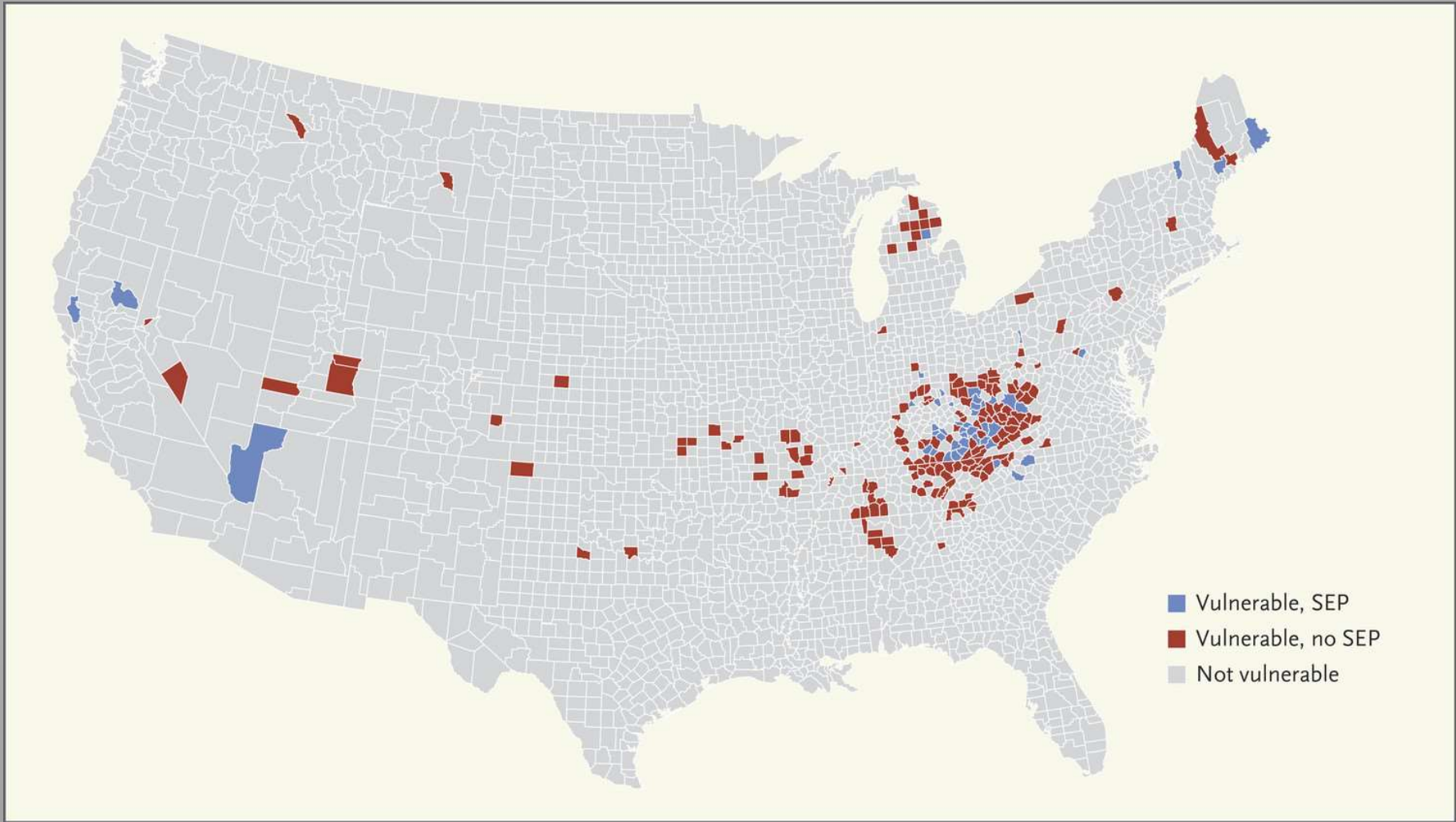


Note: HIV surveillance data through 1-3-19
Slide courtesy of Sarah Glick, PhD, MPH

Lessons Learned from Indiana

- Need for more rapid response to HIV
- Need for syringe exchange services
- Expanded use of buprenorphine and other opiate agonist therapy

U.S. Counties' Vulnerability to HIV and HCV Outbreaks and Their Syringe-Exchange Program (SEP) Status







HOMELESS

OPIATES

HIV

SEX TRADE

Homelessness



Seattle is splitting, not dying



by [Tim Harris](#) | March 27th, 2019

Director's Corner | [Tim Harris](#), founding director

Crosscut.

Man used as proof that 'Seattle Is Dying' tells his story

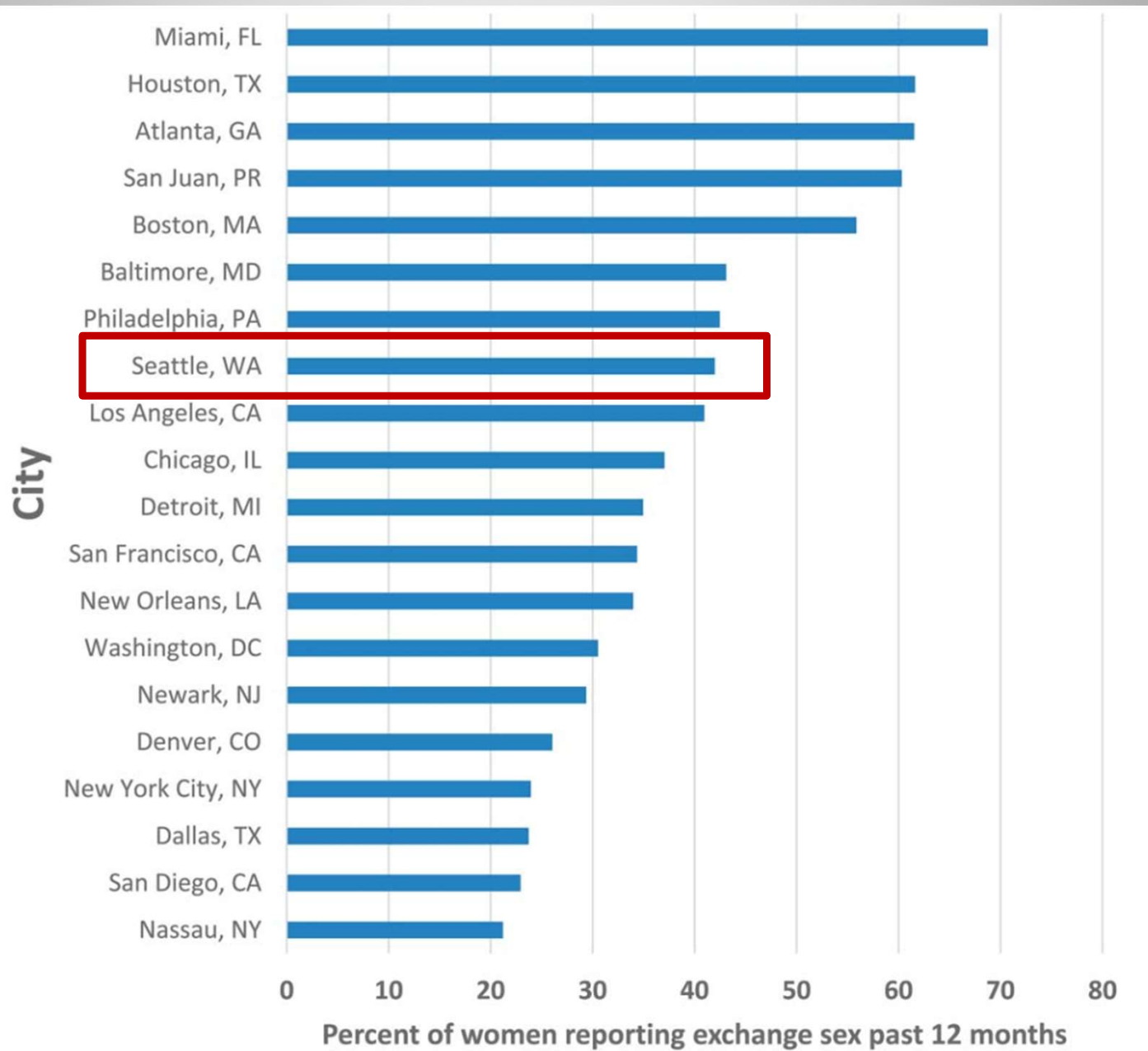
Robert Champagne says KOMO's special inaccurately portrayed him. To start, he hasn't been homeless for more than three years.

by [David Kroman](#) / March 28, 2019

Exchange Sex & HIV

- NHBS survey data of 2305 women who inject
- 39% reported exchanging sex for drugs in the 12 months prior
- Women who exchanged sex more likely to:
 - Be living homeless
 - Share syringes
 - Have multiple partners
 - Higher risk of being HIV-positive and unaware

Prevalence of Exchange Sex in Female PWID



Exchange Sex & HIV

- Overlap of injection drug use and exchange sex increases risk of STIs and HIV
- Increasing number of women engaging in transactional sex in the Seattle area
- Impact of backpage shutdown – higher risk sex

Health | Local News | Project Homeless

The Seattle Times

Health officials, worried about outbreak, investigate HIV cluster in North Seattle

Originally published August 30, 2018 at 1:09 pm | Updated August 30, 2018 at 7:36 pm

REAL
CHANGE

NEWS FEATURES OPINION ARTS VENDOR PROFILES

HIV outbreak among homeless people worries health officials



by Ashley Archibald | October 24th, 2018

KUOW
94.9 .ORG

SOUND STORIES. SOUND VOICES.

9 cases of HIV on Seattle's Aurora Avenue prompt urgent response

SEATTLEWEEKLY

KING COUNTY

Officials Warn of More HIV Transmissions Among Homeless Drug Users

By Josh Kelety

Friday, August 31, 2018 2:24pm | NEWS & COMMENT

PHSKC Response

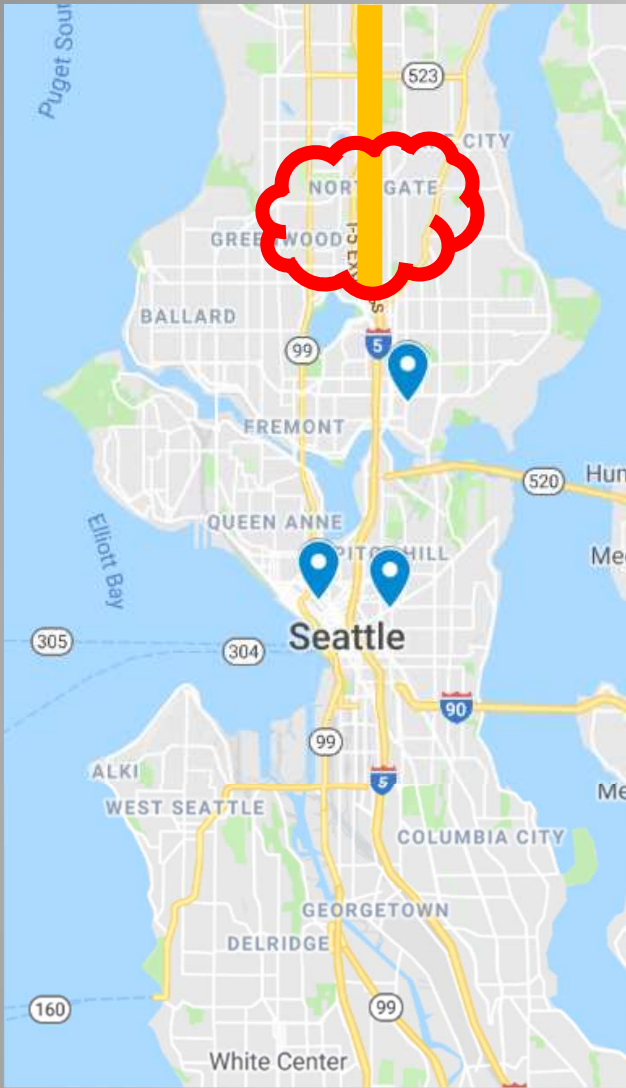
- • 8/3/18 – Disease investigators identify 3 linked cases in North Seattle
- 8/7/18 - First public alert to medical providers – PHSKC contacts ED directors
- 9/18-Present – Expansion HIV testing and syringe exchange in North Seattle; Expansion of jail testing

Characteristics of Newly Diagnosed HIV in non-MSM PWID in 2018

	Non-MSM PWID dx in 2018 N=30 (%)	North Seattle Cluster N=16 (%)*
Viral suppression	14 (47)	8 (50)
Female sex assigned at birth	15 (50)	12 (75)
White, non Latinx	26 (87)	13 (81)
Black, non Latinx	1 (3)	2 (14)
Other race/ethnicity	3 (10)	1 (7)
Heroin + Meth use	NA	11 (69)
Methamphetamine alone	NA	2 (12)
Heroin alone	NA	0
Homeless	21 (70)	16 (100)
CSW or exchange sex	10 (50)	10 (83)

Includes 2 non-PWID and 1 diagnosed in 2019

Data from Matthew Golden, MD, MPH



- Limited syringe exchange services in the area
- Increased numbers of unhoused individuals
- Increasing numbers of women engaging in sex work on the street
- Stigma



Licton Springs Tiny House Village (photo Seattle Times)

Persons who inject drugs, particularly those living homeless, remain vulnerable to outbreaks of HIV infection, even in cities with large HIV prevention programs and shrinking HIV epidemics.

Women of North Aurora

Qualitative interviews of exchange sex workers on North Aurora found the following

- All surveyed were opiate dependent
- Nearly all did not have medical home/PCP
- Prior interactions with healthcare system were felt to be judgmental and stigmatizing

Women of North Aurora

- Medical needs assessment performed in 2017
 - Most of the women surveyed wanted full primary care
 - Contraception
 - Vaccines
 - Cancer screening
 - Mental health care
 - Buprenorphine-naloxone
 - STI testing/treatment
 - HIV testing
 - HCV testing and treatment
 - Most had not heard of PrEP

Partnering with the Community

- Aurora Commons (AC) – neighborhood “living room” opened in 2011
- Over 140 women access services at AC
- PSCC mobile medical van had been coming to AC x years
 - Wound care
 - Foot washing
 - Referrals to clinics



S.H.E. Collaborative



SHE Clinic Model



- Safe.Healthy.Empowered Clinic began 7/2018
- Walk-in
- Partnership with AC, PSCC, WA DOH, PHPDA (Health Equity Fund), City of Seattle
- Primary care clinic for female-identifying persons on North Aurora Avenue
- MD, RN, full time medical case manager

SHE Clinic



Evaluation of the first 50 patients

- High STI risk yet none had been tested within 3 months of initial SHE clinic visit
- 29% of women reported condom use
- None reported planning for pregnancy, but 4 with new dx of pregnancy (now up to 10)
- 42/50 tested for HIV
 - 17 of the HIV negative women initiated PrEP at first visit
- 7 HIV positive women have accessed SHE clinic services
 - 6 in care, 4 of whom are UD
 - 1 intermittently in care but has not started ART



Characteristics	% Asked or tested (n)	% Positive (n)
Average age (IQR)	37 (34, 40)	
Racial identity	98.0 (49)	
White		69.4 (34)
Black		22.5 (11)
NA/Alaskan		2.0 (1)
Asian		0
Other		6.1 (3)
Unstable housing	94 (47)	95.7 (45)
Injection drug use	90 (45)	80.0 (36)
Exchange sex	90 (45)	68.9 (31)
Pregnancy	78 (39)	10.3 (4)
Trichomoniasis	46 (23)	47.8 (11)
Chlamydia	56 (28)	17.9 (5)
Gonorrhea	54 (27)	18.5 (5)
Syphilis	26 (13)	0
HIV	84 (42)	8.5 (4)
HCV	76 (38)	39.5 (15)

Aurora Commons Survey



- Survey of 76 women at Aurora Commons – 12/2018 to 2/2019
 - Survey was informed by a pilot analysis of 1st 50 patients of SHE clinic
- EMR query and chart review were utilized to gather objective data:
 - All ED visits on Epic and Care Everywhere 2/1/18 - 2/1/19
 - Suboxone prescriptions
 - PrEP prescriptions



Aurora Commons Survey



- 78 women surveyed
 - 44 of whom had been seen at SHE Clinic
- Findings:
 - Only 11 reported stable housing
 - High rates of ED utilization (71% had been seen in an ED within last 6 months)
 - Only 45% report exchange sex
 - But 89% believe the majority of women at AC exchange sex



AC Survey Results

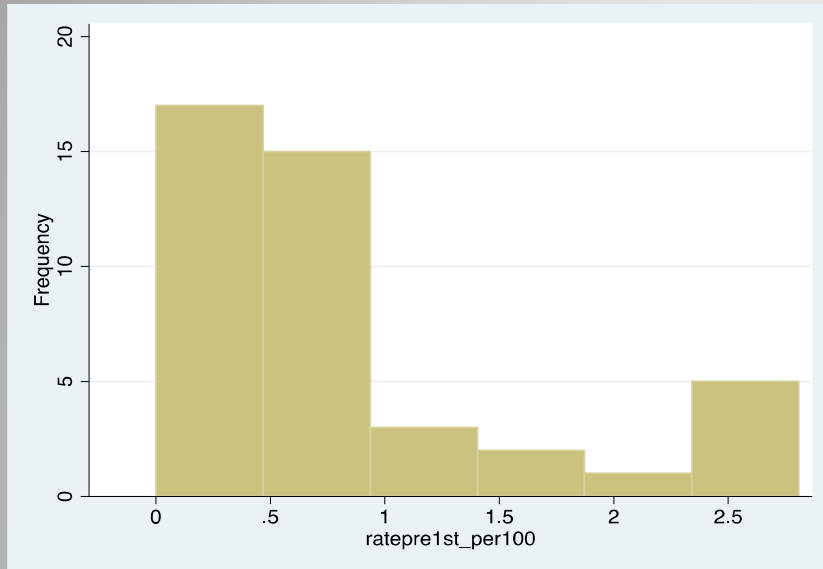


Characteristics	N = 76
Racial identity	
White	37 (49)
Black	18 (24)
NA/Alaskan	16 (21)
Medically insured	69 (96)
Seen at SHE	42 (55)
Unstable housing	65 (86)
Exchange sex	34 (45)* - 68 (89) believe majority of women at AC exchanging sex
Recent injection drug use (last 3 months)	44 (83) – (33/44 (75) recent goofball use
Self reported STI	
Trichomoniasis	29 (38.2) – SHE first 50 patients 47.8%
Chlamydia	40 (52.6) – SHE first 50 patients 17.9%
Gonorrhea	25 (32.9) – SHE first 50 patients 18.5%

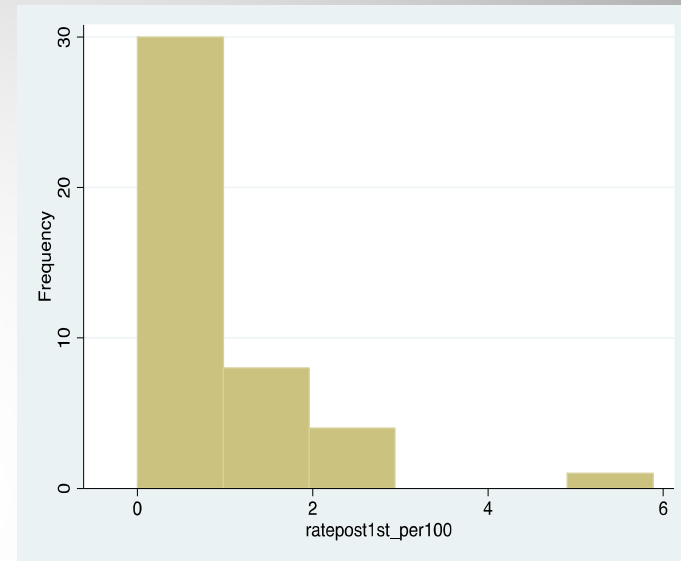
SHE Clinic Implementation: Outcomes

- 56/76 (74%) women reported recent **STI screening**
 - 26/34 (76%) women reporting exchange sex had recent STI screening
 - 34/41 (83%) at SHE clinic and 22/34 (65%) non-SHE clinic, $p=0.07$
 - Recent STD treatment: 13/42 (31%) at SHE and 3/34 (9%) non-SHE, $p=0.02$
- Only 8 (14%) women used **LARC** – 4 SHE clinic and 4 non-SHE clinic
 - of 59 women who do not desire pregnancy currently.
 - *[1st 50 SHE patients – 10% pregnant at 1st evaluation]*
- 17/72 (24%) **PrEP** eligible women were prescribed PrEP rx. 17/42 (40%) SHE patients and 0/30(0%) non-SHE patients, $p=0.000$
- 24/49 (49%) women were *prescribed* **opioid replacement**. 19/31 (61%) at SHE clinic compared to 3/18 non-SHE, $p=0.002$

SHE Clinic Implementation: Outcomes



ED visit rate **before** first SHE clinic visit, per 100 days



ED visit rate **after** first SHE clinic visit, per 100 days

- **ED visits** – 60 women accounted for 264 ED visits in 365 days

Among SHE clinic patients (n=42):

- Prior to first visit: median 0.56, IQR 0-0.99
- After first visit: median 0, IQR 0-1.39
- One-sided: $p=0.02$, Two-sided: $p=0.04$

Conclusions



- Women living unhoused and exchanging sex in North Aurora are at high risk for HIV and STIs and have frequent contact with ED providers
- In conjunction with a trusted safe space, this co-located clinic model is able to reduce ED utilization and provide harm reduction care (PrEP, STI screening, and buprenorphine)

Next Steps



- Expansion of SHE to 2 half days a week
- Continue to offer low barrier buprenorphine and optimize delivery
- Partnership with Hepatitis Education Project to assist with HCV treatment adherence support
- STI control – point-of-care testing with expedited partner therapy
- Explore fertility desire – need for in depth qualitative exploration of concepts of motherhood and resistance to LARC



Acknowledgements

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THANK YOU
to all the
women of
North Aurora



Questions

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