Children’s National and Whitman Walker Partner with Hopkins, Children’s Hospital of Philadelphia to Reduce Risk of and Improve Treatment Outcomes

DC CFAR member sites, Children’s National Medical Center and Whitman-Walker Health, are working with members of the Chesapeake CFAR Consortium on two studies focusing on preventing HIV infection in youth and in improving adherence in those already infected. These RO1 research interventions target adolescents and young adults ages 12-25 to address adherence and improve health outcomes in youth living with or at risk for HIV.

The first study is the PUSH Study, with Renata Arrington Sanders, MD as the PI at Hopkins and DC CFAR members Lawrence D’Angelo, MD, MPH and Jennafer Kwait, PhD, MHS as local site PIs at Children’s and Whitman-Walker, respectively. There are two phases to the study; during Phase 1, male and transfeminine African American and Latinex youth who are at risk of HIV infection are engaged through Respondent Driven Sampling (RDS) to get HIV tested and then offered the opportunity to refer friends for testing and then be compensated when their friends also come in and complete HIV testing. Phase 2 is a randomized controlled trial (RCT) with the intervention arm utilizing a personal coach and interactive app versus standard of care. Eligible participants are assigned to one of two study arms according to the following: Arm 1] HIV (+) youth with a viral load measurement >200 copies/ml, and Arm 2] HIV at-risk youth not currently taking PrEP. Participants are followed for up to 18 months. Participants randomized to the intervention engage with a personal coach and receive communications via an app which has been downloaded to their phone. Primary aims of the study include viral load suppression (Arm 1) and acceptability and uptake of PrEP (Arm 2). Potential participants can be enrolled at either of the DC sites.

The second study is Tech2Check with Maria Trent, MD, MPH and Allison Agwu, MD as co-PIs at Hopkins and Dr. D’Angelo as PI for the DC component of the study. This study targets HIV infected youth (12-25 years) who are having difficulty maintaining a suppressed viral load. Sixty such youth 60 in DC and another 60 in Baltimore will be enrolled. Participants will be randomized to one of two study arms, the intervention or standard of care arm. Participants in Arm 1 (intervention group) will receive community-based health visits, HIPPA compliant mobile application access including directly observed therapy (DOT) with positive health messages, ART and clinic appointment adherence reminders, and a 3-5 minute behavioral intervention. In Arm 2 (control group), YLHIV will receive standard of care as dictated by their primary HIV provider and clinic standards, communication and appointment reminders as per the standard clinic practice. Participants in both arms will be expected to keep their regularly scheduled clinic visits as dictated by their provider (usually every 3 months). Study participants will be followed for 18 months. Study aims include a comparison of the effectiveness of the Tech2Check intervention versus standard of care, evaluation of the cost-effectiveness of HIV care in the outpatient setting, and the
examination of the sustainability of self-care behavior, adherence, and virologic suppression of youth following the intervention period. Potential participants in this study are only being enrolled at Children’s National.

During both studies, patients remain enrolled with home institution and practice.

Important contact numbers:

PUSH – Children’s National: 202-476-3714; Whitman Walker: 202-939-7622

Tech2Check – Children’s National: 202-476-2722