

Mind the gap: monitoring continuum of care for HIV in Slovenia

Author: Miran Šolinc, Association ŠKUC, Ljubljana, Slovenia

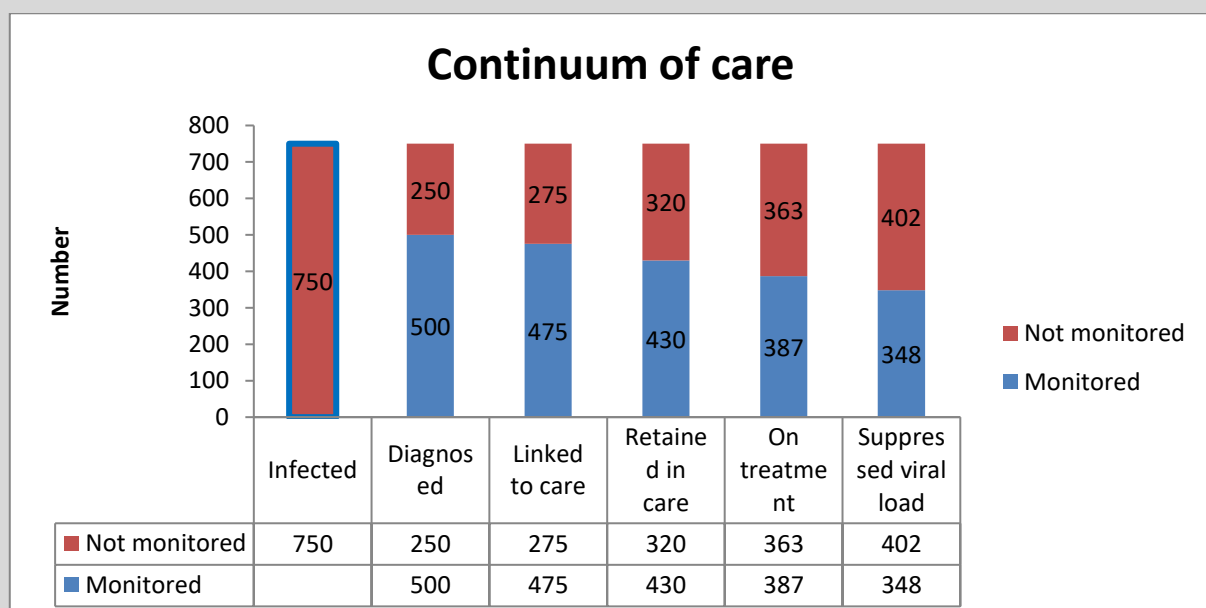
Contact: miran.solinc@amis.net

Introduction: An increase in new HIV infections has been reported among men who have sex with men (MSM) in Slovenia since 2006. Slovenia is a low-level HIV epidemic country. Less than one individual per 1000 inhabitants is living with HIV. Late presenters are a big concern.

Objectives: The aim was to find out gaps along the process in continuum of care to be able to follow and reach the goal 90-90-90 in near future.

Methods: The research was conducted during 2016 and consisted of data collection from different resources for September 2014. Analysis for treatment cascade construction with six columns was made. We used ECDC modelling tool for calculation of the first column - number of infected with HIV.

Results: The analysis has shown that 34% of infected (N-750) is undiagnosed (N-250). This gives the biggest gap, a breakpoint in the continuum of care between first two columns. The main reasons for that are stigma and other barriers to testing which needs further research. All other gaps between columns are much smaller and quite exemplary. Number of diagnosed is 500 and number of linked to care is 475 which gives the 5% drop between second and third column. Number of retained in care is 430 which gives 10% drop. Number of people on treatment is 387, which gives 10% drop. And finally the number of people with suppressed viral load is 348, which gives 10% drop. We lose 54% patients from the beginning to the end of the care, from being infected to the stage having suppressed viral load.



Graph 1: Continuum of care in Slovenia

Conclusions: The first treatment cascade for Slovenia was developed with help of the ECDC modelling tool. More attention is needed to minimize the first gap with testing more people and with more testing options. With these efforts we estimate that the goal 90-90-90 could be reached in next five years. With focused and combined prevention tools we have to continue preventing new infections.