HIV in Europe

Lessons learned from the HIV in Europe Initiative

Working together for Optimal Testing and Earlier Care for HIV across Europe

Professor Jens Lundgren, Co-Chair HIV in Europe,

Rigshospitalet , University of Copenhagen,

Director CHIP

The HIV in Europe Initiative

- Pan-European initiative started in 2007

Aim

- **Ensure that HIV patients enter care earlier in the course of their infection** than is currently the case and study the decrease in the proportion of PLHIV presenting late for care

How?

- Network of stakeholders – exchange of best practices
- Concrete projects to provide evidence on issues around and barriers to testing and late presentation
- Political Advocacy
- Bi-annual European Conferences

HIV in Europe Initiative - Objectives

To highlight the rising number of people living with HIV in Europe who are unaware of their serostatus

To identify political, structural, clinical and social barriers to achieving optimal testing and counselling, and earlier care for HIV/AIDS

To promote public health best practices and guidance found in Europe with regard to HIV testing, counselling and care

The HIV in Europe Initiative - structure

Governance

- Steering Committee
  - Representation from patient advocacy, policy makers, health professionals and European public health institutions (ECDC, WHO Europe, EMCDDA, Global Fund, CDC)
- HIV in Europe Secretariat
  - Operational – Copenhagen HIV Programme
  - Political Advocacy – EATG office in Brussels
  - Financial - AIDS Fonds, The Netherlands

Conferences

- Kick-off meeting Brussels 2007
- HIV in Europe 2009 Stockholm Conference
- HIV in Europe 2012 Copenhagen Conference
- 2014 Barcelona, 5-8 October

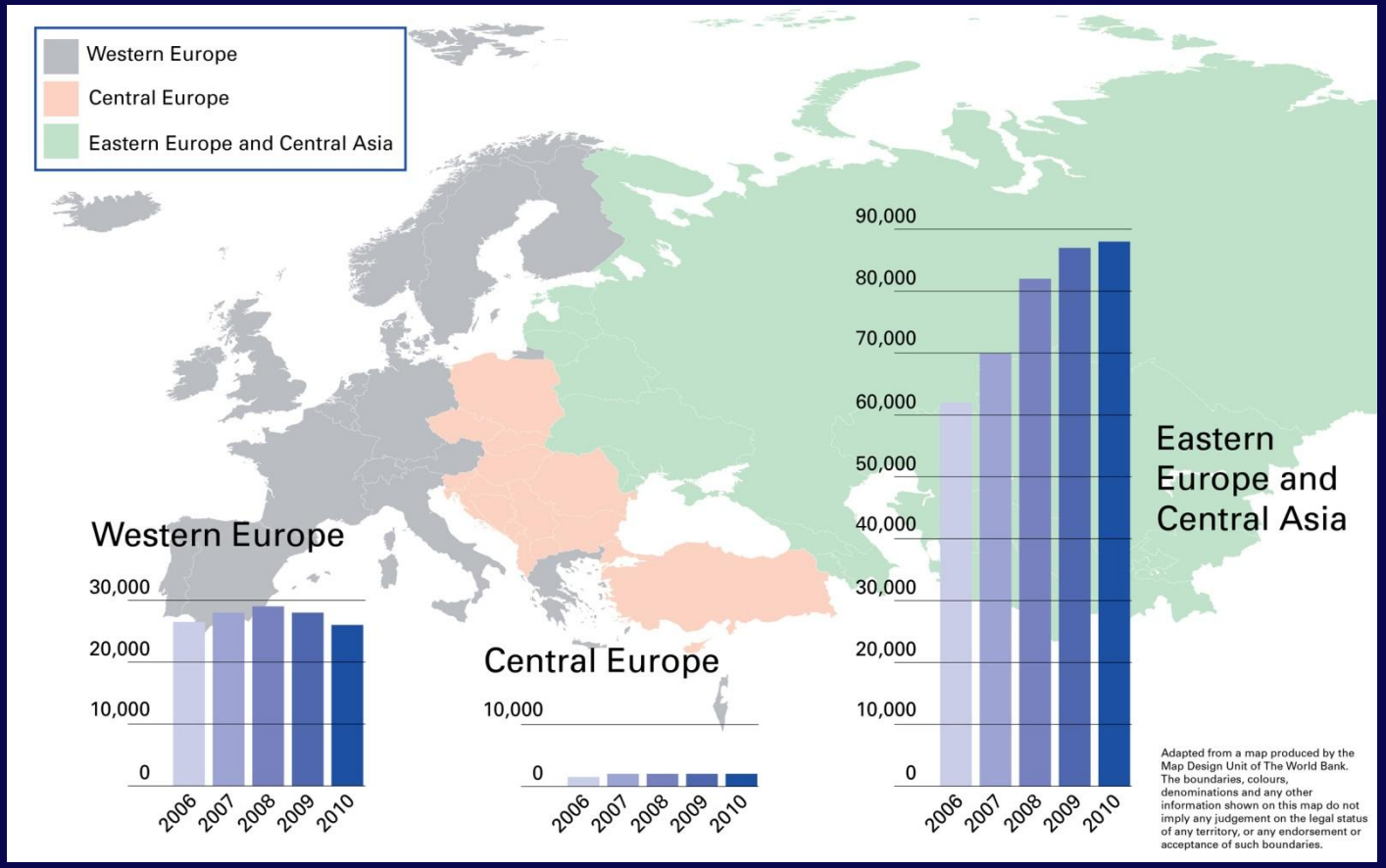
Situation of HIV in Europe

People living with HIV

- In the WHO Europe region it is estimated that around ***2.4 million people are living with HIV*** (end 2011)
  - 1 million in the European Union
  - 1.4 million in Eastern Europe and Central Asia
- Of these ***30-50%*** are unaware of their HIV infection...and even more in some countries
- Key populations at higher risk of HIV in Europe are:
  - Men who have sex with men
  - Injecting drug users
  - Sex workers
  - Migrants
  - Prisoners
  - Emerging heterosexual transmission in EE

Hamers FF & Phillips AN, Diagnosed and undiagnosed HIV-infected populations in Europe HIV Medicine (2008), 9 (Suppl. 2), 6–12
UNAIDS, Global report: UNAIDS report on the global epidemic 2012

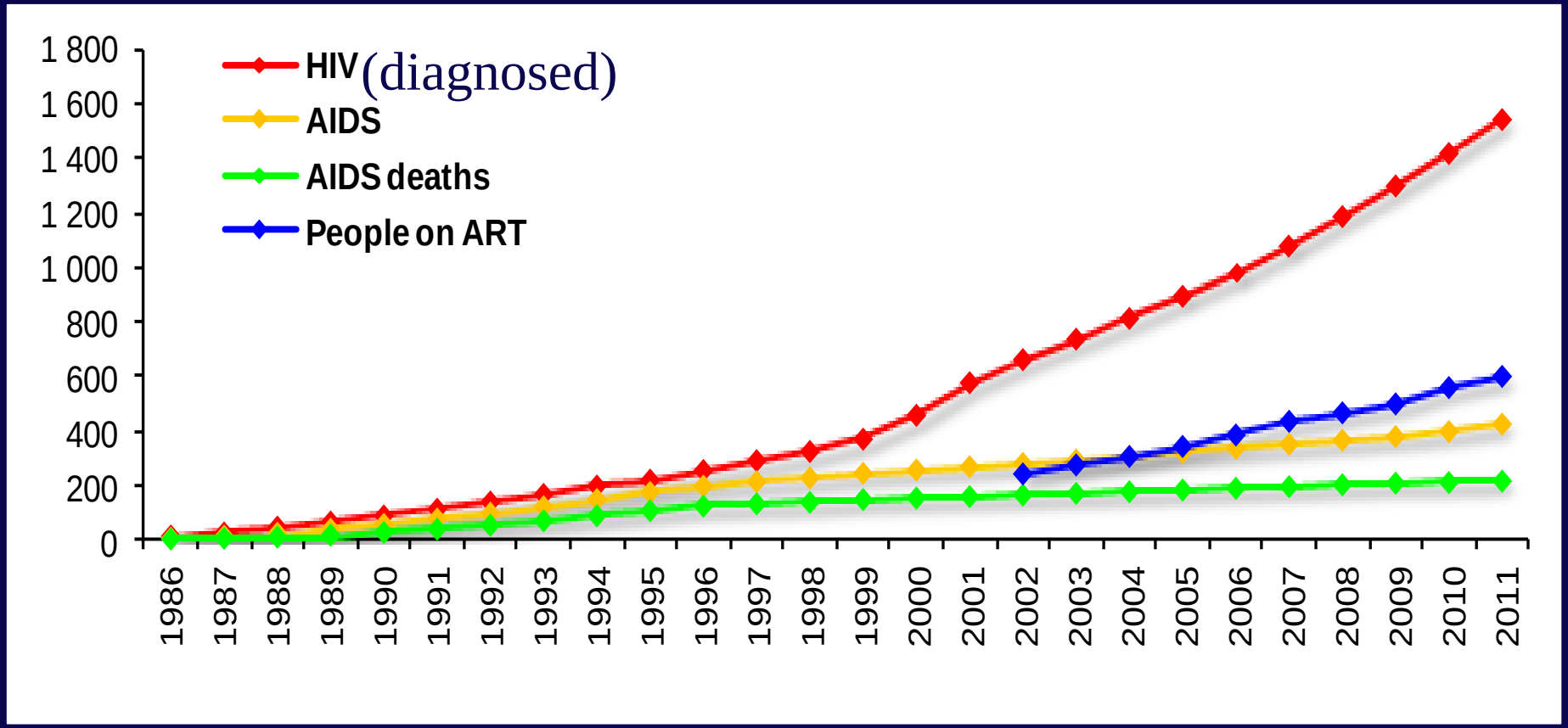
Situation of HIV in Europe
Annual number of ***new*** HIV cases



Stagnated HIV epidemic in Western and Central Europe,
escalating HIV epidemic in Eastern Europe and Central Asia

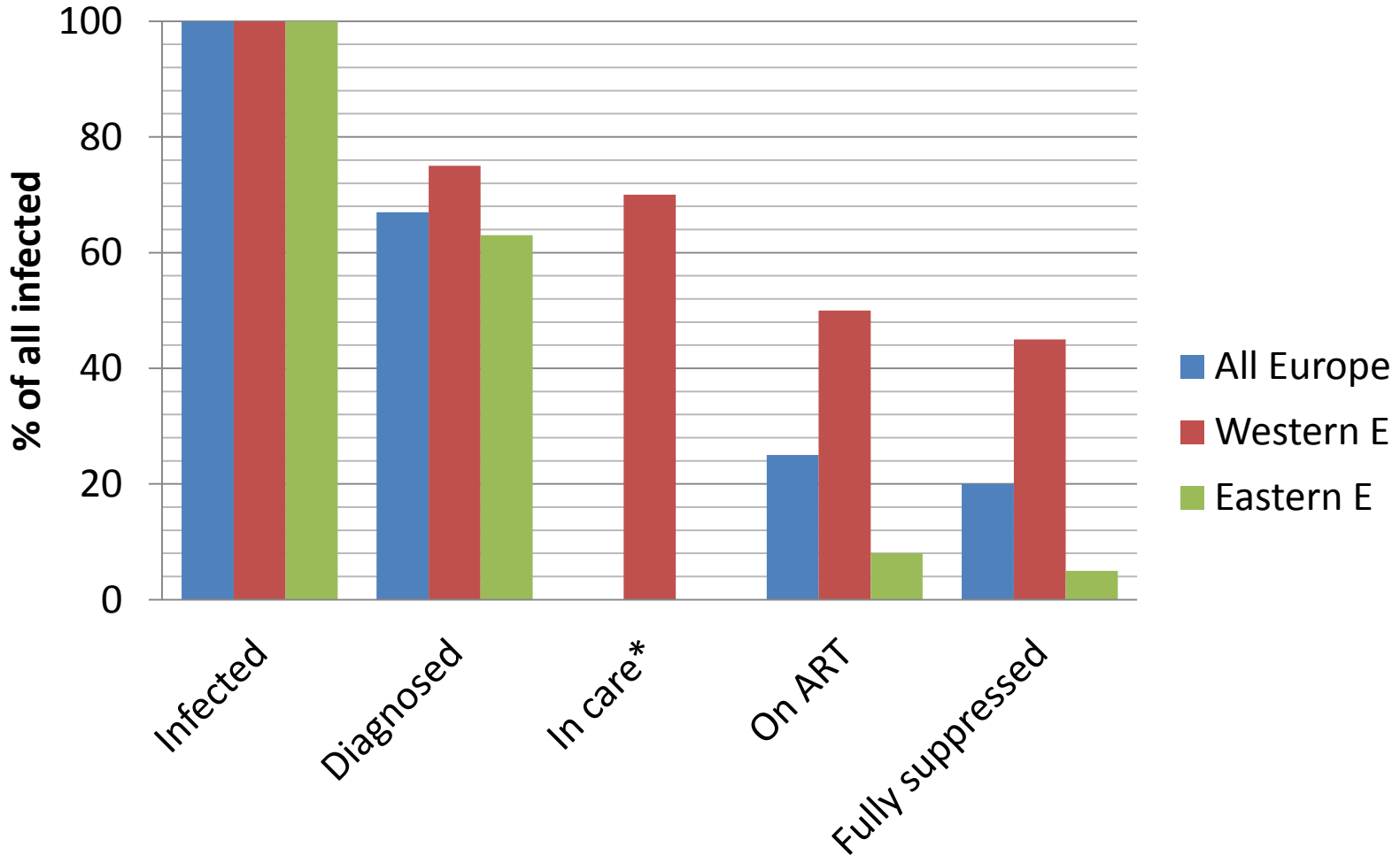
World Bank & WHO, HIV in the European Region, Policy Brief, 2013

Infection increasing faster than treatment: WHO European Region, 1985–2011



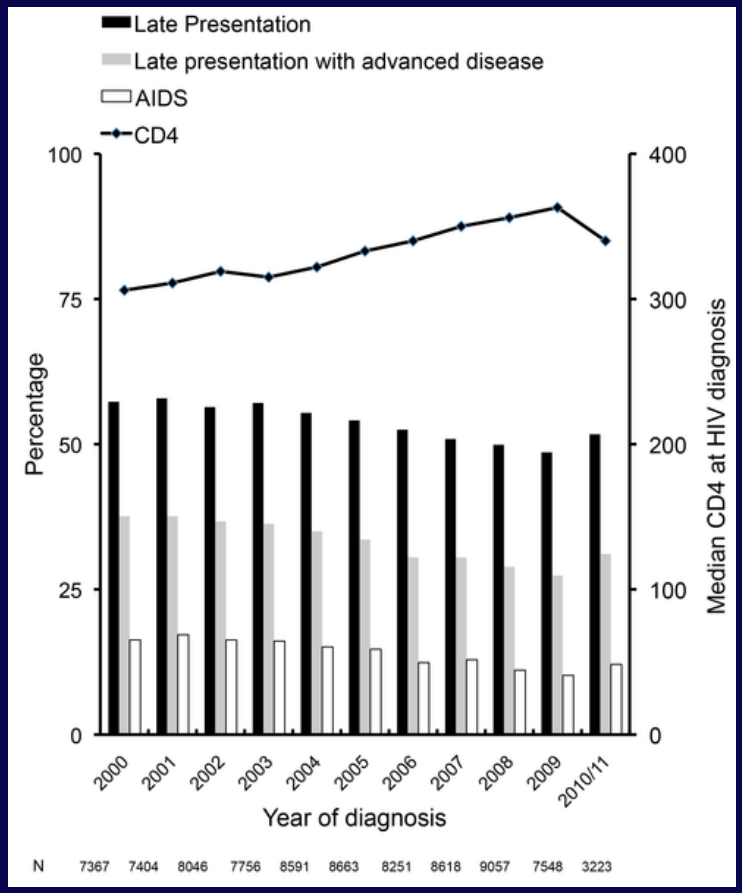
Sources: ECDC/WHO. HIV/AIDS surveillance in Europe 2011. Stockholm: ECDC; 2012; Federal Scientific and Methodological Center for the Prevention and Control of AIDS, Russian Federation; Ukrainian AIDS Centre, Ukraine; WHO/UNICEF/UNAIDS monitoring and reporting on the Health Sector Response to HIV/AIDS.

Treatment cascade in Europe



*: no data on number of persons in care in Eastern Europe

Late diagnosis in Europe

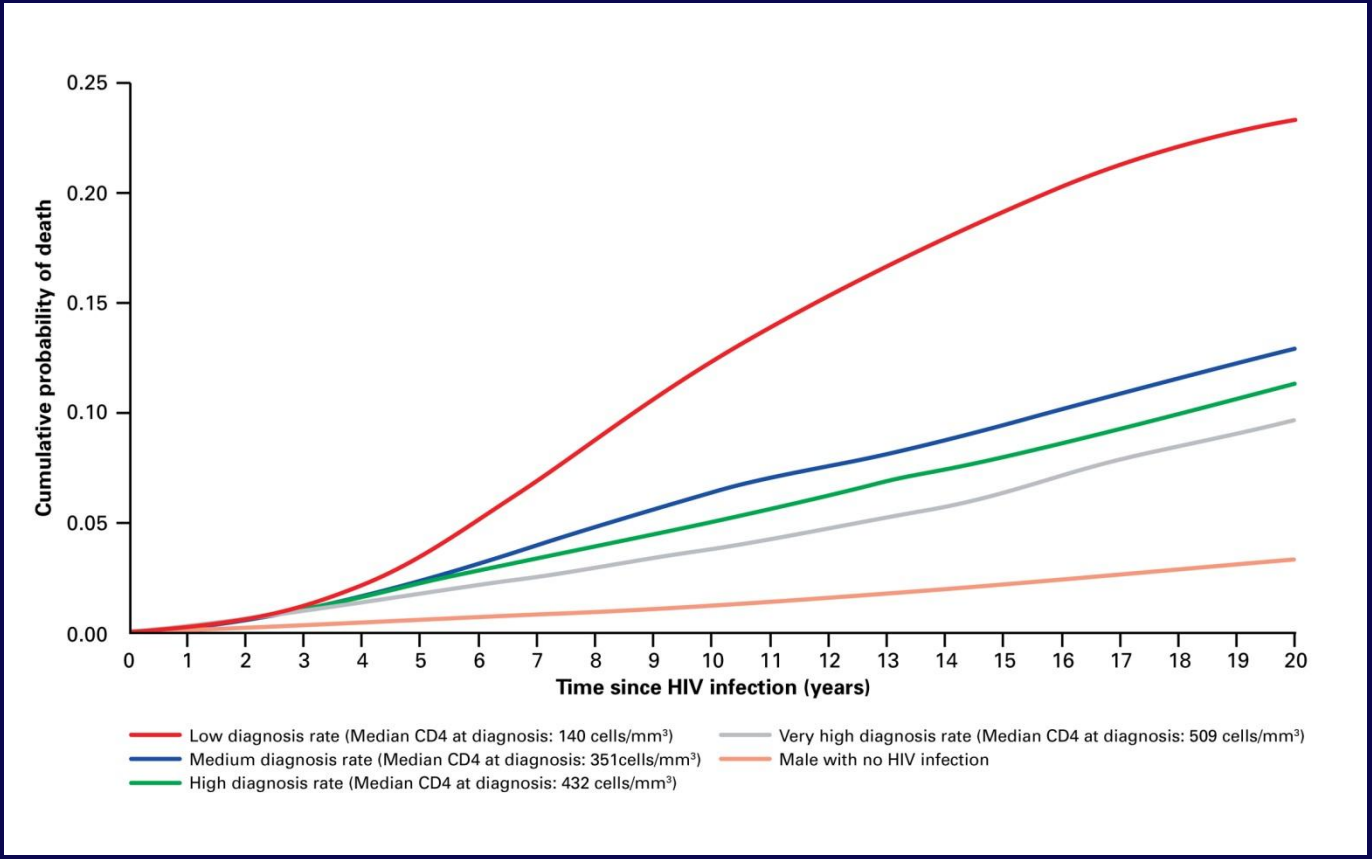


Mocroft A et al. Risk Factors and Outcomes for Late Presentation for HIV-Positive Persons in Europe: Results from the Collaboration of Observational HIV Epidemiological Research Europe Study (COHERE). PLoS Med, 2013

Consequences of late diagnosis

Increased morbidity and mortality

- Cumulative probability of death of people with HIV according to timing of diagnosis



Nakawaga F et al. Projected life expectancy of people with HIV according to timing of diagnosis. AIDS 2011, 25.

Benefits of early diagnosis
Summary

- Late presentation delays access to ART, adversely impacting on the health of the individual while also allowing inadvertent onward transmission

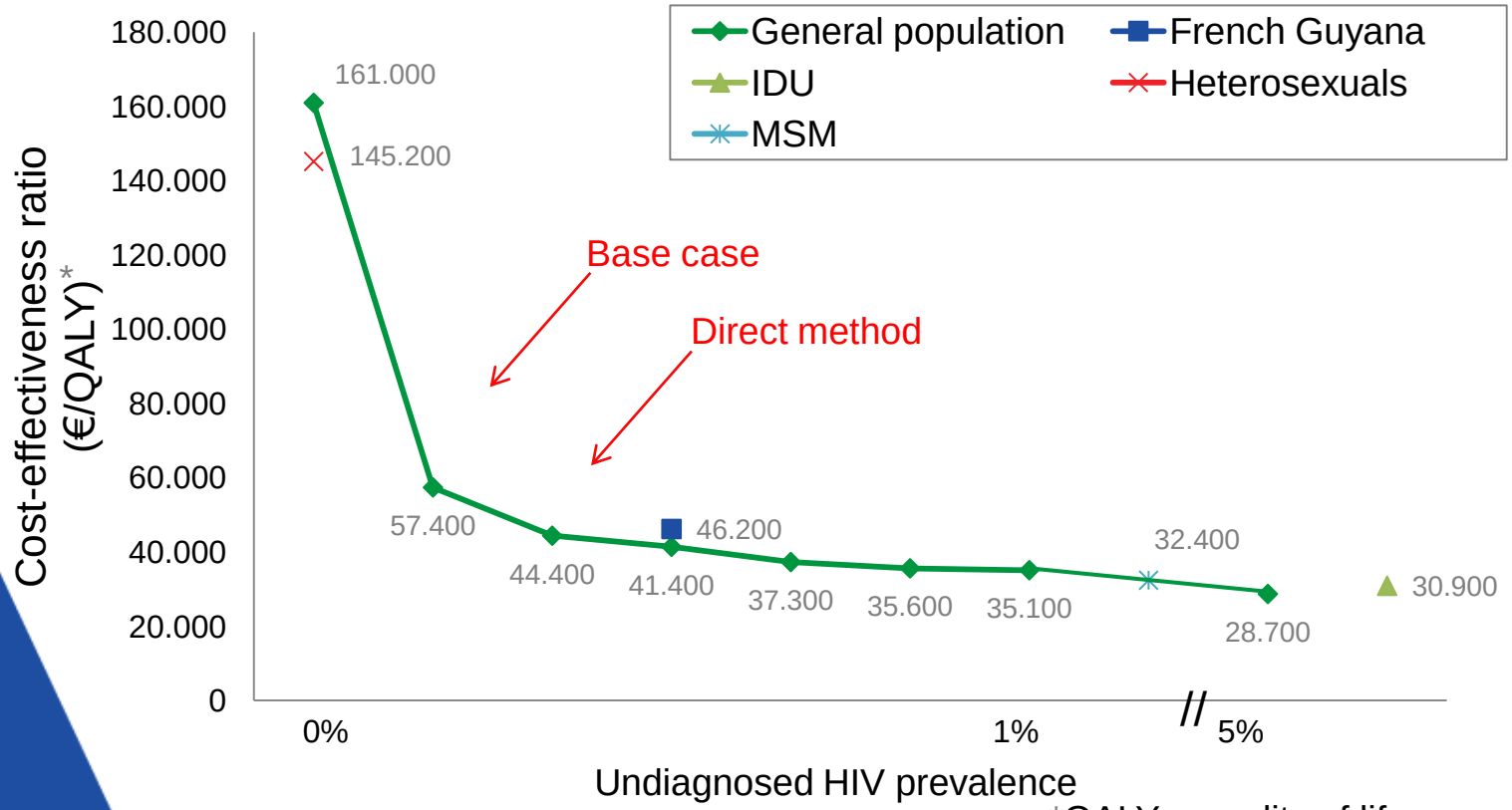
The solution is more effective strategies to:

- Test more effectively
- Ensure better access to care for those diagnosed

Benefits of early diagnosis

Cost-effectiveness of HIV testing

Data from France showing HIV testing to be cost-effective when undiagnosed HIV prevalence is above 0.1%



*QALY – quality of life years

Yazdanpanah Y, et al. (2010) Routine HIV Screening in France: Clinical Impact and Cost-Effectiveness. PLoS ONE 5(10): e13132. doi:10.1371/journal.pone.0013132
http://www.plosone.org/article/info:doi/10.1371/journal.pone.0013132

Health Policy in Europe

"*defining national* ***health policies remains an exclusive competence belonging to Member States***. *EU action shall not include the definition of health policies, nor the organization and provision of health services and medical care.*
European health policy *therefore* ***consists of developing a shared competence with Member States*** *and complementing national policies*."

- Large variations in HIV testing recommendations – only a few countries have a policy of normalisation of HIV testing
- Large variations in access to testing, care and treatment

Testing strategies

- Existing approach
  - Self referral
  - Selected clinics in health system (ID, STD)
- Future approach
  - Community testing (ensure transferral to care)
  - Provider-initiated testing
    - Indicator conditions (in any clinic or general practitioner seeing persons with such conditions)
      - Mononucleose-like illness, TB, viral hepatitis, STD, psoriasis, cervical dysplasia, esophageal candidiasis, malignant lymphoma, etc

Overcoming barriers

Normalisation of HIV testing

- **Offer of HIV test acceptable to patients** in many settings e.g. 83% acute medical patients
- But tests **often not offered**, e.g. only 43% cases of tuberculosis tested for HIV
- **High variability between clinicians** in offering HIV tests e.g. 45-88% among doctors
- **Missed opportunities** for HIV testing
- **Opt-out (automatic) testing** leads to increased testing rates, e.g. 96% for antenatal screening in UK in 2010

Ellis S et al. Clinical Medicine 2011; 11: 541-3.
Thomas William S et al. Int J STD & AIDS 2011; 22: 748-50.
Petlo T et al. Int J STD & AIDS 2011; 22: 727-9.
National Antenatal Infections Screening Monitoring. HPA.

HIV Indicator Conditions:

Guidance for Implementing HIV Testing in Adults in Health Care Settings

Conclusions

- Rationale for HIV testing (and timely treatment and care):
  - Reduce **mortality** and **morbidity**
  - Reduce the **onward transmission of HIV**
  - Lessen the **economic burden** for health systems
- **Barriers to HIV testing** may exist at three different levels:
  - Patient level
  - Healthcare provider level
  - Institutional/policy level

Conclusions

- Populations at high risk should be targeted with **focused interventions**
- National **HIV testing guidelines should be implemented** and should take an ethical approach based on human rights principles
- Training and awareness raising is crucial in order to **normalise HIV testing in the healthcare system**, e.g. by implementing indicator condition-guided HIV testing
- Laws that jeopardise HIV prevention efforts should be **abolished**
- Monitoring and **evaluation** systems should be implemented

HiE Call To Action 2012-2014

- Monitor and share research and best practices on HIV testing standards in order to improve practice and policy;
- Stimulate the scientific development of activities and events to inform the European agenda on optimal testing and earlier care;
- Review data and studies on the impact of counselling and HIV/STI testing on risk behaviour and support a consensus process to agree on optimal counselling practices;

HiE Call To Action 2012-2014

- Facilitate the implementation and assessment of HIV indicator condition guided testing;
- Stimulate an evidence base on and reduce barriers to testing that include human rights, stigmatisation, discrimination and criminalisation;
- Continue supporting the implementation of novel models to estimate the number of infected but not yet diagnosed individuals;
- Investigate linkages and collaboration between HIV testing and hepatitis testing and access to care;
- Support the international institutions and agencies to increase their engagement

22–29 NOVEMBER EUROPEAN HIV TESTING WEEK 2013
www.hivtestingweek.eu

HIV in Europe
Working Together for Optimal Testing and Earlier Care
www.hiveurope.eu

European HIV testing week 2013