



# Late HIV diagnosis in a low- and middle-income country: opportunities and challenges ahead

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# **Background**

Despite the worldwide decrease in new HIV diagnoses in the last decade, the proportion of people first presenting with late HIV diagnosis (LD) and advanced HIV-related disease (AHD) remains stable.

In Argentina, 43.8% of the new HIV cases in 2021-2022 were late diagnosis; and by 2017 67.8% of PLHIV on ART were virally suppressed.

Aim of this study: describe the demographic and clinical characteristics at the time of diagnosis of a cohort of people with late HIV diagnosis, and temporal variations in the frequency of late diagnosis and advanced HIV disease. Analyze the HIV continuum of care at one year of follow-up.

## Materials and methods

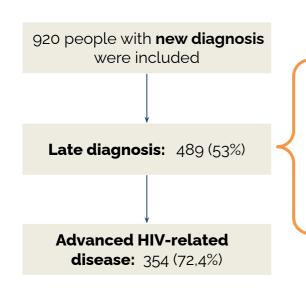
**Retrospective cohort study** 

**Setting**: Hospital General de Agudos "Dr. Juan A Fernandez" **Population**: people > 16 years of age with new confirmed HIV diagnosis

Period: between January 2016 - December 2022

Late diagnosis: CD4 count <350 cells/uL and/or events of WHO clinical stages 3-4
Advanced HIV-related disease: CD4 count <200 cells/uL and/or events of WHO clinical stages 3-4
Continuum of care outcomes were analysed as per PAHO Monitoring Framework (2014).

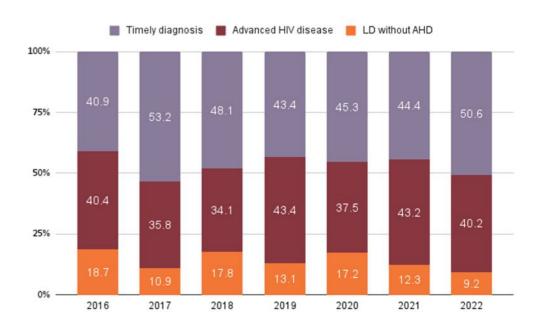
### **Results**



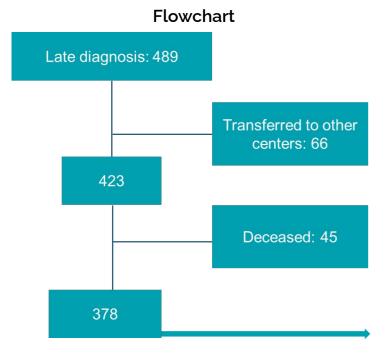
Cis men: 72.4% Cis women: 21.5% Trans women: 5.9% Trans man: 0.2%

Median age: 35 years (28-45)

Median CD4 count: 138 (52-253)

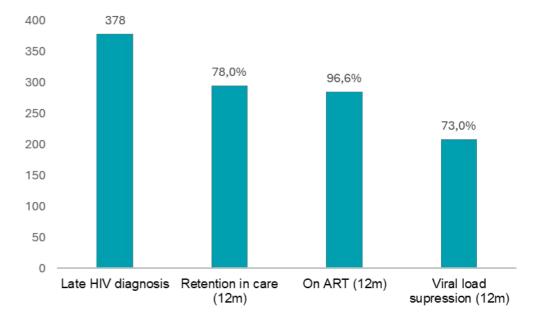


#### **Continuum of care**



95% initiated ART during the first year (402/423)61% initiated ART during the first 7 days (244/402)

#### Continuum of care in the late diagnosis cohort



## **Conclusions**

In our cohort, the proportion of late diagnosis and advanced HIV disease remained stable during the study period. Proportion of viral suppression among those on ART exceeded the national level for PLHIV.

These results highlight the importance of reinforcing strategies to promote timely HIV diagnosis, and the implementation of differentiated services to improve cascade outcomes among PLHIV with late diagnosis.