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OptTEST Newsletter

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OptTEST 2nd Annual Meeting

OptTEST partners, Advisory Board and national pilot sites and PLHIV networks met on the 17th May at [Instituto de Salud Carlos III](#) in Madrid. On the agenda for the meeting was follow-up on the mid-term evaluation recommendations and discussions on how best to secure sustainability of OptTEST results. Partners discussed progress and addressed specific WP issues through thematic group discussions. Several WPs presented preliminary results. Below are snapshots into some of the discussions.



Preliminary cost-effectiveness results

WP6 lead Yazdan Yazdanpanah presented preliminary results of the cost-effectiveness modelling work on HIV testing. A discussion unfolded about the usefulness of such modelling exercises, the results so far and the work ahead.

Why undertake this mathematical modelling?

The exercise of cost-effectiveness modelling provides decision makers with a useful tool as it enables forecasting of the possible impact of a given strategy in a given contexts and viewing of a setting from different angles. This exercise is very important at a time to justify where scarce resources should be allocated for better outcome

What does the research say so far?

So far the research indicates that scaling up of testing is cost-effective and that most-at risk groups should be offered testing more often than is currently the case. Across Europe, “migrants” have HIV prevalence rates similar to the general populations, however it was noted that high incidence in sub-groups of migrant is diluted in the current study. The discussion following the presentation of preliminary results, underlined that it would be useful to capture the sub-groups of migrant with higher prevalence. It was noted that variables with substantial impact differ across the three pilot countries (France, Spain and Estonia). For instance, there is an important difference in linkage to care, ART cost, HIV prevalence and incidence in the three countries.

What comes next?

Sensitivity analysis needs to be performed for testing of groups with different prevalence and incidence rates. The project will also construct scenarios of cost effectiveness of HIV testing in different settings. It will

Upcoming events

OptTEST at EATG European Community Advisory Board on Diagnostics

OptTEST project will be presented at the EATG European Community Advisory Board on Diagnostics 17 June in a session on European and national initiatives to scale up testing for key affected communities.

OptTEST at IAS2016 in Durban

OptTEST partners GNP+ and EATG will be present in the European Networking Zone and present project work. Partner NIHD has a poster presentation about quality of life for PLHIV in Estonia.

Face-to-face meeting in Glasgow

OptTEST Steering Committee will set up a face-to-face meeting in Glasgow, and there will be arranged specific WP meetings as needed.

HepHIV Malta 2017

The 2nd HepHIV conference will take place on Malta from 31 January to 2 February 2017. The overall aim of the conference is to further improve HIV and viral hepatitis testing and treatment by engaging stakeholders within the two fields and to stimulate exchange of experiences and best practice as well as presenting the latest evidence within the field of testing and linkage to care for HIV and viral hepatitis.

Abstract submission and registration for the conference will open October 2016. There will be a symposium for EU health programme co-financed projects working with HIV and hepatitis where results can be presented.

Joint EURO HIV Edat-OptTEST Final Conference, September 2017

As both projects are coming to an end

also consider the feasibility of a developing a simple tool which can be used by non-experts to calculate cost-effectiveness.

Interventions to address stigma in health care that impact on testing and linkage to care

In WP7, national PLHIV networks in 5 countries (Portugal, Poland, Estonia, Germany and Greece) are engaged in research and action pilot projects seeking to overcome stigma and barriers to HIV testing.

For instance, in Portugal the PLHIV organization Sero+ develops a project that addresses health professionals (doctors, nurses and others) from 3 health care centres (ACES) of the Great Lisbon area. This project will first identify barriers to offering HIV tests and organizational problems in conducting rapid tests in the centres via surveys and interviews. As research findings are analysed Sero+ will develop and implement interventions addressing the problems that have been identified. Progress in overcoming the identified barriers will then be measured.

In Poland, following research the non-disclosure due to fear of stigma will be addressed via a patient empowerment activity. A patient empowerment interventions will also take place in Estonia, and in Greece, research and interventions will focus on access to treatment in prisons.

Checkpoints and linkage to care monitoring for MSM

OptTEST WP4 and Euro HIV EDAT WP6 both focus on linkage to care after HIV diagnosis in clinical settings and community based voluntary testing and counselling centres (CBVCT) respectively. Partners from the two WPs met and discussed challenges to document linkage to care from community based voluntary testing and counselling centres (CBVCT). Clinics cannot report back to the CBVCTs on linkage to care without breaching the patient confidentiality laws. The information on linkage to care is available at the CBVCTs is obtained in an 'informal' way. Various ways of getting around the confidentiality barrier were discussed. The two projects also discussed the linkage to care definitions and whether CD4 count is a good marker. There is a risk of losing patients between the first reactive test and the confirmatory test/CD4. Furthermore not all hospitals accept a positive test from a CBVCT as the first test. OptTEST WP4 aims at developing a toolkit/document on improving linkage to care, but the challenge lies in the variations in the different countries. It was noted that it could provide examples of what "good linkage to care" looks like.

Joint OptTEST- Euro HIV EDAT meeting

The following day, on the 18th of May, OptTEST and Euro HIV EDAT project partners met to explore possible synergies between the projects. Status overviews were provided by all WPs and the expected outcomes presented.

The two projects focus on HIV testing and linkage to care - OptTEST in health care settings and HIV EDAT in CBVCTs. Some of the thematic overlaps between the projects are:

- Tools and guides to improve testing and linkage to care performance in sites
- Tools to improve data collection on testing and linkage to care
- Improved data linkage between sites and national surveillance system
- Tools to help setting up a Checkpoint or HIV testing in a clinic
- Innovating strategies to promote testing (self-sampling/self-testing; IC guided testing)
- Barriers to testing (for specific key groups; among health care staff)
- Cost-effectiveness of testing in different settings

in September 2017 there will be arranged a joint final conference to present results to a broader audience of stakeholders.

Social media

Remember to follow OptTEST on FB ([OptTEST by HiE](#)) and Twitter ([@OptTESTbyHiE](#)).

Please visit the [OptTEST.eu](#) webpage to read more news.



Conference dinner at La Bobia, Madrid

The participants discussed possibilities for joint publications and dissemination activities, and it was among other things agreed to coordinate project presentations at the 2017 HepHIV Malta conference and organize a joint final conference in September 2017.

[Chafea](#) project officer Cinthia Menel-Lemos presented European Commission funding opportunities, in particular funding for networks under the [Joint Actions](#). For this the first step in order to seek this support is to be nominated by ones [national representative](#) – and the deadline is 16th June 2016. More information can be found here:

<http://ec.europa.eu/chafea/health/actions.html>



OptTEST Main Partner and coordinating team: CHIP, Department of Infectious Diseases, Section 2100, Finsencentret, Blegdamsvej 9, DK- 2200 Copenhagen, Denmark, Tel: +45 35 45 57 57, Fax: +45 35 45 57 58, e-mail: opttest.rigshospitalet@regionh.dk
Website: <http://www.opttest.eu>

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