

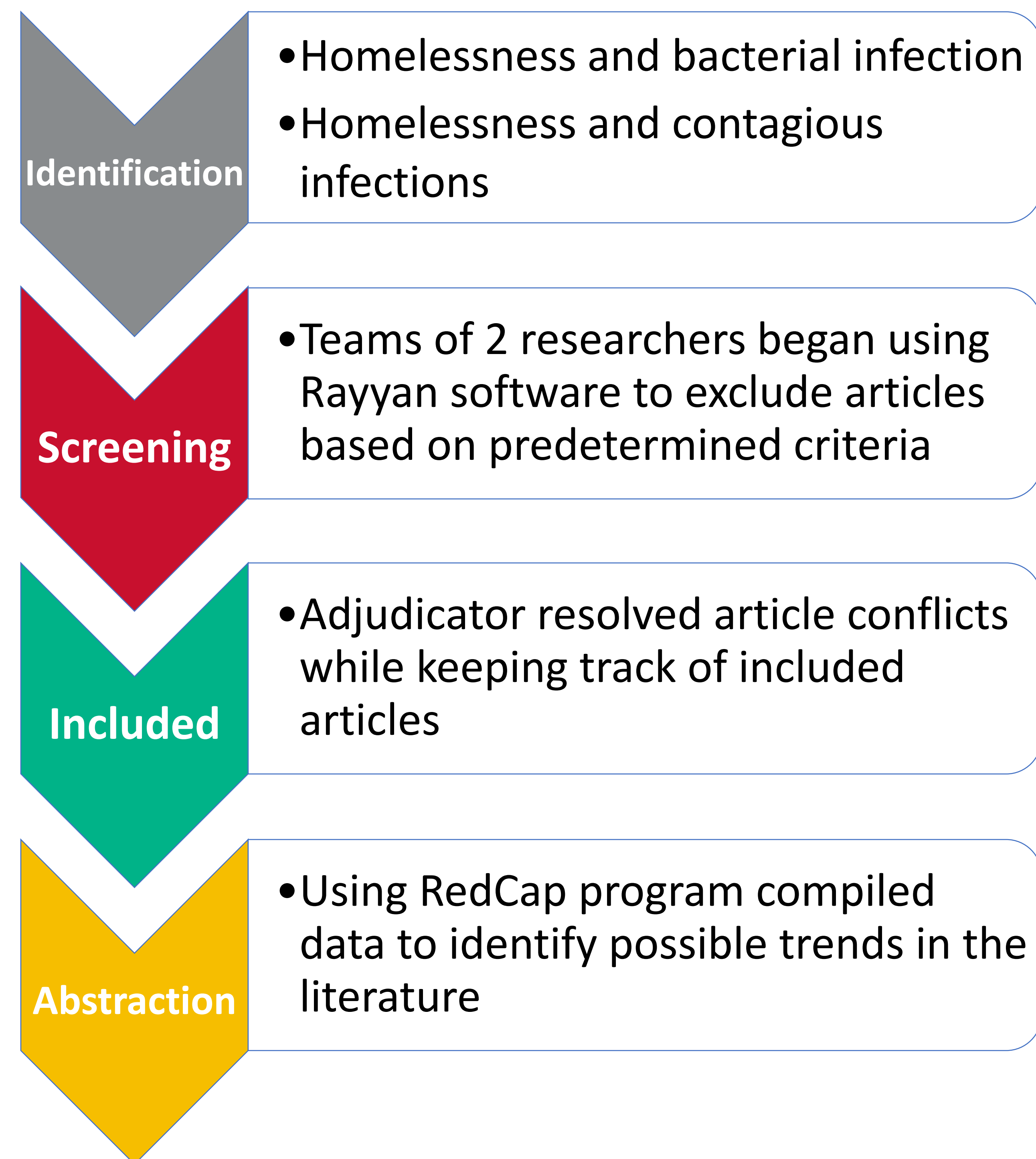
## BACKGROUND

“Homelessness” has a variety of definitions that results in a lack of understanding of how severe one’s living conditions may be without proper housing. To effectively understand the complexity of homelessness, Al-Shakarchi’s (2020) review established that homelessness is correlated with poor cardiovascular health and early mortality outcomes. However, the exact factors are still unknown, and require further research. Therefore our present review uses mediators to better characterize the relationship between homelessness and infection due to increased exposure to risk factors.

## AIM

To deconstruct the label of homelessness into environmental and clinical exposures associated with the experience, including infection risk.

## METHODOLOGY



## CONCLUSION

Search 8 yielded articles mainly discussing wound infection, indicating an elevated risk of readmissions for PEH. This population may also face increased risk of parasitic and bacterial infection due to more frequent exposure to environmental risks. The majority of the eligible evidence consistently highlights a trend between homelessness increased HIV infection. While there were less studies on other infections such as HCV or HBV, there was still an elevated risk seen from a smaller number of published studies.

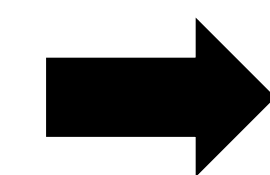
## REFERENCES

- Al-Shakarchi, N. J., Evans, H., Luchenski, S. A., Story, A., & Banerjee, A. (2020). Cardiovascular disease in homeless versus housed individuals: A systematic review of observational and Interventional Studies. *Heart*, 106(19), 1483–1488.
- Baggett, T. P., Liauw, S. S., & Hwang, S. W. (2018). Cardiovascular disease and homelessness. *Journal of the American College of Cardiology*, 71(22), 2585–2597.

## RESULTS

### Identification

**Records Identified through PubMed Search 8**  
k = 190



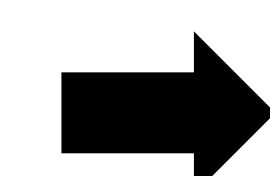
**Search 8 Exclusions**

1. Year (k = 16)	5. Editorial/Commentary (k = 4)
2. Non-English (k = 9)	6. Review (k = 2)
3. Non-Human (k= 113)	7. Case Reports (k = 6)
4. Age (k = 5)	8. Not Relevant (k = 10)



**Records Included**  
Unknown Pathogen (k = 2)  
MRSA (k = 1)  
Parasite (k = 1)

**Records Identified through PubMed Search 9**  
k = 2,809



**Search 9 Exclusions**

1. Year (k = 605)	5. Editorial/Commentary (k = 164)
2. Non-English (k = 49)	6. Review (k = 109)
3. Non-Human (k= 35)	7. Case Reports (k = 27)
4. Age (k = 401)	8. Not Relevant (k = 1374)



**Records Included**  
HIV (k = 28)  
HCV (k = 7)  
HBV (k = 1)  
TB (k = 1)

