

# Improving Health Outcomes for Homeless Persons by Providing Temporary Housing with Short Course Treatment of LTBI

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## BACKGROUND

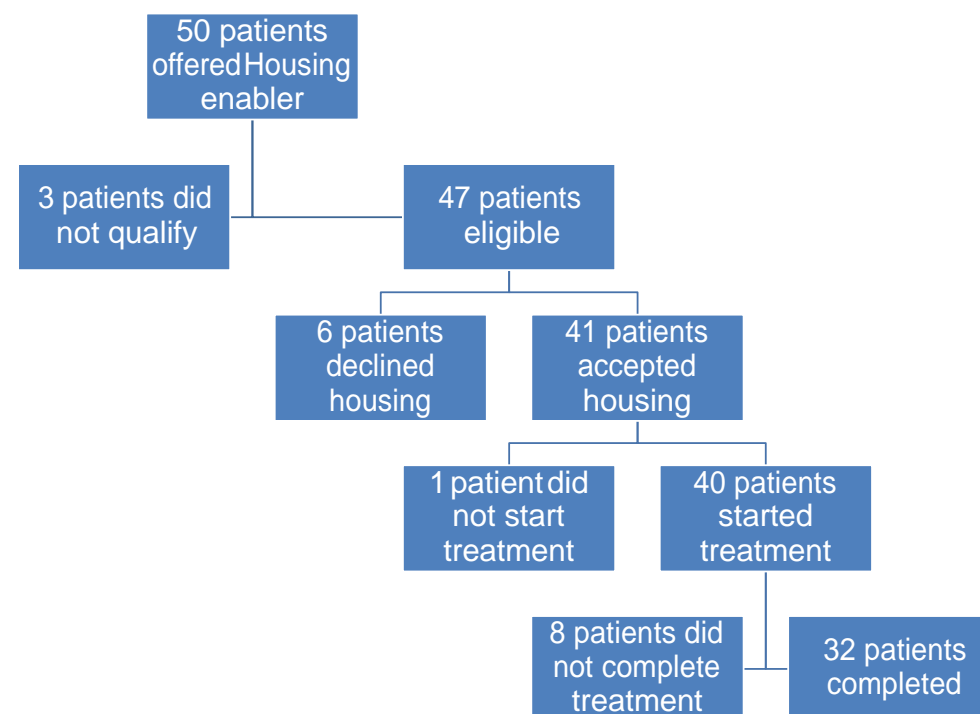
- Treatment of tuberculosis infection (LTBI) is an important step towards addressing health inequities in TB disease and infection within the homeless community.
- Lengthy treatment regimens and the transient nature of this population pose challenges for LTBI treatment.
- In 2015, LAC DPH implemented short course treatment for LTBI with 3HP coupled with gift card incentives (3HP+I) given weekly and at treatment completion<sup>1</sup>.
- 3HP+I led to 54% initiation rate and 57% treatment completion, vs. the historical 36% and 40% initiation and treatment, respectively.
- In April 2016, the TBCP began a new pilot expanding incentives to homeless persons with LTBI: in addition to 3HP+I, temporary housing was now also offered for the duration of treatment (3HP+I/Housing).
- Temporary housing was provided via expansion of the Food Shelter Incentive and Enabler (FSIE) program funded by the CA State.

## METHODS

- The first 50 homeless LTBI patients identified through a shelter TB clearance program conducted at a Skid Row walk-in TB clinic were approached to be part of the study.
- Meal gift cards were given as per protocol and temporary housing was added as an additional incentive for the duration of treatment.
- Patients received 3HP weekly by Directly Observed Therapy (DOT) at the TB clinic.
- Laboratory monitoring and physician evaluations were conducted monthly.

## RESULTS

- Study participants were mostly men (90%) vs women (10%).
- Race/ethnicity breakdown was: 52% black, 30% Hispanic, 14% white, and 4% Asian.
- Median age was 56.



- Of the 47 eligible patients, 41 (87%) accepted 3HP+I/Housing; 6 patients declined due to lack of food services at the housing site (5) and dislike of the location (1).
- Treatment outcomes were evaluated for 40 (85% of eligible) of the 41 patients who received service; 1 patient did not start treatment and was lost to follow up.
- 32 patients (80% of those who started) successfully completed treatment.
- 8 patients did not complete: 7 were lost and 1 stopped treatment against medical advice.
- Those who declined the program initiated treatment while staying at a shelter; all completed successfully.

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SRO Housing Site on Skid Row



TB Satellite Clinic at Leavey Center

## CONCLUSIONS

- Offering temporary housing in addition to gift card incentives increased 3HP treatment initiation among homeless persons with LTBI, from 54% to 85%.
- Treatment completion also improved from 57% to 80%.
- Lack of food at the housing site was the most common deterrent (83% of refusals) to accepting the program.
- Provision of temporary housing holds promise as a strategy to prevent future TB cases among homeless persons with LTBI.
- Limitations of the study included a small sample size and the use of only one housing vendor.
- Future steps include assessments of cost-benefit of housing for LTBI patients, possible expansion to other housing sites, and exploring other food sources for homeless persons with LTBI.

## REFERENCES

1. Ghosh JK, Lan E, Yumul J, Baker B, Chin A, Kerndt PR. *3HP Program Improves Treatment Completion Among Homeless Patients with TB Infection*. Poster presented at: The International Union Against Tuberculosis and Lung Diseases Annual Conference; 2015 Feb 26-28; Vancouver, BC, Canada.

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