



A fast-track HIV and viral hepatitis screening service in Barcelona, Spain

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INTRODUCTION

We aimed to enhance HIV and viral hepatitis B and C diagnosis among patients seeking care at Hospital Clínic de Barcelona, Spain.

METHODS

We implemented a fast-track, immediate referral to specialist care in a novel sexually transmitted infection outpatient clinic for adult patients presenting with genitourinary complaints or reporting recent high-risk exposures without accompanying symptoms.

RESULTS

Between January 2020 and December 2022, we conducted a combined 35,285 tests, with eligible patient coverage of 70% for HIV Ab, 49% for HBsAg, and 92% for HCV Ab.

We diagnosed 38 new HIV infections (0.41% prevalence), of which 80% were in the age range of 23-40 years, and 95% were male, and 45% were in the acute phase.

There were also 85 new HBV infections (0.98% prevalence), of which 92% were in the age range of 31-90 years, 89% were male, 86% were from countries where HBV prevalence is <2%, and 10% reported injected drug use.

We additionally identified 34 new HCV infections (1.39% HCV Ab+ prevalence, 21.25% HCV RNA positivity rate, 0.30% HCV RNA+ prevalence), of which 90% were aged 31-90 years, 92% were male, and 8% reported injected drug use.

Linkage to care was achieved for 89% (n=34), 98% (n=83), and 100% (n=34) of HIV, HBV, and HCV patients. Moreover, 297 known HIV Ab+, 2 HBsAg+, and 25 HCV Ab+ patients who had previously fallen out of care were successfully relinked to care.

HIV and viral hepatitis positive patient characteristics

	HIV Ab positive patients identified through testing n (%)	Not tested/know n HIV Ab positive patients out of care n (%)	HBsAg positive patients identified through testing n (%)	HCV Ab positive patients identified through testing n (%)	HCV RNA positive patients identified through testing n (%)
Total	38 (100%)	298 (100%)	85 (100%)	241 (100%)	34 (100%)
Age					
18-22	2 (5%)	10 (3%)	0 (0%)	1 (0%)	1 (3%)
23-30	11 (29%)	107 (36%)	7 (8%)	27 (11%)	7 (21%)
31-40	19 (50%)	111 (37%)	17 (20%)	90 (37%)	12 (35%)
41-50	4 (11%)	43 (14%)	21 (25%)	63 (26%)	10 (29%)
51-90	2 (5%)	27 (9%)	40 (47%)	60 (25%)	4 (12%)
Sex					
Male	36 (95%)	238 (80%)	76 (89%)	222 (92%)	34 (100%)
Female	1 (3%)	18 (6%)	7 (8%)	12 (5%)	0 (0%)
Transgender	1 (3%)	42 (14%)	2 (2%)	7 (3%)	0 (0%)
Injected drug use					
Yes	0 (0%)	5 (2%)	6 (8%)	11 (7%)	unavailable
No	35 (92%)	269 (90%)	52 (69%)	129 (83%)	unavailable
Unknown	3 (8%)	24 (8%)	17 (23%)	15 (10%)	unavailable

HIV Ab: HIV antibody; HBsAg: hepatitis B virus surface antigen; HCV Ab: hepatitis C virus antibody; HCV RNA: hepatitis C virus ribonucleic acid.

DISCUSSION

Our study demonstrated the efficacy of a fast-track screening protocol for HIV and viral hepatitis. The prevalence rates found in our project suggest that adults seeking care in highprevalence urban settings should be considered for robust blood-borne virus screening policies. The high linkage to care rates indicate that immediate referral to specialist care is critical to ensure that patients receive appropriate treatment and follow-up.

ACKNOWLEDGMENTS

Financial support from Gilead Sciences' FOCUS program supports screening and linkage to healthcare after diagnosis.