



IMPROVING THE HIV TESTING CASCADE: IMPLEMENTING HIV TEAMS TO SUPPORT HIV INDICATOR CONDITION-GUIDED TESTING IN GENERAL PRACTICE IN THE NETHERLANDS

On behalf of the #aware.hiv project group

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CONCLUSIONS

- This pilot **indicates** that a **significant gap** exist between the **positive attitudes** of **general practitioners and patients** on **HIV testing** and the **actual HIV indicator condition-guided testing adequacy**
- Complementary interventions**, such as integrated HIV testing alerts, will likely **improve HIV testing rates** with **general practitioners** in this **low HIV prevalence setting**

BACKGROUND

- Many patients newly diagnosed with HIV are **late presenters**
- Multiple **missed testing opportunities** prior to HIV diagnosis
- HIV indicator condition-guided testing** facilitates a **timelier diagnosis** of HIV
- This pilot study aimed to **evaluate the prevalence, diagnostic gaps and opportunities** of **HIV indicator condition-guided testing** at **general practitioners** in a, for the Netherlands, high prevalence setting

RESULTS

- A total of **377 HIV indicator conditions**, including 238 sexually transmitted infections, were identified on **54,248 screened** appointments
- HIV indicator condition **prevalence 0.7%** (95% CI 0.62% - 0.77%)

Table 1	Reported n, (%)	Test offered ² n, (%)	Test performed ² n, (%)	p-value ³
Total	377 (100)	118 (31.3)	97 (25.7)	<0.001
Sexually transmitted infections	238 (63.1)	91 (38.2)	72 (30.2)	<0.001
Non-sexually transmitted infections (all other HIV ¹ indicator conditions)	139 (36.9)	27 (19.4)	25 (18.0)	<0.001
Cervical dysplasia	4 (1.1)	0 (0.0)	0 (0.0)	
Community-acquired pneumonia	25 (6.6)	0 (0.0)	0 (0.0)	
Herpes zoster	47 (12.5)	4 (8.5)	3 (6.4)	
Mononucleosis-like illness	2 (0.5)	1 (50.0)	1 (50.0)	
Seborrheic dermatitis/exanthema	9 (2.4)	4 (44.4)	3 (33.3)	
Severe or atypical psoriasis	4 (1.1)	1 (25.0)	1 (25.0)	
Unexplained chronic diarrhea	3 (0.8)	0 (0.0)	0 (0.0)	
Unexplained fever	0 (0.0)	0 (0.0)	0 (0.0)	
Unexplained leukocytopenia	4 (1.1)	1 (25.0)	1 (25.0)	
Unexplained lymphadenopathy	8 (2.1)	3 (37.5)	3 (37.5)	
Unexplained oral candidiasis	13 (3.4)	3 (23.1)	3 (23.1)	
Unexplained thrombocytopenia	2 (0.5)	0 (0.0)	0 (0.0)	
Unexplained weight loss	18 (4.8)	10 (55.6)	10 (55.6)	

¹HIV: Human Immunodeficiency Virus.

²Percentages calculated based on reported total of HIV indicator conditions.

³Calculation based on comparison between observed HIV test rate and the assumed baseline HIV test uptake of 50% (z-test)

METHODS

- An **ongoing prospective observational study** in 14 general practices on 3 locations in the Rotterdam region,
- An **HIV team** was set up, consisting of **HIV physicians** and **general practitioner ambassadors** from each location
- 14 preselected** common **HIV indicator conditions**
- General practitioners were informed on the **relevance of HIV indicator condition-guided testing** and received free **point-of-care HIV tests**
- Main endpoint: **HIV testing rate adequacy** of identified **HIV indicator conditions**

- Overall **HIV testing rate** of HIV indicator conditions is **25.7%**
- HIV testing rate** considerably **lower** (p<0.001) than expected
- All patients tested **negative** for HIV.
- Major deficiencies in HIV testing adequacy** were **observed** in all 14 HIV indicator conditions (*Table 1*)
- Sexually transmitted infections** having a **30.2%** (p<0.001) testing rate and **unexplained weight loss** having the highest testing rate (**55.6%**)
- Most common reasons not to test** for HIV: patient was **unreachable** (n=7) and **no-show on follow-up** appointment (n=4)
- Questionnaires** performed amongst **participating general practitioners** and in a **subset of patients** who received point-of-care HIV testing **showed near universal positive attitudes** towards **HIV testing** and the implementation of a more **proactive HIV testing strategy**
- General practitioners** unanimously **perceived benefits** for **patient care**