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Primary Research Interest:	Internal Medicine
Description of Research:	The ~31,000 Veterans with HIV use significantly more healthcare and have up to 2x higher risk of atherosclerotic cardiovascular disease (ASCVD) compared to uninfected Veterans. Once people obtain remission, providers should focus on preventing ASCVD. We will focus on reducing ASCVD risk among people with HIV. The study will be conducted in 4 clinics among HIV+ veterans (n=300) on suppressive ART with confirmed SBP >140 mmHg, stratified by clinic site and hyperlipidemia status and randomized 1:1 to intervention vs. education control. The proposed intervention has the potential to reduce ASCVD events in this population by more than a quarter and meet VA strategic priorities of: 1) improve timeliness of services; 2) focus resources more efficiently as well as address HSR&D research priorities: 1) patient centered care, care management, and health promotion; 2) healthcare access; 3) aging; 4) virtual care. Primary outcome will be the difference in 12-month systolic BP in the intervention arm vs control. Secondary outcome will be 12-month difference in non-HDL cholesterol. We will use a mixed-methods design to evaluate fidelity, dose delivered/received, reach, recruitment, and context of the intervention. This study will be lead by Hayden Bosworth, PhD at Durham VA.
Relevance to VA:	This study is a nurse-led intervention to extend the Veteran HIV treatment cascade for cardiovascular disease prevention (V-EXTRA-CVD)