EuroTEST Launches New Guidance to Make HIV and Hepatitis Testing Routine in Emergency Departments

Guidance launched at HepHIV2026 to support wider implementation of routine blood-borne virus testing across Europe

Europe continues to miss opportunities for early diagnosis of HIV and viral hepatitis. To help address this gap, EuroTEST is launching a new public health guidance on blood-borne virus (BBV i.e. HIV, Hepatitis B (HBV) and Hepatitis C (HCV)) opt-out testing in Emergency Departments (EDs) at HepHIV2026.

Undiagnosed HIV, Hepatitis B and Hepatitis C continue to drive preventable illness, deaths and onward transmission across Europe. Achieving the global goals of ending HIV transmission and eliminating viral hepatitis as a public health threat will require innovative approaches that expand access to testing and care.

Making testing a routine part of healthcare
Despite advances in treatment and prevention, HIV testing remains exceptionalised in many parts of Europe. Complex consent requirements continue to pose barriers to testing, leading to missed opportunities for diagnosis and timely linkage to care [1].

"Testing should be as routine as measuring blood pressure. Opt-out testing in emergency departments is one of the most effective ways to expand access, reduce stigma and ensure that people living with HIV, hepatitis B or hepatitis C are diagnosed and linked to care as early as possible." Stephen O'Hare, HepHIV2026 Co-chair and Executive Director, HIV Ireland

Reaching people who might otherwise be missed
Emergency Departments provide open-access care to large and diverse patient populations and often serve as the only point of contact with healthcare services for vulnerable and underserved populations.

"Emergency departments are often the front door to healthcare for people who face barriers to accessing services elsewhere. Routine opt-out testing creates a valuable opportunity to identify HIV and viral hepatitis earlier, while also reconnecting people who have fallen out of care."
Jürgen Rockstroh, HepHIV2026 Co-chair and Professor, University of Bonn

Routine opt-out testing for bloodborne virus, where patients are informed that testing will be performed unless they decline, has been shown in European programmes to be highly effective in increasing testing uptake in emergency settings and identifying previously undiagnosed infections [2-5].

Practical Guidance for Implementation
Developed with input from clinicians, public health specialists, community representatives and European agencies, the EuroTEST guidance offers a practical framework for implementing and

expanding BBV opt-out testing in EDs across diverse healthcare settings including key recommendations, case studies, stakeholder insights, and practical resources to support implementation across diverse health systems.

For more information about EuroTEST, visit https://eurotest.org

EuroTEST Practical implementation guidance for BBV opt-out testing in Emergency Departments in Europe: https://eurotest.org/testing-tools/bbv-opt-out-testing-in-emergency-departments/

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Notes to editor

About EuroTEST
The EuroTEST initiative began in 2007 as a way to bring attention to the importance of earlier diagnosis and care for people living with HIV. Although the initiative started with a HIV focus, the growing evidence has shown that HIV, Hepatitis B and Hepatitis C share overlaps in the modes of transmission and affect common key populations therefore, the initiative made a concerted effort in 2013 to also prioritise hepatitis. Since its initiation, EuroTEST has built a European platform where representatives from civil society, policy institutions, health care and European public health institutions work toward influencing policy, knowledge sharing and building the evidence-base to support earlier diagnosis and care of HIV and viral hepatitis across Europe. The re-naming from HIV in Europe to EuroTEST in 2019 was to reflect the growing interest to prioritise testing for infectious diseases that disproportionately affect key population groups who often experience stigma and discrimination. EuroTEST supports initiatives that utilise an integrated approach for testing interventions with the aim of increasing testing coverage for key groups and reducing late diagnosis.

HepHIV 2026 Dublin Conference
With 71 abstracts representing 24 countries to be presented during the two-day event, the Conference will feature the latest evidence from research and programmes throughout Europe, present lessons learned in the Region and devise how to address the challenges ahead.

The HepHIV 2026 Dublin Conference scientific programme showcases research and interventions

throughout Europe that are effectively addressing multiple infectious diseases and are getting more people tested and into treatment

HIV and Viral Hepatitis in Europe:

- In 2023, an estimated 791,531 people in the WHO European Region were living with transmissible HIV. Nearly half were unaware of their infection, while more than a third had been diagnosed but were not receiving treatment [6].
- For hepatitis B (HBV) and hepatitis C (HCV), only around 30% and 40% respectively are estimated to have been diagnosed in the EU/EEA [7].
- More than half of new HIV diagnoses occur at a late stage of infection [8].

Key messages

- Testing for HIV and viral hepatitis should become a routine part of healthcare.
- Emergency Departments provide an effective opportunity to reach people who may otherwise be missed.
- Opt-out testing can increase diagnoses, reduce stigma and improve linkage to care.
- The new EuroTEST guidance for BBV opt-out testing in emergency departments provides practical support for implementation across Europe.

References

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