

How the IC-guided testing interventions have impacted on clinics' HIV testing rates: comparing baseline and now

Ann Sullivan

Chelsea and Westminster Hospital, London

Brussels, 19th September 2017



This work is part of the Optimising testing and linkage to care for HIV across Europe which has received funding from the European Union within the framework of the Health Programme

OptTEST: HIV Indicator Conditions



Test Indicator Conditions: Hepatitis B and C

Pneumonia

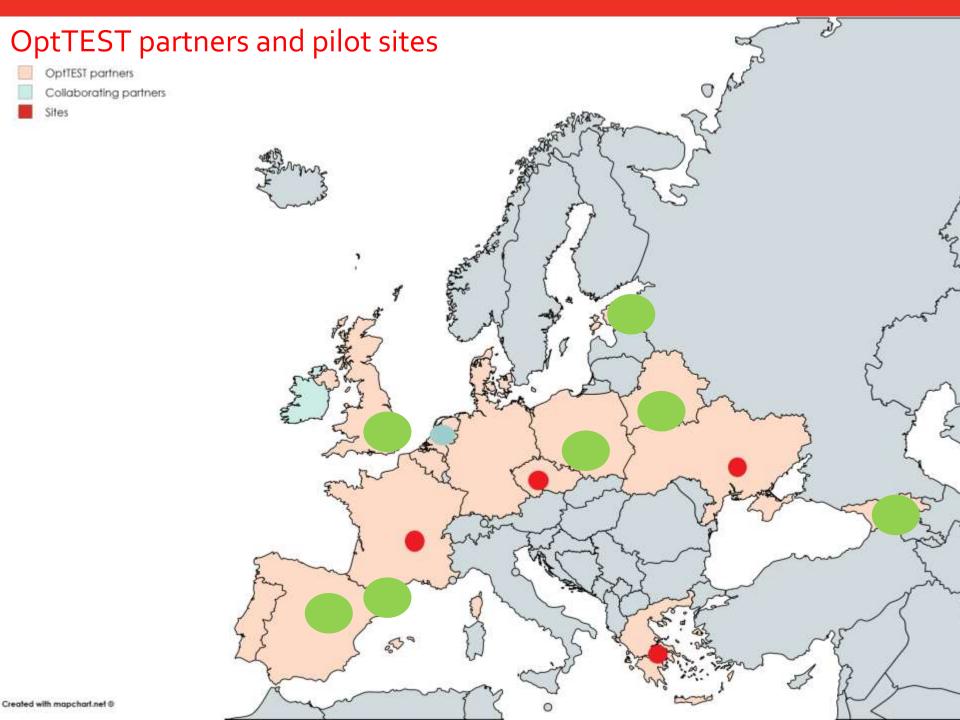
Infectious Mononucleosis-like syndrome

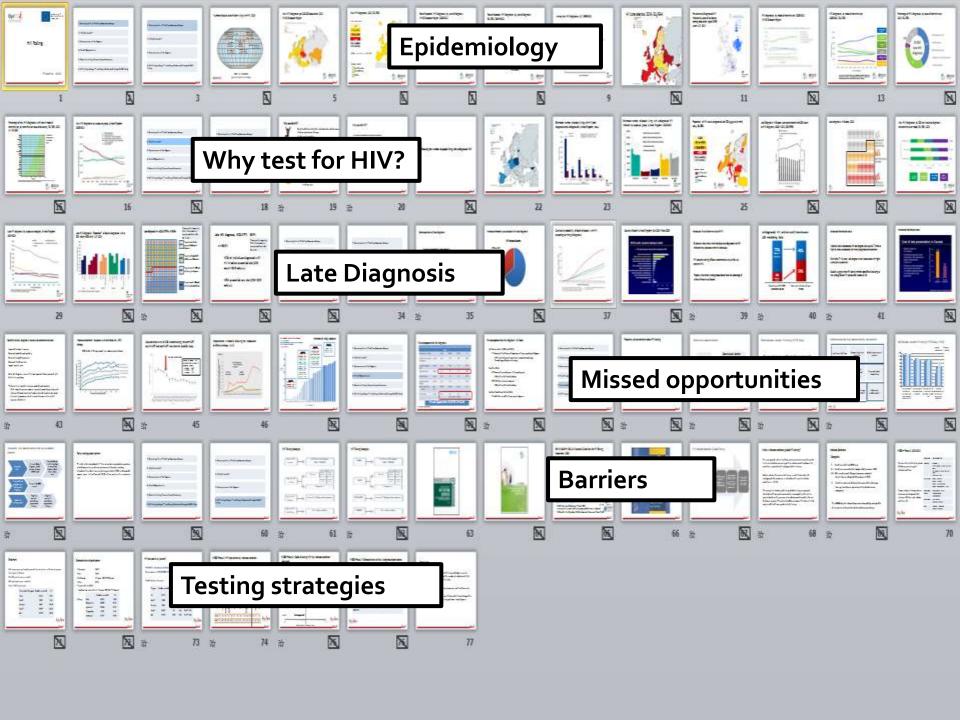
Pilot sites: Czech Republic, Estonia, France, Greece,

Poland, Spain and UK

Shell project countries: Georgia, Ukraine and Belarus

Associate Partners: Netherlands, Ireland





Interactive service design module



PLANNING

There are different ways to offer an HIV test. HOW will the HIV test be offered to your patients?

Will your offer of an HIV test be presented to the patient as "Opt-out" or "Routine offer"?

- Opt-out: The patient is notified that the HIV test is always parformed as part
 of routine investigations and he/she needs to inform the staff if he/she
 chooses not to test.
- Routinge offer: The patient is offered an HIV test and he/she is required to agree to test.

HIV testing is voluntary - the patient should provide informed consent. Is verbal consent sufficient in your setting, or are there requirements to document a patient's consent? If so, where and by whom?

Now please answer the questions on the right

Offering an HIV test

Test offer:

- Routine offer
- Opt-out

Are you required to document consent?

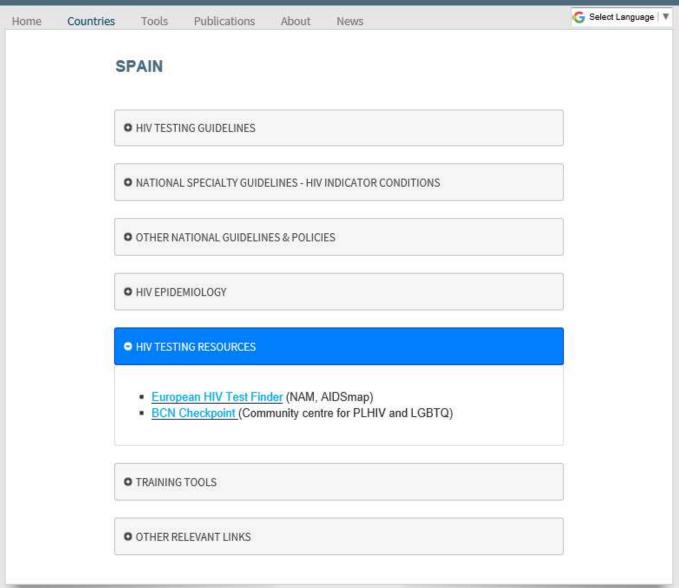
- Yes*
- No
- ODon't know

HIV testing in indicator conditions



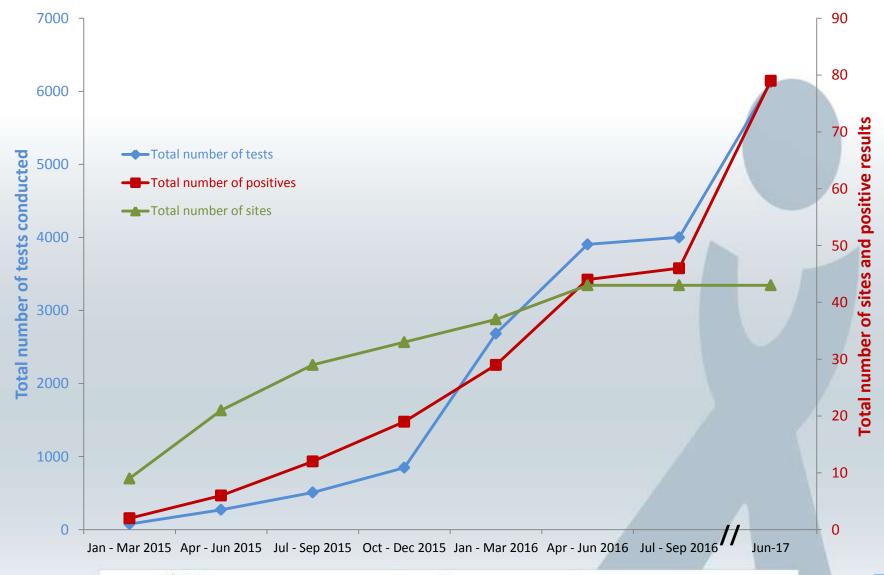






OptTEST results

































OptTEST HIV test outcomes



HIV tests 5839

Reactive tests 78

HIV positivity 1.33% [95%Cl 1.07 – 1.66]

Linkage to care data

Data available 54

Linked to care 44 80%

Not linked 10 4 PWID (2 of whom also new HCV)

2 foreign born; left the country

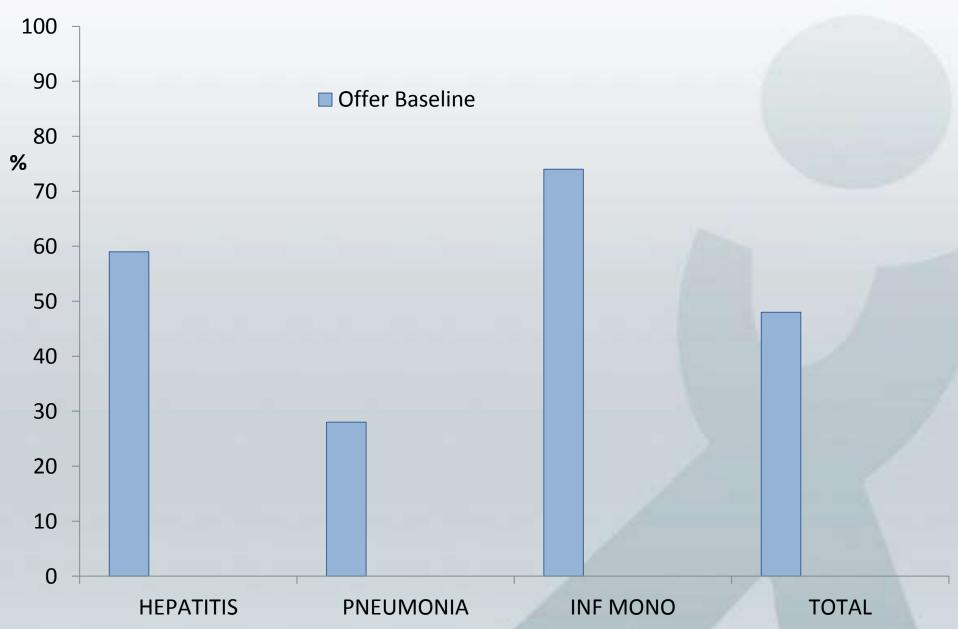
Median CD4 cell count 326 cells/uL (range 4-1041)

Late Diagnosis 56%

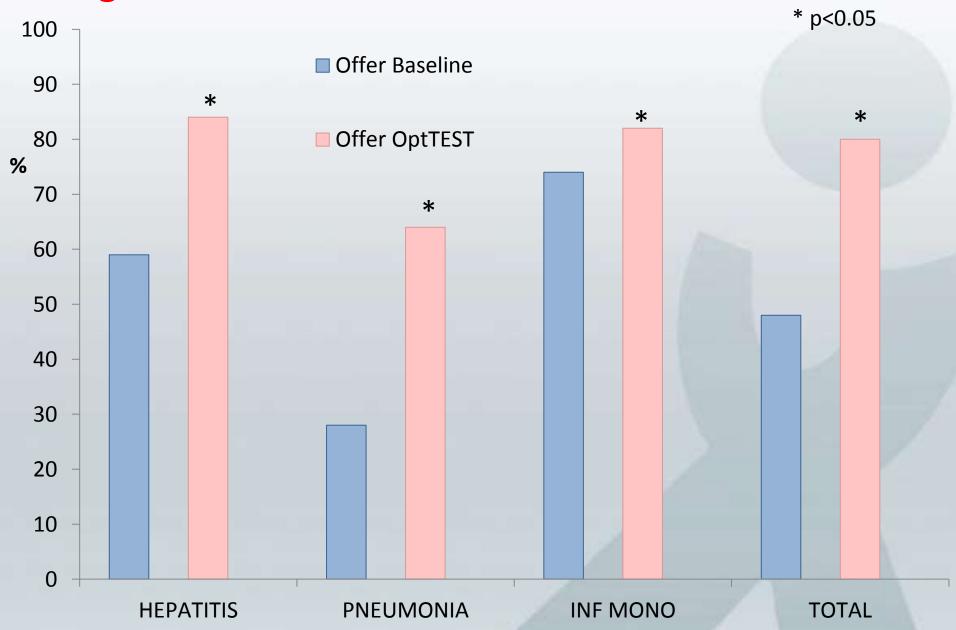
Additionally:

3 known positive (not engaged with care a time of testing)

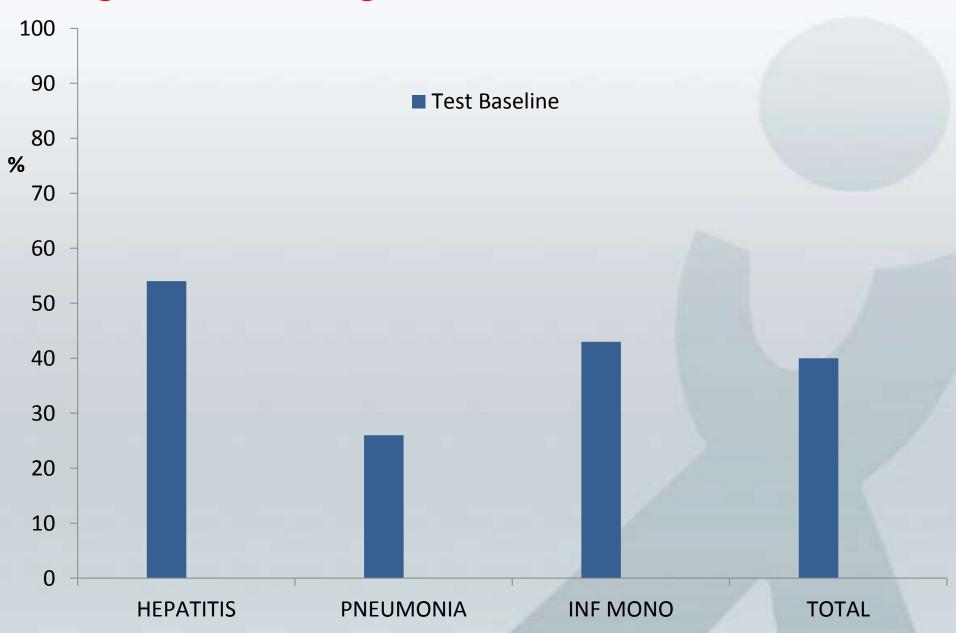
Change in HIV test offer

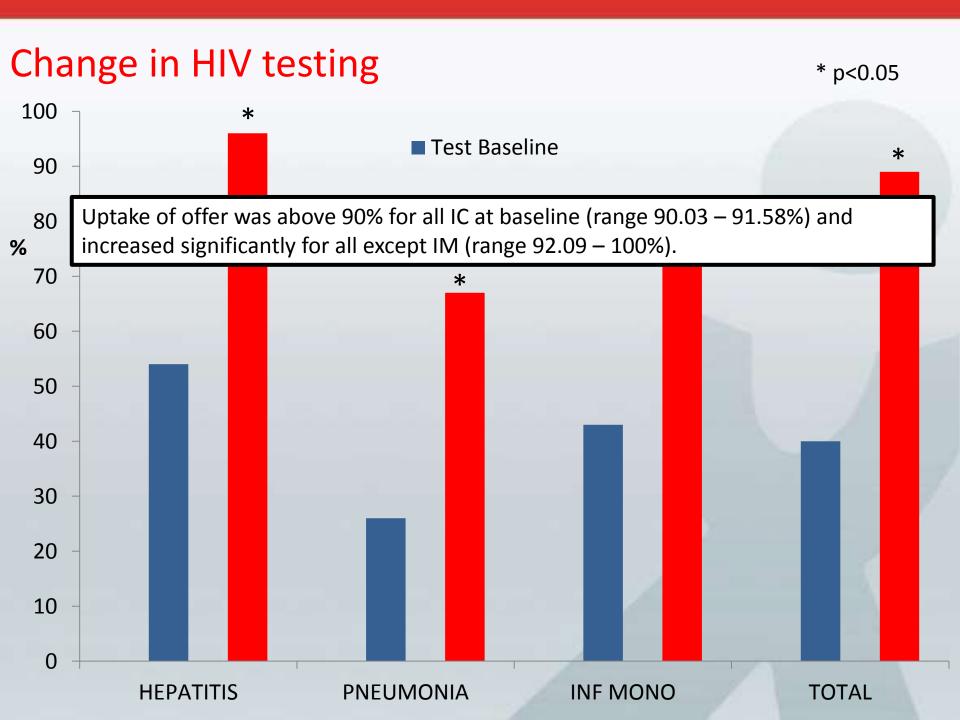


Change in HIV test offer



Change in HIV testing



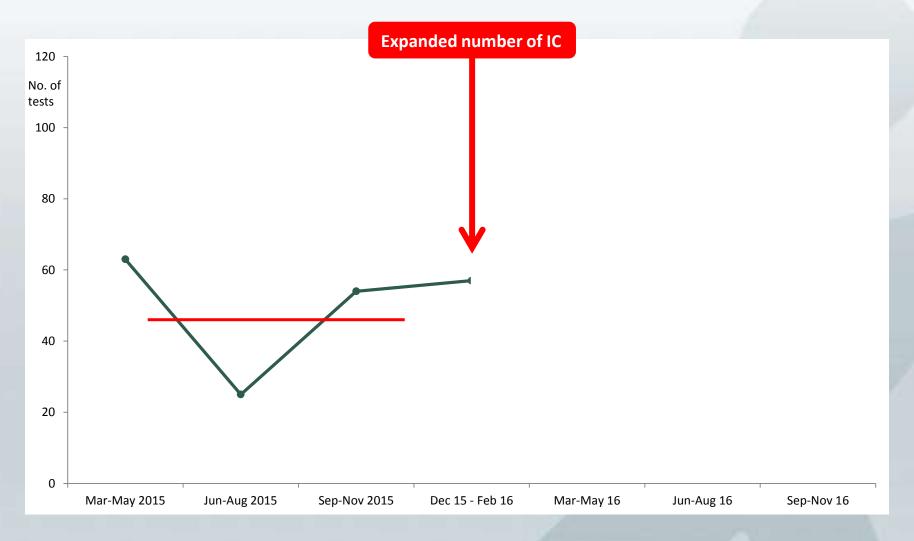


Change in HIV prevalence

	BEFORE		OptTEST		
Indicator Condition	HIV +VE (num/denom)	% [95%CI]	HIV+VE (num/denom)	% [95%CI]	р
Hepatitis	20/662	3.02 1.91-4.55	20/3681	0.54 0.34-0.82	<0.05
Pneumonia	11/322	3.41 1.81-5.56	30/1425	2.11 1.45-2.95	NS
INF MONO	17/310	5.48 3.34-8.46	28/733	3.82 2.60-5.40	NS
Total	48/1294	3.70 2.78 - 4.85	78/5839	1.33 1.07-1.66	<0.05

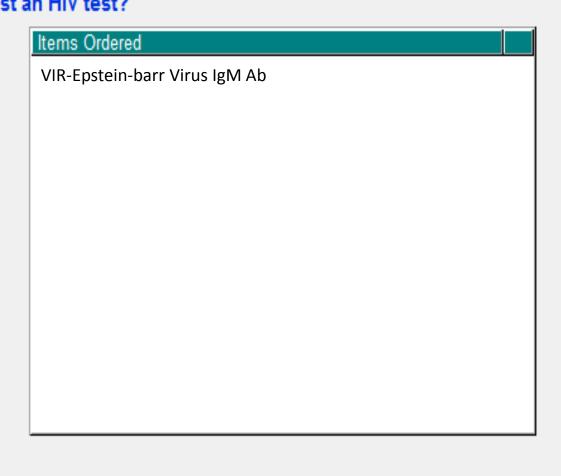
HIV test offer rate: Estonia Primary Care sites





National Guidelines recommend an HIV test should be part of the investigation of specific medical conditions. The tests you have already requested suggest an HIV test may be indicated.

Would you like to request an HIV test?

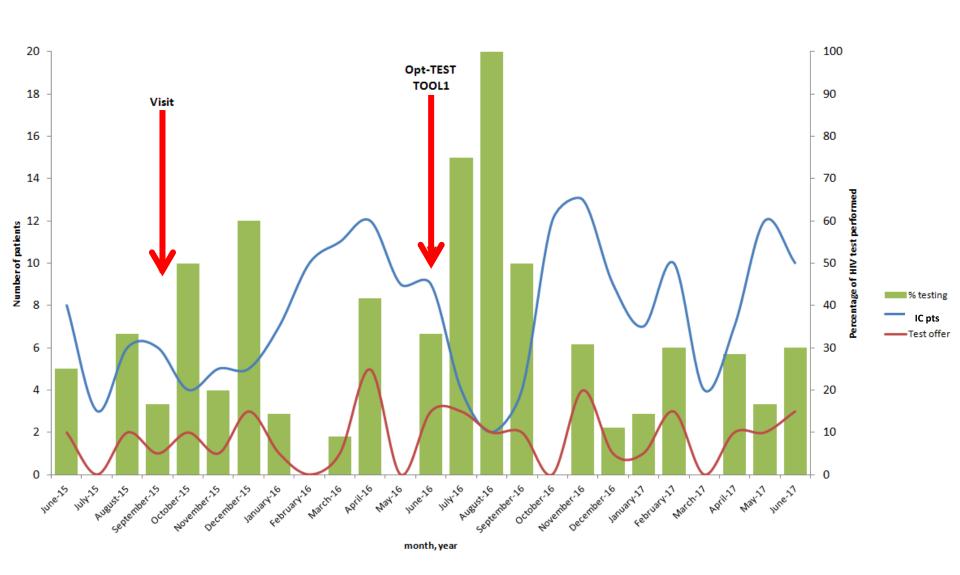


Yes - Request HIV test

No - Backout

OptTEST HIV testing at 2 Catalan sites: 3 ICs

June 2015 - June 2017



The website (www.opttest.eu)







Home Countries

Publications Tools

About

News

Calendar



Optimising testing and linkage to care for HIV



About OptTEST

Newsletters

Presentations

News:

OptTEST Newsletter #9

Read about OptTEST national Continuum of Care meetings in Greece and Poland, national cost-effectiveness seminars in France, Spain and Estonia and other activities and upcoming events here.



Inserm

















Cost-effectiveness

WP6 presented results at a national level meeting in Estonia on the 19th December. The meeeting took place in the Ministry of Social Affairs. The aim was to introduce the methods and





























