

Improving HIV testing within African Communities in the UK



The African HIV Research Forum

Why the interest in promoting HIV testing ?

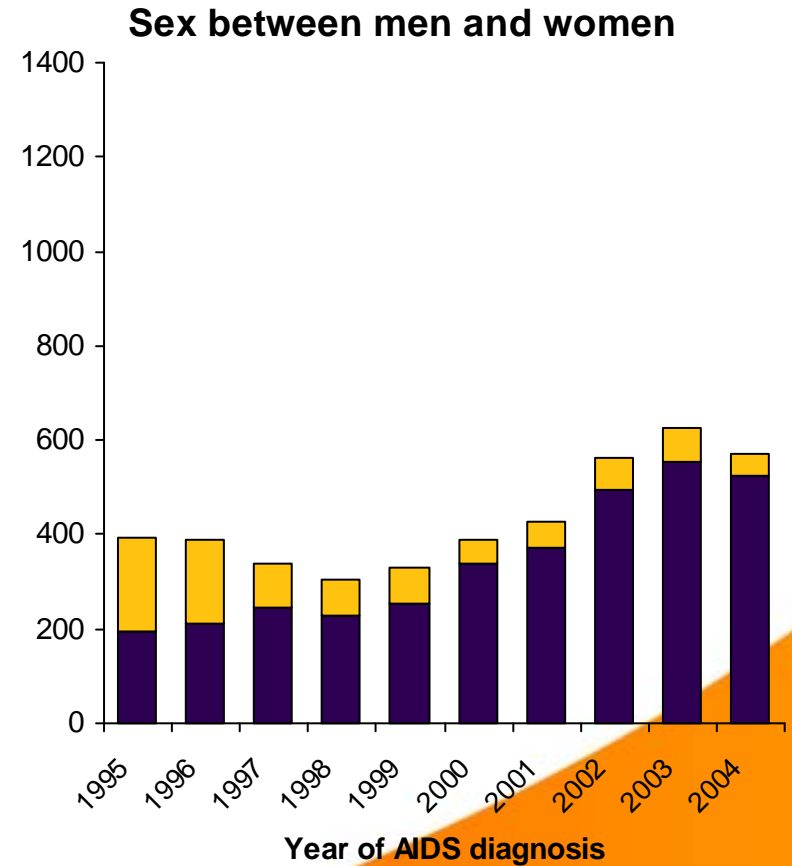
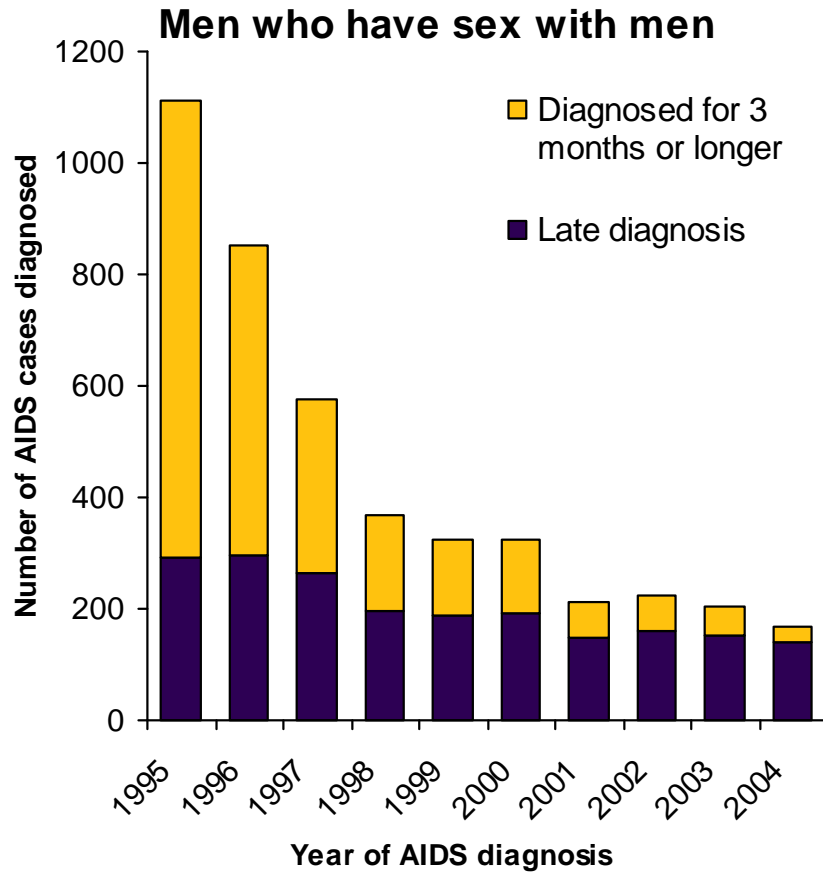
- Late presentation of HIV illnesses
- Missed opportunities for testing in primary care and other settings
- 30- 50 % unaware of their HIV status
- Those aware of status are *68% less likely to have UPSI
- Rise in positive prevention

*Marks G, et al JAIDS 200539:446



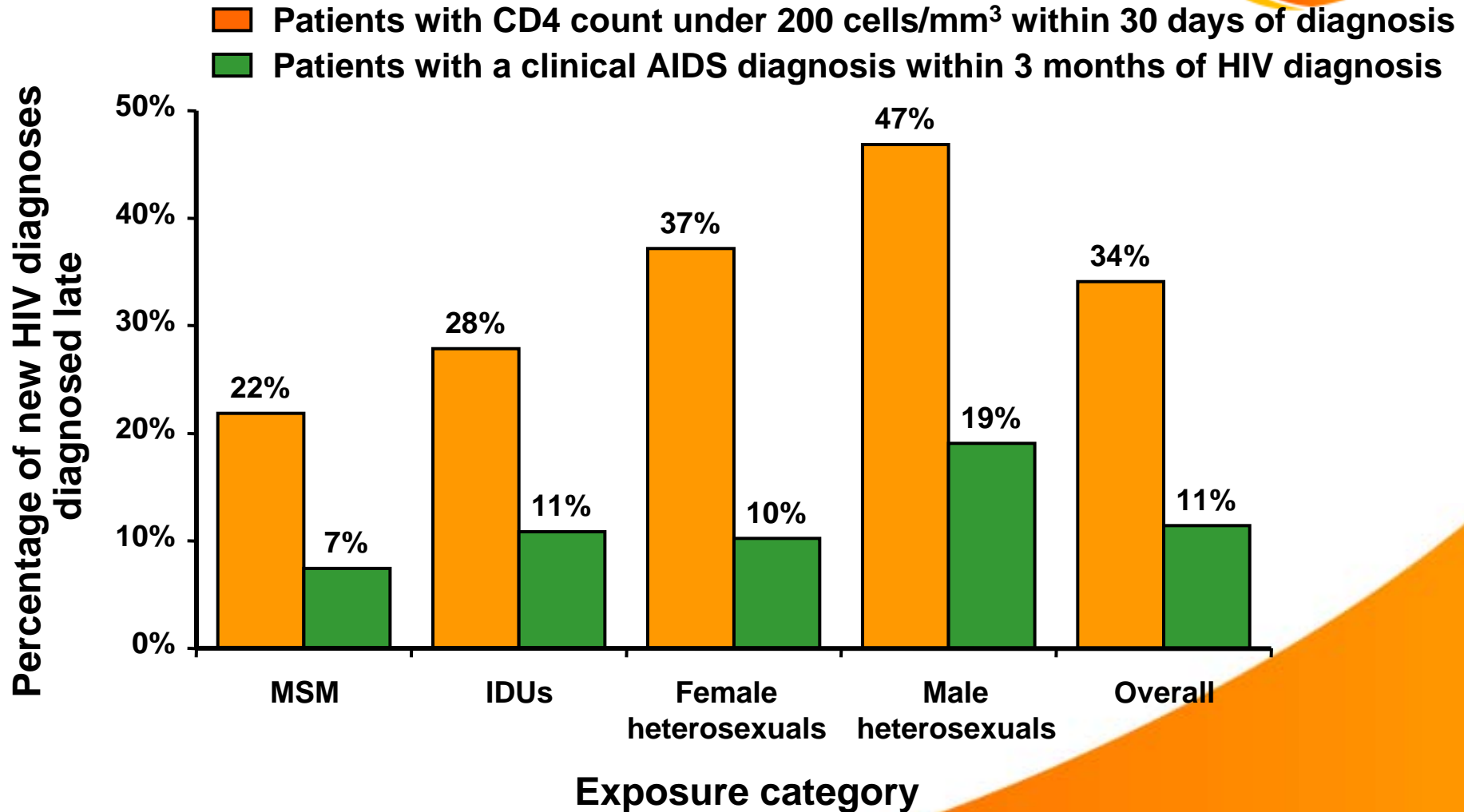
Evidence for late diagnosis in heterosexual men & women, and MSM – AIDS cases

Late diagnosis is defined here as an interval of less than 3 months between HIV diagnosis and AIDS

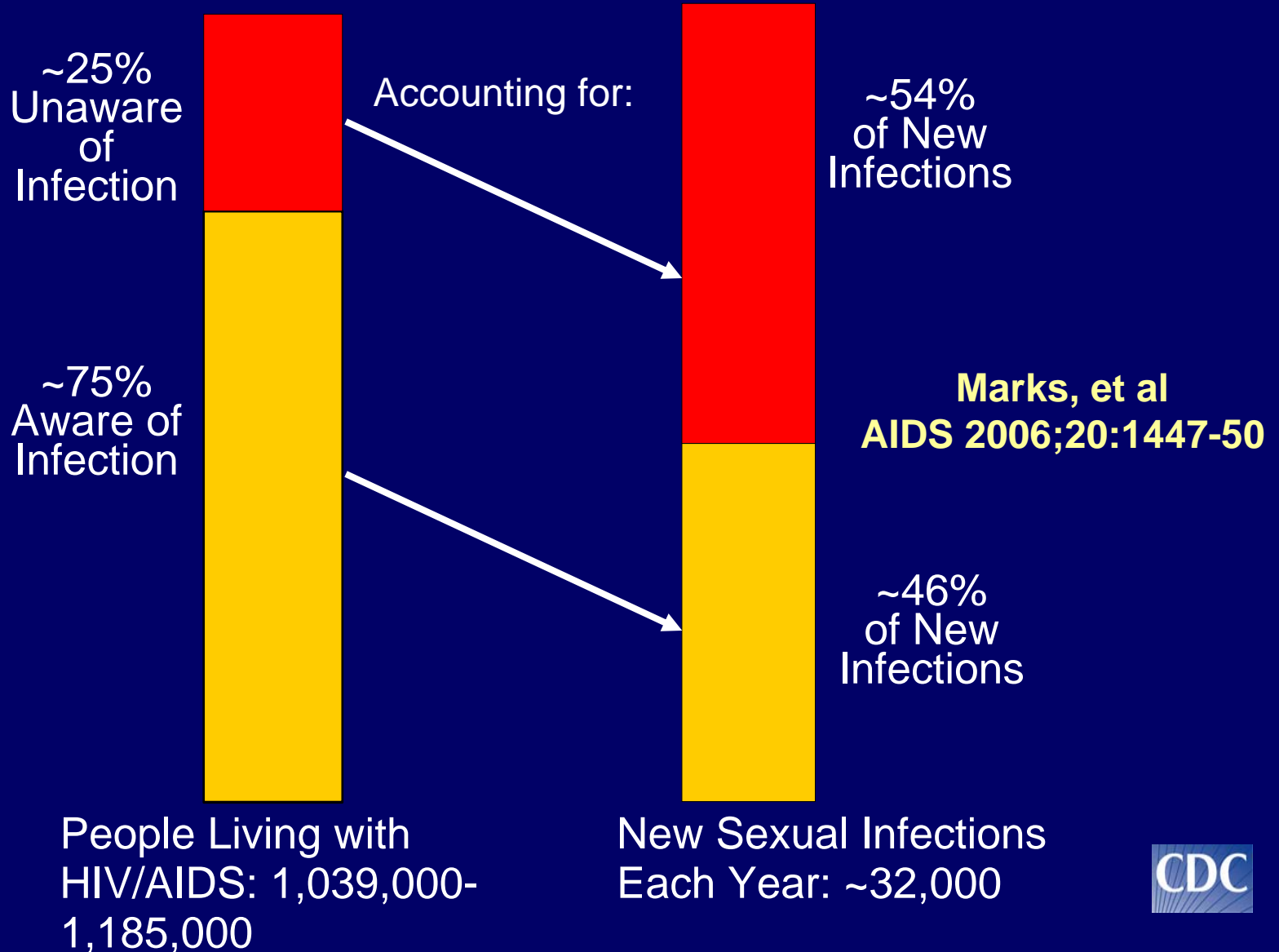


Data source: HIV/AIDS reports. Reports received by the end of September 2005.

Late diagnoses by exposure category



Awareness of Serostatus Among People with HIV and Estimates of Transmission



Key new HIV testing initiatives

- CDC – HIV testing in healthcare settings-2006

- WHO in 2007

(http://whqlibdoc.who.int/publications/2007/9789241595568_eng.pdf)

- European Union

- Department of Health – Chief Medical Officer

(<http://www.info.doh.gov.uk/doh/embroadcast.nsf/vwDiscussionAll/EE0FA479BAA64A1B80257355003DFB47>)



Terminology - I

- **Diagnostic testing:** performing an HIV test based on clinical signs or symptoms
- **Screening:** performing an HIV test for all persons in a defined population
- **Targeted testing:** performing an HIV test on subpopulations of persons at higher risk based on behavioral, clinical or demographic characteristics
- **Opt-out screening:** performing an HIV test after notifying the patient that the test will be done; **consent is inferred** unless the patient declines
- **Opt in testing:** performing an HIV test only after explicit consent is given (written or verbal)



Terminology - II

- ***Informed consent:*** process of communication between patient and provider through which the patient can participate in choosing whether or not to undergo HIV testing
- ***HIV prevention counseling:*** interactive process to assess risk, recognize risky behaviors, and develop a plan to take steps that will reduce risks



CMO letter

- In order to convince Primary Care Trusts and commissioners to invest in alternative, community-based HIV/STI testing services (to complement general practice and GUM), evidence was needed of what worked in the UK setting.
- ***Further pilot initiatives should be funded and evaluated to determine whether new testing venues serve an unmet need/under-served population.***
- EAGA would encourage the MRC (and other funders) to prioritise research along these lines.

