

# **A perspective on testing strategies in Europe**

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# Testing for HIV

- HIV testing is the gateway to prevention and to treatment
- It is estimated however that 15% of people with HIV in the EU and 40% in Eastern Europe do not know their HIV status
- Less than 50% of key populations in EU were tested last year
- Failure to reduce the testing gap is a critical factor contributing to late diagnosis and to the continuing expansion of the epidemic

# Two HIV epidemics in Europe

- Relatively stable epidemic in Western and Central Europe, a fast growing epidemic in EECA
- Concentrated epidemic among MSM and migrant populations in Western and Central Europe; an epidemic driven by unsafe injection drug use and with also a heterosexual transmission component in EECA
- Strong health and social systems, high access to prevention and treatment in Western Europe; significant issues with regard to access to testing, prevention and treatment in EECA, particularly for key populations at high risk

# No shortage in guidelines on HIV testing

- WHO guidelines on HIV testing services, 2015
- WHO guidelines on self testing, 2016
- ECDC guidance on HIV testing (EU/EEA), 2010
- National guidelines and strategies (e.g joint NICE and PHE guideline on HIV testing)
- Guidance for implementing HIV testing in adults in healthcare settings, EACS, 2014
- HIV testing is an indicator of the implementation of the Dublin declaration

## **Guidelines are guidelines, but whether they are optimally implemented in practice is the issue**

- Coverage and uptake of testing services across Europe remain low
- Testing programs are often still not targeted to those most-at-risk
- Provision and uptake of testing services is limited by stigma, discrimination and adverse legislation and policies
- Inadequate linkage of testing services and treatment services

# Eastern Europe: Russian Federation

- The Federal AIDS Center estimates that up to 61% of 1.3 million PLHIV do not know their status
- Late diagnosis: 40.3% new cases <350 CD4 cells and 73.3% < 500 CD4
- The highest proportion of late diagnoses is in the regions where testing coverage is the lowest
- In 2015, 28.3 M Russian nationals (20%) and 2 M foreign citizens have been tested for HIV
- Only 5% of people tested declared themselves as belonging to vulnerable groups, a low figure considering that 26% of new cases were reported as belonging to these groups that year

# Eastern Europe: Russian Federation

- **Large-scale communication campaigns**
  - promote healthy behaviors
  - strengthen traditional family and moral values
  - reduce discrimination towards PLHIV
- **Large-scale testing campaigns** #STOPHIVAIDS "Every 5 minutes 1 person gets infected in Russia » launched in November 2016
- On the first day, in shopping center "Suvar Plaza" in Kazan, 1266 Kazan citizens tested for HIV, 17 people were detected positive.
- **Mobile testing units** to reach the vulnerable populations



*Kazan Marathon, 15 May 2016*



*Mobile testing unit in Ekaterinburg, 2016*

# Western Europe: Paris

- Among 3000 new infections diagnosed last year (47/ 100'000), 52 % were among MSM and 38% among migrants
- Stable/ slightly increasing incidence over the last five years
- Late diagnosis: MSM, 27 months ; Migrants, 48 months



# Western Europe: Paris

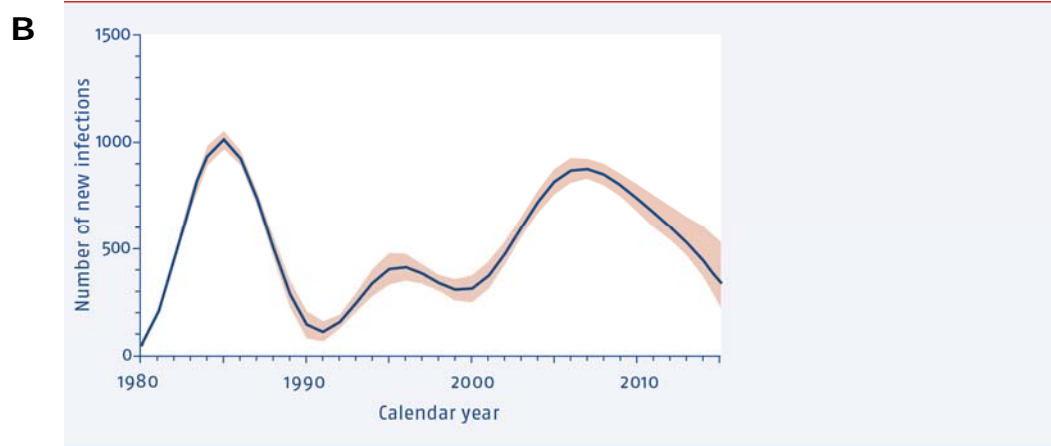
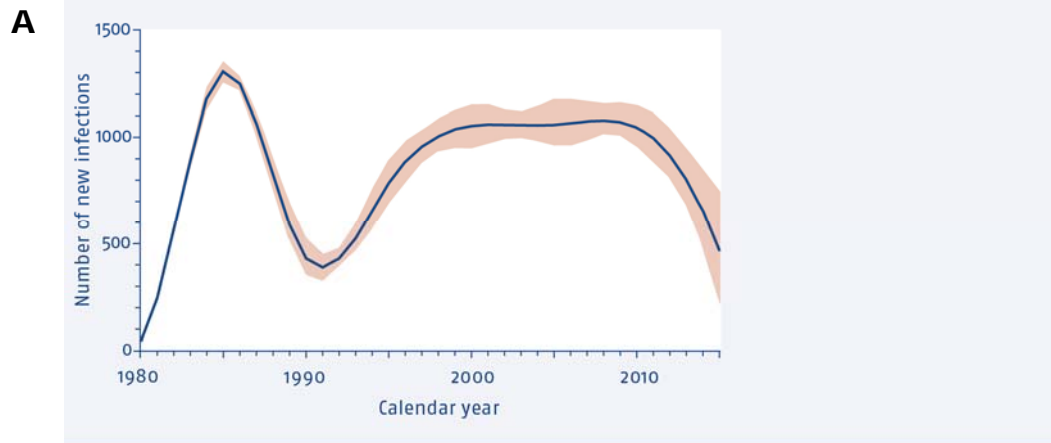
- High access to prevention (now including PrEP) and to treatment: free anonymous testing centers; MSM clinics; hospitals; medical laboratories; community testing; self-tests
- 300'000 tests performed last year in anonymous testing centers, out of 1.5M tests
- Only slight (4 %) increase in number of tests over previous years
- 88'000 self-tests during the same period
- Reluctance of general practitioners to encourage people to first-time and to repeated testing despite national guidelines
- Gap remains in testing rather than in access to treatment

# Western Europe: London

- 40% decrease in new HIV infections at Dean street and Mortimer street clinics this year.
- 50% of the gay men diagnosed are in early infection
- Improved testing and treatment (policy of immediate treatment)
- Active support and monitoring of PrEP on line buyers

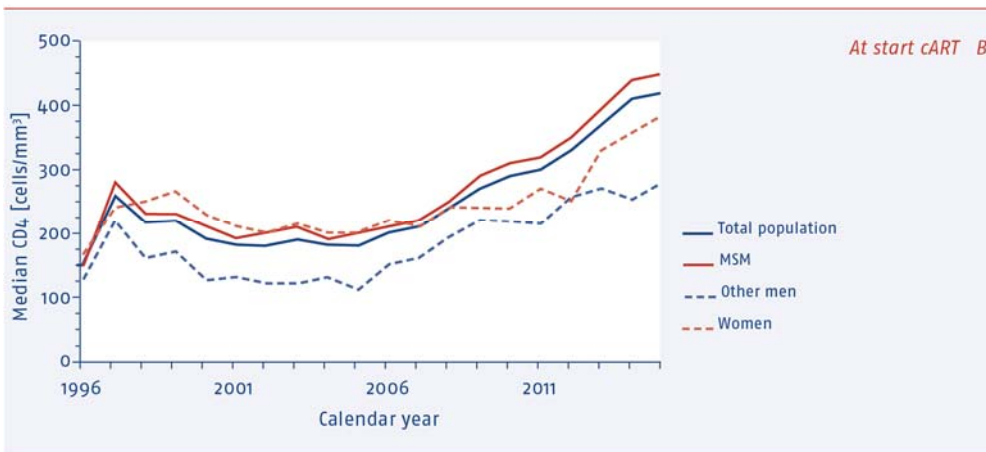
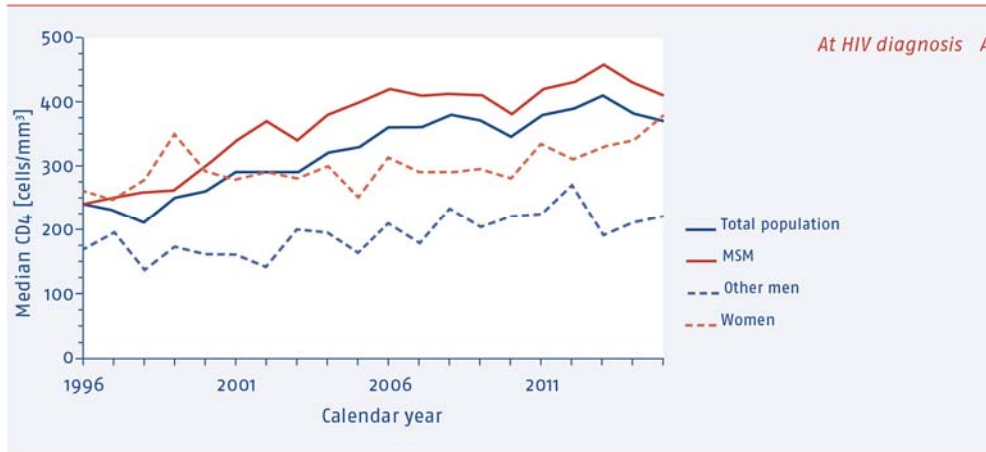
# Western Europe: Netherlands

*Estimated annual number of newly-acquired HIV infections and number of people living with undiagnosed HIV (A, C) in the entire HIV-positive population in the Netherlands and (B, D) in men who have sex with men.*



# Western Europe: Netherlands

Changes over calendar time in median CD4 counts (A) at HIV diagnosis and (B) at the start of combination antiretroviral therapy (cART).



Legend: MSM=men who have sex with men.

# Hepatitis C

- Over 50% of the people living with HCV in the European region do not know their status. HIV, HCV, TB and drug use: major interlinked challenges in Eastern Europe and Central Asia
- WHO Global strategy, EASL guidelines, 2016; National recommendations on testing
- Testing is the gateway to treatment. Testing for anti-HCV antibodies to be followed by testing for viral RNA
- Testing not linked to primary prevention since prevention is now primarily secondary prevention aimed at limiting liver damage



**A Public Health approach to test**

# A public health approach to testing

- Use all available tools to increase testing coverage
- Re-focus on most-at-risk populations and their partners through community-based testing, outreach services and self-testing
- Embed testing as much as possible in community services. These will require different approaches in different communities accompanied by community-based education about the availability/benefits of treatment of treatment for HIV and HCV

# A public health approach to testing

- Stimulate more systematic promotion of provider-initiated testing at primary care centers
- Reduce stigma and address legal and policy obstacles to testing
- Create rapid and easy linkages between testing and care
- We definitely need to think beyond health services