

# Optimizing testing - opportunities missed and lost

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Avoidance of using injections, or adopt safe injection habits

Behavioural interventions<sup>1</sup>

Patient and partner education

Delay start of sexual activity

Aim: to lower the number of partners, alter risk-taking behaviour

> Correct and consistent condom use

Sexual abstinence

HIV

Sexual monogamy

F/TDF for PrEP

prevention strategies

Testing and treatment of STIs

Post-Exposure Prophylaxis

Biomedical interventions<sup>2</sup>

Prevention of motherto-child transmission

Treatment as Prevention

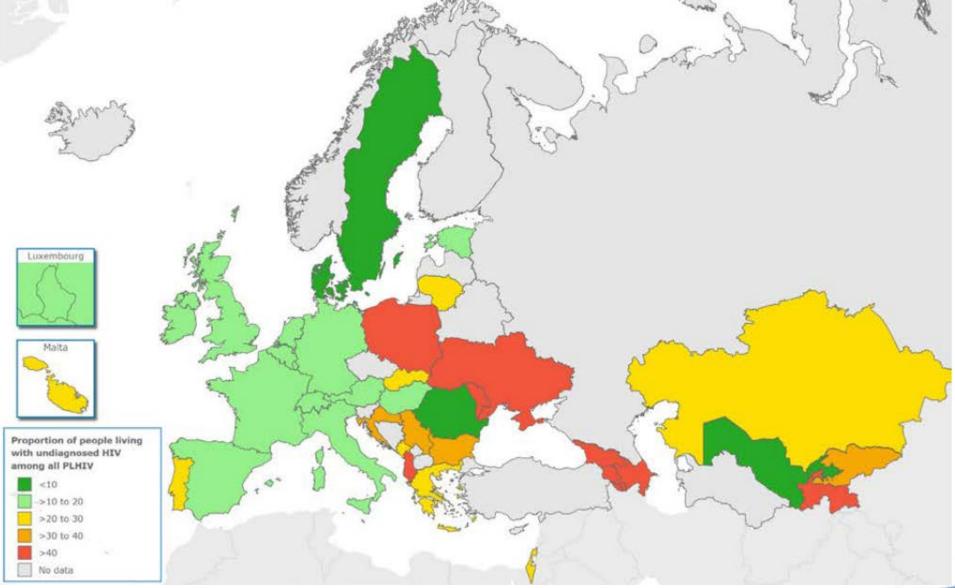
Aim: to reduce the efficiency of transmission, or to shorten the duration of infectiousness

Circumcision

F, emtricitabine; PrEP, pre-exposure prophylaxis; STI, sexually transmitted infection; TDF, tenofovir disoproxil fumarate 1. Cohen M et al. J Int AIDS Soc 2008;11:4 (adapted); 2. Cohen M et al. Sexual HIV Transmission and its Transmission: www.medscape.org/viewarticle/416415 (accessed September 2017), Share by Bartosz Szetela

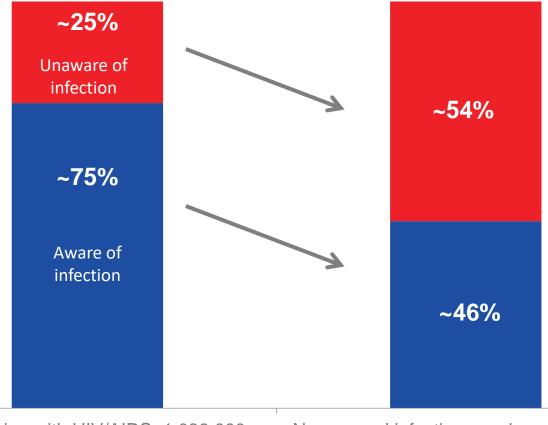








### Undiagnosed HIV and onward transmission USA modelling data



People living with HIV/AIDS: 1,039,000-1,185,000 New sexual infections each year: ~32,000

Indicator Condition-Guided HIV testing

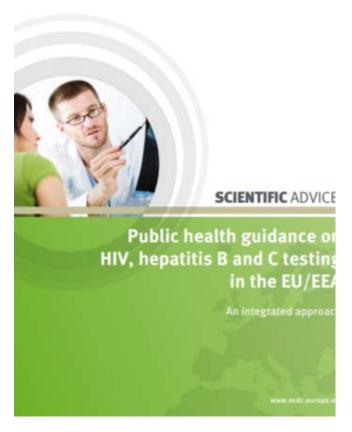
	Individuals having HIV		
	test (number)	HIV positive (number)	Prevalence (95% CI )
Total	3588	66	1.84 (1.42–2.34)
Indicator condition			
Sexually transmitted infection (STI)	764	31	4.06 (2.78–5.71)
Malignant lymphoma (LYM)	344	1	0.29 (0.006-1.61)
Cervical or anal dysplasia or cancer (CAN)	542	2	0.37 (0.04–1.32)
Herpes zoster (HZV)	207	6	2.89 (1.07-6.21)
Hepatitis B or C (HEP)	1099	4	0.36 (0.10-0.93)
Ongoing mononucleosis-like illness (MON)	441	17	3.85 (2.26-6.10)
Unexplained leukocytopenia/thrombocytopenia (CYT)	94	3	3.19 (0.66–9.04)
Seborrheic dermatitis/exanthema (SEB)	97	2	2.06 (0.25-7.24)



### Where to test?

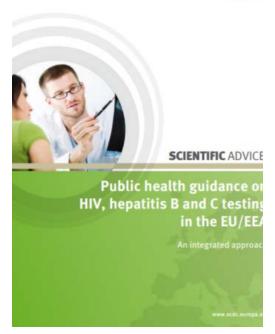


- primary healthcare settings
- hospital settings
- other settings (e.g. STI clinics, pharmacies, prisons, harm-reduction services)
- testing in the community, including harm reduction services
- self-sampling and self-testing













# Barriers and lost opportunities in CEE countries

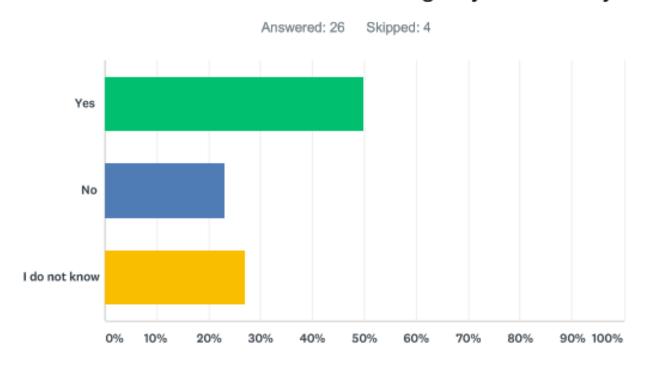
Balayan et al. Infect Dis. 2019;51(4):277-286

# Populations hard-to-reach with HIV testing, treatment and care in ECEE

Table 3. Populations hard-to-reach with HIV testing, treatment and care.

	_	Populations hard to reach	Populations hard to reach	Populations hard to reach with starting	Populations hard to reach in terms of retaining on
Region	Country	with HIV testing	with linkage to HIV care	antiretroviral treatment	antiretroviral treatment
Central Europe	Czech Republic	PWIDs	Migrants	No data	Migrants
	Hungary	PWIDs, pregnant women	Migrants	PWIDs, migrants	PWIDs, migrants
	Poland	Women, adolescents/young adults	PWIDs, women	PWIDs, women, adoles- cents/young adults	PWIDs
	Slovakia	PWIDs, adolescents/ young adults	No data available	It depends on the health insurance	PWIDs, MSM
	Slovenia	PWIDs, MSM, SWs, women, migrants, pregnant women, adolescents/	No data available	No data available	No data available
		young adults			
Eastern Europe	Armenia	PWIDs	PWIDs, migrants	PWIDs, migrants	PWIDs, migrants
	Belarus	No data available	PWIDs, adolescents/ young adults	PWIDs, adolescents/ young adults	PWIDs, women, adoles- cents/young adults
	Estonia	MSM, SWs	No data available		No data available
	Georgia	PWIDs	PWIDs	PWIDs	PWIDs
	Republic of Moldova	PWIDs, SWs, adoles-	PWIDS, SWs, adolescents/	PWIDs, SWs, adolescents/	PWIDSs, SWs, adolescents/
		cents, migrants	young adults	young adults	young adults, migrants
	Ukraine	PWIDs	Adolescents/young adults	PWIDs	PWIDs
South Eastern Europe	Albania	PWIDs, MSM, SWs, migrants	Migrants	No data available	PWIDs, migrants
	Bosnia and Herzegovina	MSM, SWs, prisoners	SWs, migrants	No data available	Migrants
	Bulgaria	No data available	PWIDs	No data available	PWIDS
	Croatia	No data available	No data available	No data available	No data available
	Greece	PWIDs, migrants	PWIDs, migrants	PWIDs, migrants	PWIDS, migrants
	Romania	PWIDs	PWIDs	No data available	PWIDs, perinatally infected young adults having treat- ment fatigue
	Serbia	PWIDs, SWs, MSM, migrants, prisoners, women, pregnant women, adolescent	Mostly MSM, also others at some degree	No data available	All at some degree
	Turkey	PWIDs, SWs, migrants	Migrants	No data available	SWs, migrants

### Q2 Do you have any activities targeting populations indicated in the table as hard to reach with HIV testing in your country:



ANSWER CHOICES	RESPONSES	
Yes	50.00%	13
No	23.08%	6
I do not know	26.92%	7
TOTAL		26



#### Time between thinking about testing, and making a test

Country	Less than 6 months	7 months –2 years	More than 2 years
Estonia	58%	32%	10%
Moldova	92%	5%	4%
Poland	67%	20%	13%
Turkey	95%	3%	2%
Ukraine	72%	15%	13%

Stigma Index, http://www.gnpplus.net/en/resources/human-rights-and-stigma/item/101-hiv-related-stigma-late-testing-late-treatment



#### From testing to health care system

Time/Country	Estonia	Moldova	Poland	Turkey	Ukraine
Under 6 months	51%	31%	58%	90%	44%
7 months – 2 years	34%	9%	15%	4%	16%
More than 2 years	14%	24%	23%	4%	25%
I am out of health care	1%	36%	4%	2%	15%

Stigma Index, http://www.gnpplus.net/en/resources/human-rights-and-stigma/item/101-hiv-related-stigma-late-testing-late-treatment



### **Barriers**

 In Poland 95% of MoH HIV/AIDS budget goes to ARV treatment

 Only 9% of Polish people have ever had an HIV test (prof. Z. Izdebski & Polpharma "Polish sexuality 2011 Research")

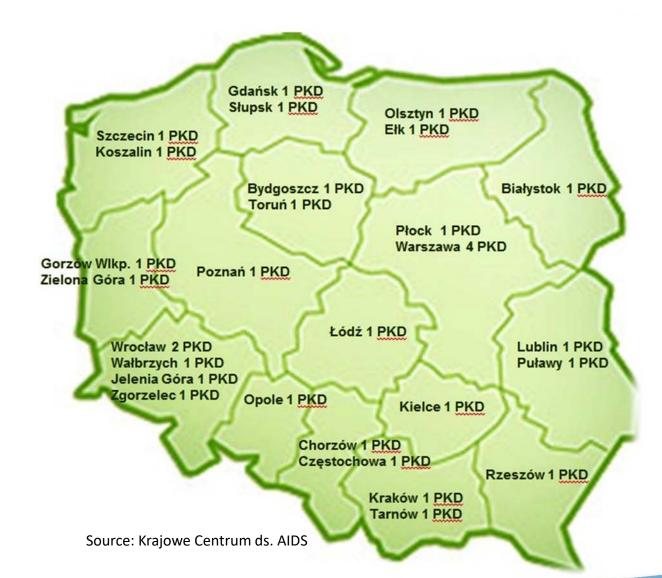


# Where to test? POLAND

- primary healthcare settings HIV HCV HBV
- hospital settings/not so often
- other settings (e.g. STI clinics, prisons?? and some drug and harm-reduction services by NGOs)
- testing in the community, including some drug and harm reduction services by NGOs , >18 years old
- self-sampling and self-testing.

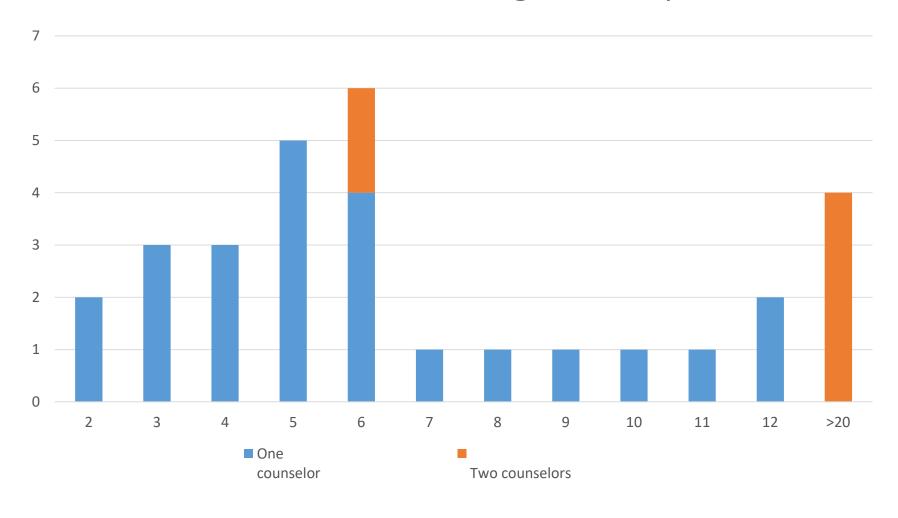


### Voluntary Counselling and Testing Facilities





### The number of VCTs working in hours per week

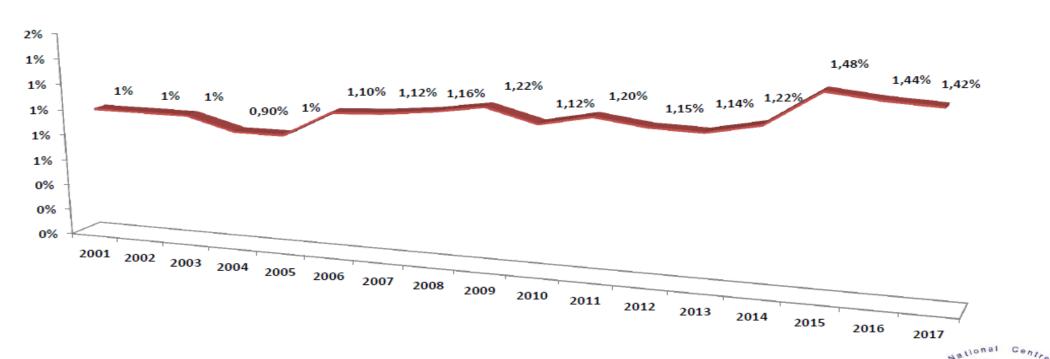




Ankıeta			
METRYCZKA	FORMULARZ	ZALECENIE WYKONANIA TESTU	WYNIKI
Informacje po	dstawowe		
		TAK ▼	
		ile testów (w całym zyciu) ?	>6 ▼
		kiedy ostatni ?	rok 2019 / miesiąc wybierz ▼
		wynik	negatywny ▼
Test HIV w przeszłości	gdzie ?	PKD prywatne laboratorium krwiodawstwo szpital/przychodnia NFZ w domu inne	
		powtórzenie testu po oknie serologicznym ?	NIE ▼
Powód wykonan (deklarowany pr	ia testu:	ryzykowne kontakty seksualne IDU kontakt z krwią ciąża ciąża ciąża u partnerki ciekawość rutynowe badania namowa partnera objawy osłabionej odporności skierowanie przez lekarza wynik + partnera inne	
Data ostatniego	ryzykownego	1-2 tygodnie ▼	



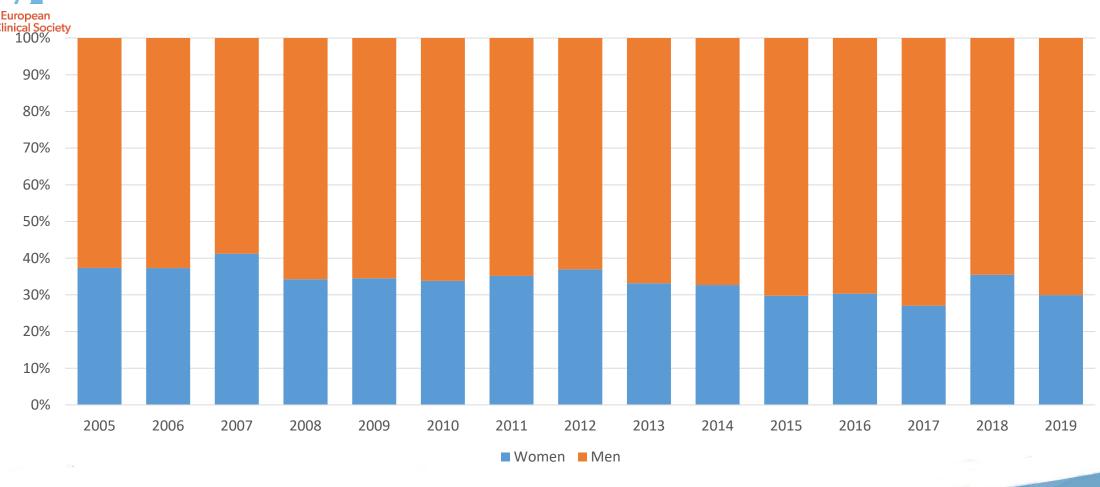
### Prevalence of HIV(+) tests in Polish VCTs



The Agency of the Ministry of Health

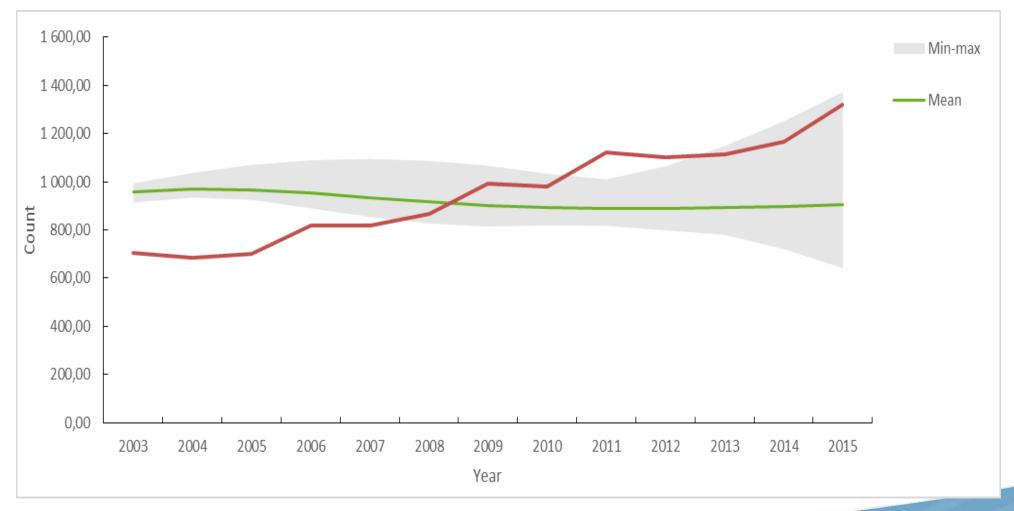


### Gender of clients in VCTs in Poland



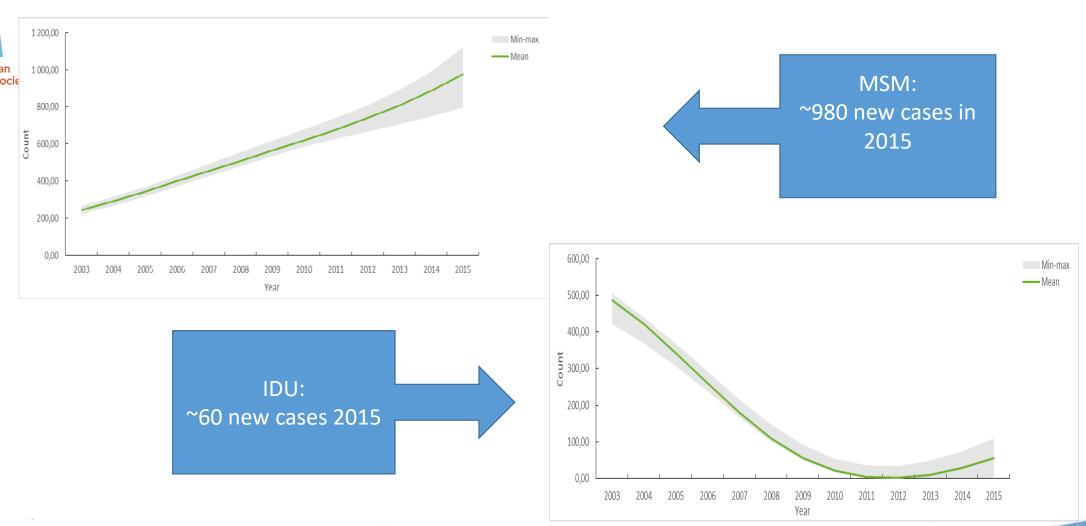


# New HIV cases in Poland according to ECDC estimating tool - 2003-2015



# EACS European ADD Clinical Control

### New cases among MSM and IDU







### AIDS at diagnosis in Poland 2016+2017

184 (11.7%) (n=1535)

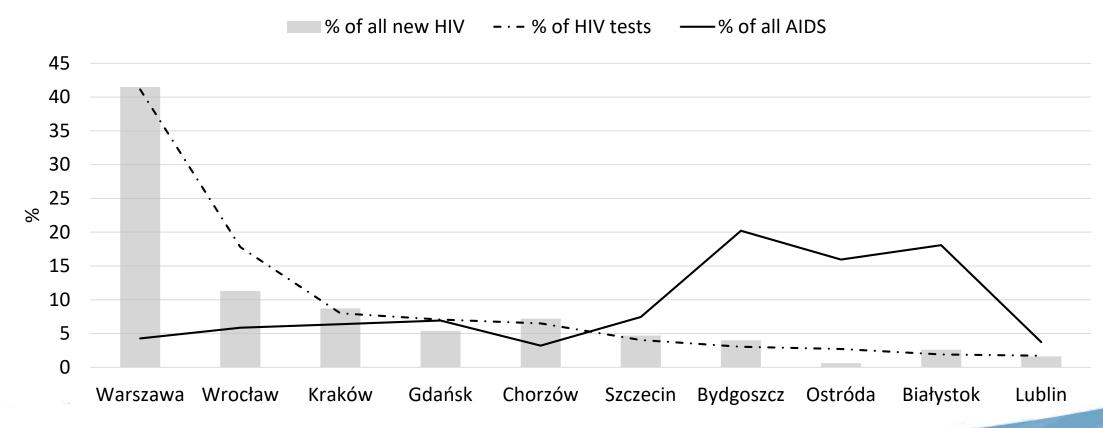
Centre	N	% with AIDS
Byd	67	38%
Bial	44	34%
Ostr	10	30%
Lodz	101	15%
Szcz	79	14%
Gda	90	13%
Krak	145	12%
Wro	189	11%
WAW	695	8%
Lubl	27	7%
Chor	121	6%
Poz	107	-

AIDS defining condition	N	%
PJP	36	5 25.2%
Candidiasis	32	2 22.4%
TBC	23	1 14.7%
Wasting	20	14.0%
KS	13	1 7.7%
Toxoplasmosis	13	1 7.7%
AIDS Dementia	(	6.3%
Lymphoma	(	5 4.2%
Recussent pneumonia	(	5 4.2%
CMV	[	3.5%
MAC	[	3.5%
Cryptococosis	4	2.8%
Other mycobacteriosis		4 2.8%
Sepsis		3 2.1%
Other	-	2 1.4%
Cervical cancer	,	1 0.7%



### HIV testing and late presentation

The relation bewteen HIV test coverage and AIDS at diagnosis in Poland





Infection. 2018; 46(4): 533-540.

Published online 2018 May 21. doi: <u>10.1007/s15010-018-1154-0</u>

PMCID: PMC6096934

PMID: 29785614

Cascade of care and factors associated with virological suppression among HIV-positive persons linked to care in the Test and Keep in Care (TAK) project

Justyna D. Kowalska, Magdalena Ankiersztejn-Bartczak, Leah Shepherd, and Amanda Mocroft Amanda Mocroft



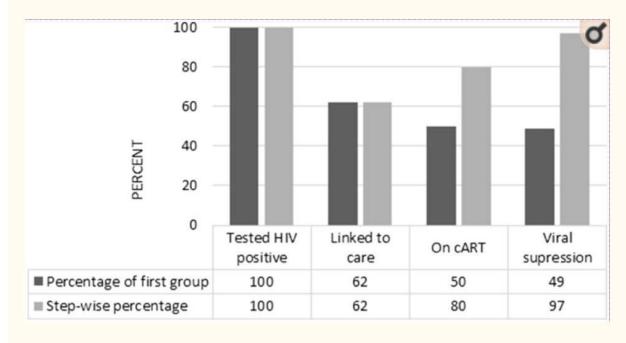


Fig. 1

Cascade of care for TAK project

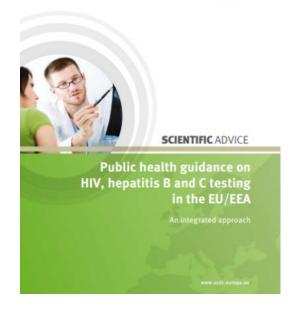


### What can be done









## COM5: Community-based testing for HIV, hepatitis and sexually transmitted infections through a mobile testing caravan (Poland)

Author(s): Magdalena Ankiersztejn-Bartczak

Affiliation(s): Foundation for Social Education

Country: Poland

**Setting**: Community







	Total	Positive results	Known status
HIV	325	0,9%	4,3%
HCV	330	17,3%	24,8%
Syphilis	314	1,6%	0%



Funded by: National Bureau for Drug Prevention, Warsaw Government, and private companies 2017–2019





### Co-testing in one Polish VCT centre in 2018

Syphillis	All	Women	Men
Total	4682	1423	3259
Positive n (%)	77 (1.6%)	3 (0.2%)	74 (2.3%)
HCV			
Total	5331	1621	3710
Positive n (%)	31 (0.6%)	9 (0.6%)	22 (0.6%)
HIV			
Total	3531	1084	2447
	40 (1.1%)	2 (0.2%)	38 (1.6%)

Ankiersztejn-Bartczak et al. Integrate Workshop, Warsaw 2019



### Missed opportunitynfor diagnosis Polish VCTs

192 HCV(+)

512 syphilis

Other VCTs in Poland tested ~32000 clients per year only for HIV



## Equality Parade 2019









nad osobami zakażonymi HIV

Zalecenia Polskiego Towarzysty



Have national clinical guidelines **Consolidate them** 

www.ptderm.pl/sekcje/sekcja-wenerologiczna-23

Dodatkowe pliki: diagnostyka i leczenie rzezaczki.pdf info dla pacienta Rzezaczka (1),pdf info dla pacienta-chlamydia.pdf

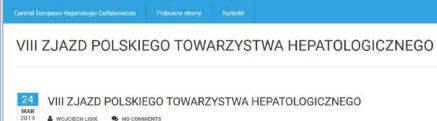
Sekcja Wenerologiczna

zgłoszeniowego i przesłanie go na podany adres.

Europejskie zalecenia postępowania w zakażeniach przenoszonych drogą płciową opracowane przez ekspertów The International Union against Sexually Transmitted Infections (IUSTI) znaidują się na stronie: http://www.iusti.org/regions/europe/euroguidelines.htm#Current Europejskie zalecenia diagnostyczne i terapeutyczne w rzeżączce u dorosłych, 2012 Diagnostyka i leczenie rzeżączki: komentarz grupy ekspertów Polskiego Towarzystwa Dermatologicznego 1. Informacja dla Pacjenta - KIła 2. Informacja dla Pacjenta - Rzeżączka 3. Informacja dla Pacjenta - Chlamydia Zapraszamy wszystkie osoby zainteresowane zakażeniami przenoszonymi drogą płciową, łącznie z zakażeniem HIV do przystąpienia do naszej Sekcji. Warunkiem zostania członkiem Sekcji Wenerologicznej jest wypełnienie formularza ¥ III\ @ OGICZNE

■ … ☑ ☆

<u>↓ III/ □</u>





### Breaking news



#### **FEATURE STORY**

Ukraine: government to fund publicly procured HIV services

18 JUNE 2019

Ukraine has announced that it is to allocate \$16 million to the country's AIDS response for 2019-20, which will sustain and expand HIV prevention and support services for key populations as well as care and support services for people living with HIV.