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HIV testing in England and the NICE Quality Standards

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HIV Testing in England: 2017 report


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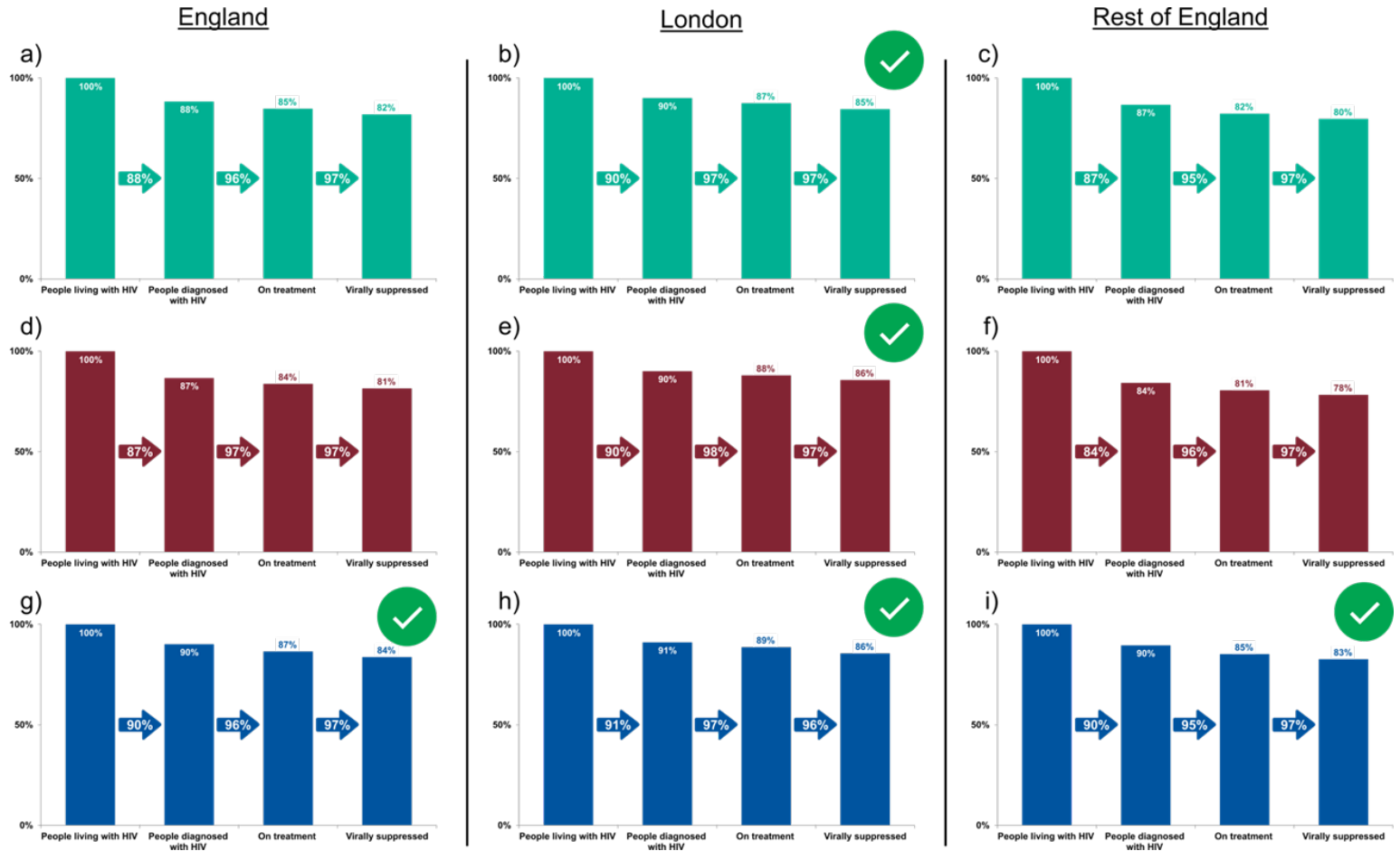
Towards elimination of HIV transmission, AIDS and HIV-related deaths in the UK

The continuum of HIV care by region of residence and risk group, England: 2016

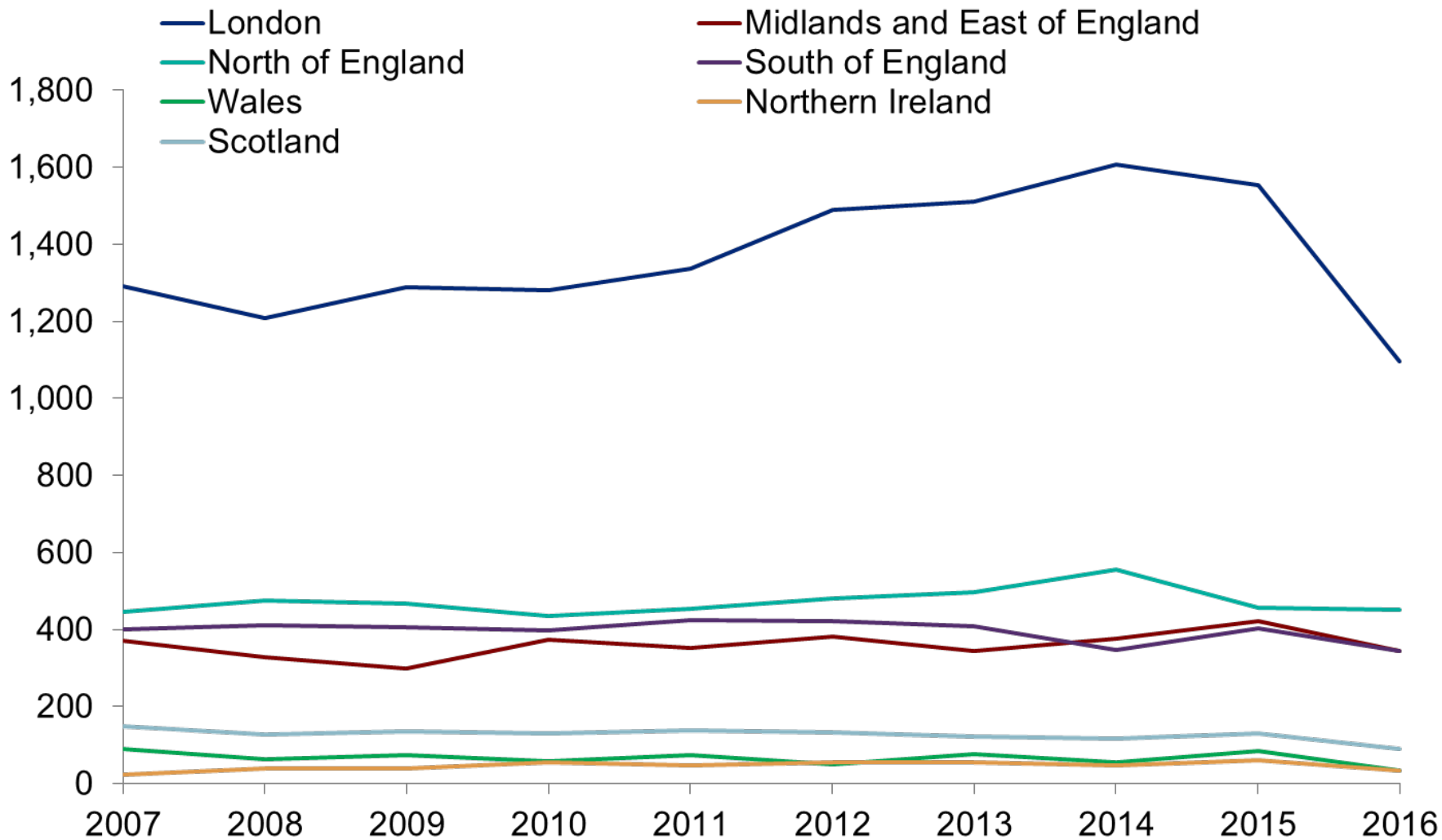
All

Gay and bisexual men

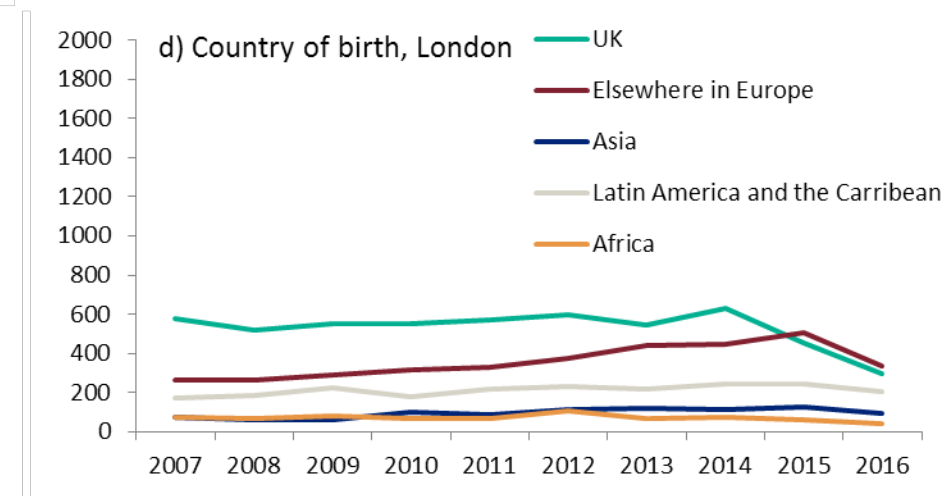
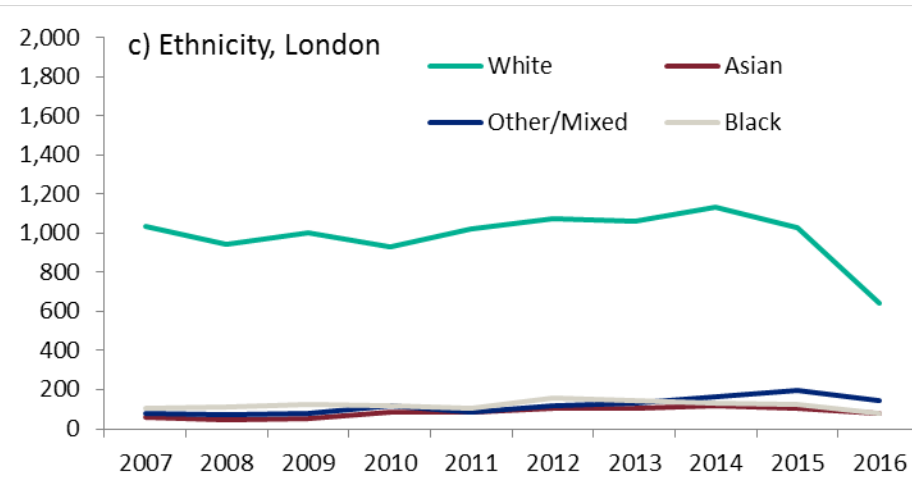
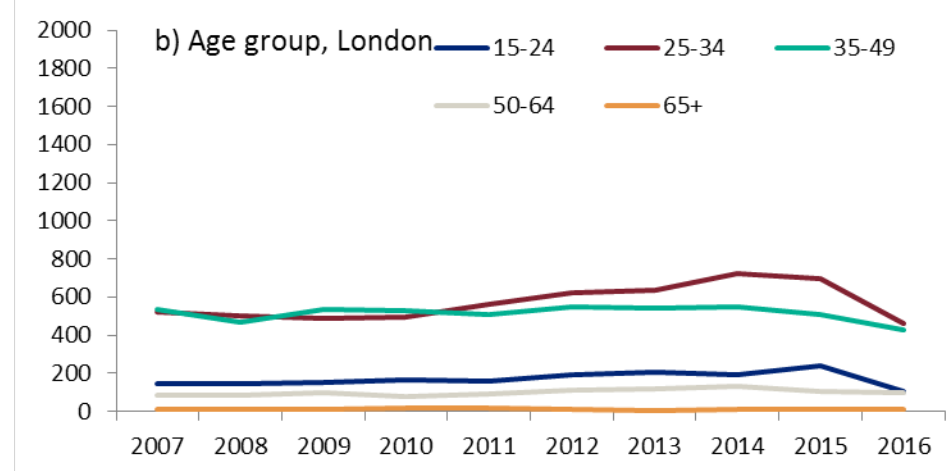
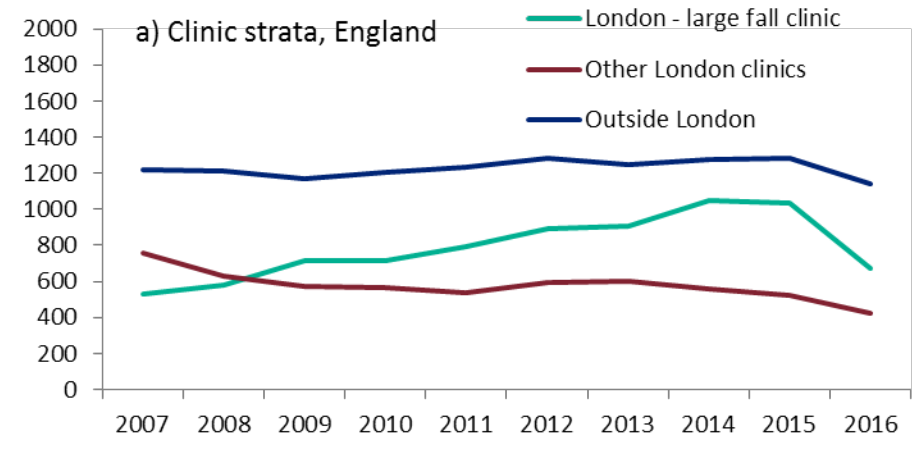
Heterosexual men and women



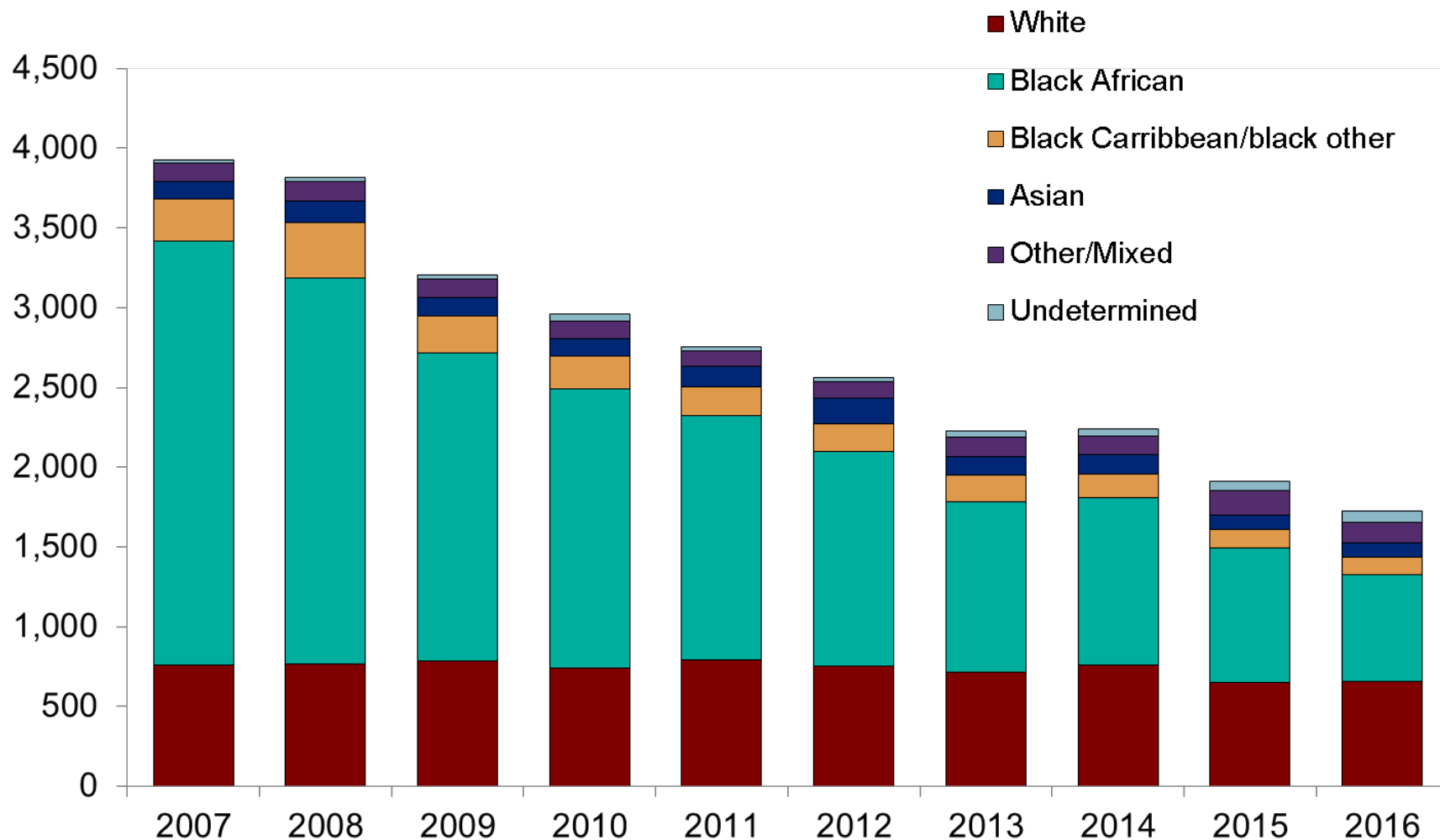
Geographical trends of new HIV diagnosis among gay and bisexual men: United Kingdom, 2007-2016



HIV diagnoses among gay and bisexual men, by population characteristics: England and London, 2007-2016

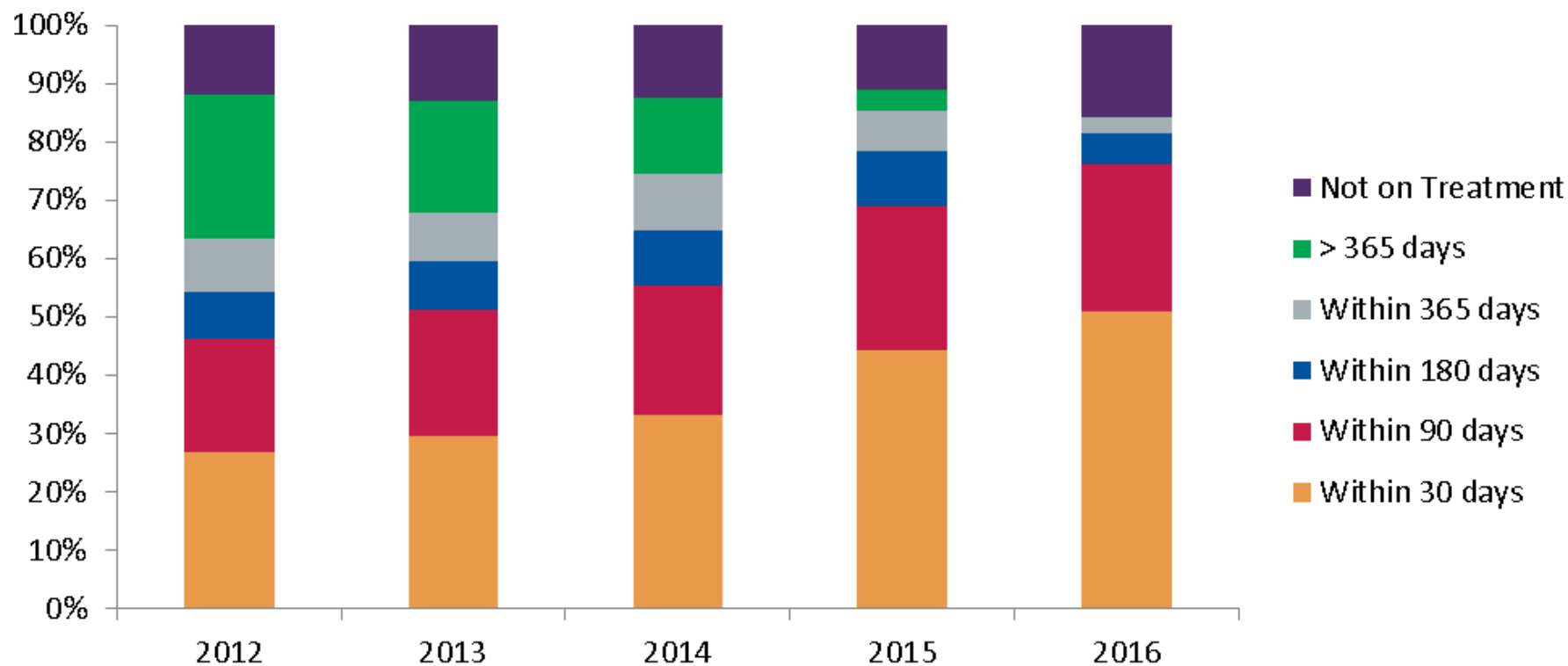


New HIV diagnoses among heterosexuals by ethnicity: United Kingdom, 2007-2016

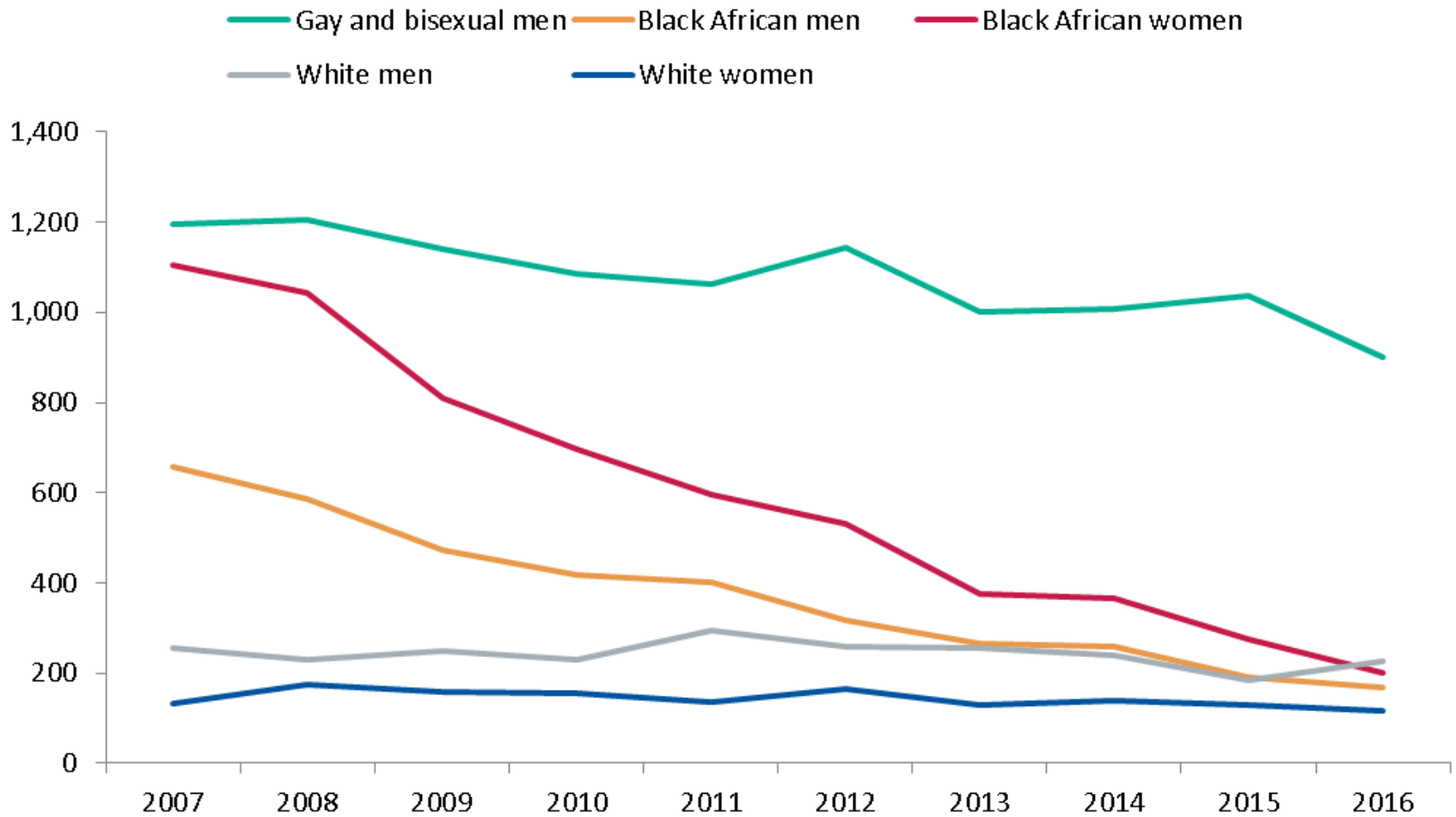


Values are adjusted for missing ethnicity

Time to treatment among patients newly diagnosed with HIV: UK, 2011-2016

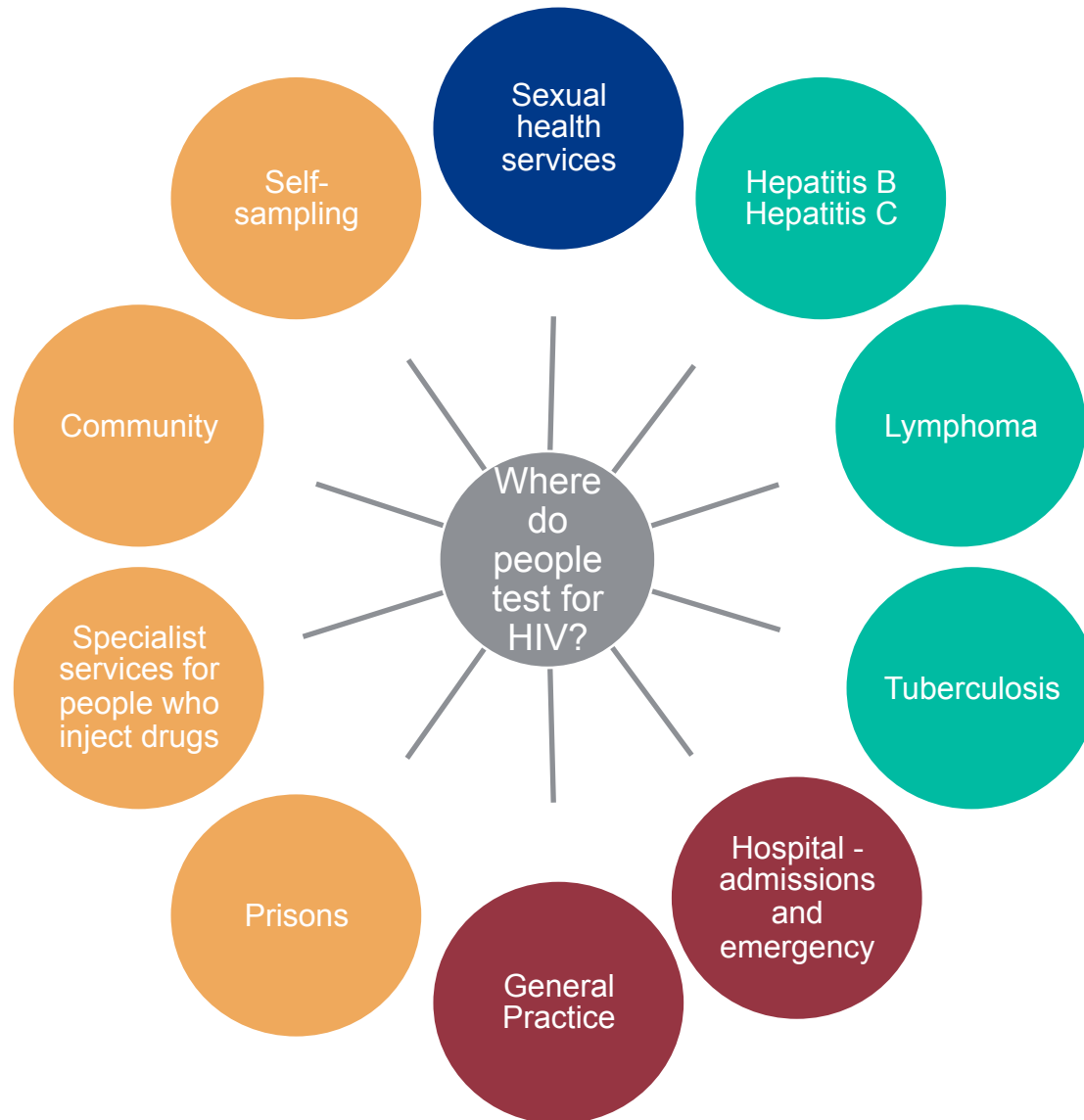


Adjusted number of people diagnosed late by exposure group: UK, 2007-2016



Adjusted for missing CD4 count at diagnosis.

NICE Guideline: Increasing HIV testing

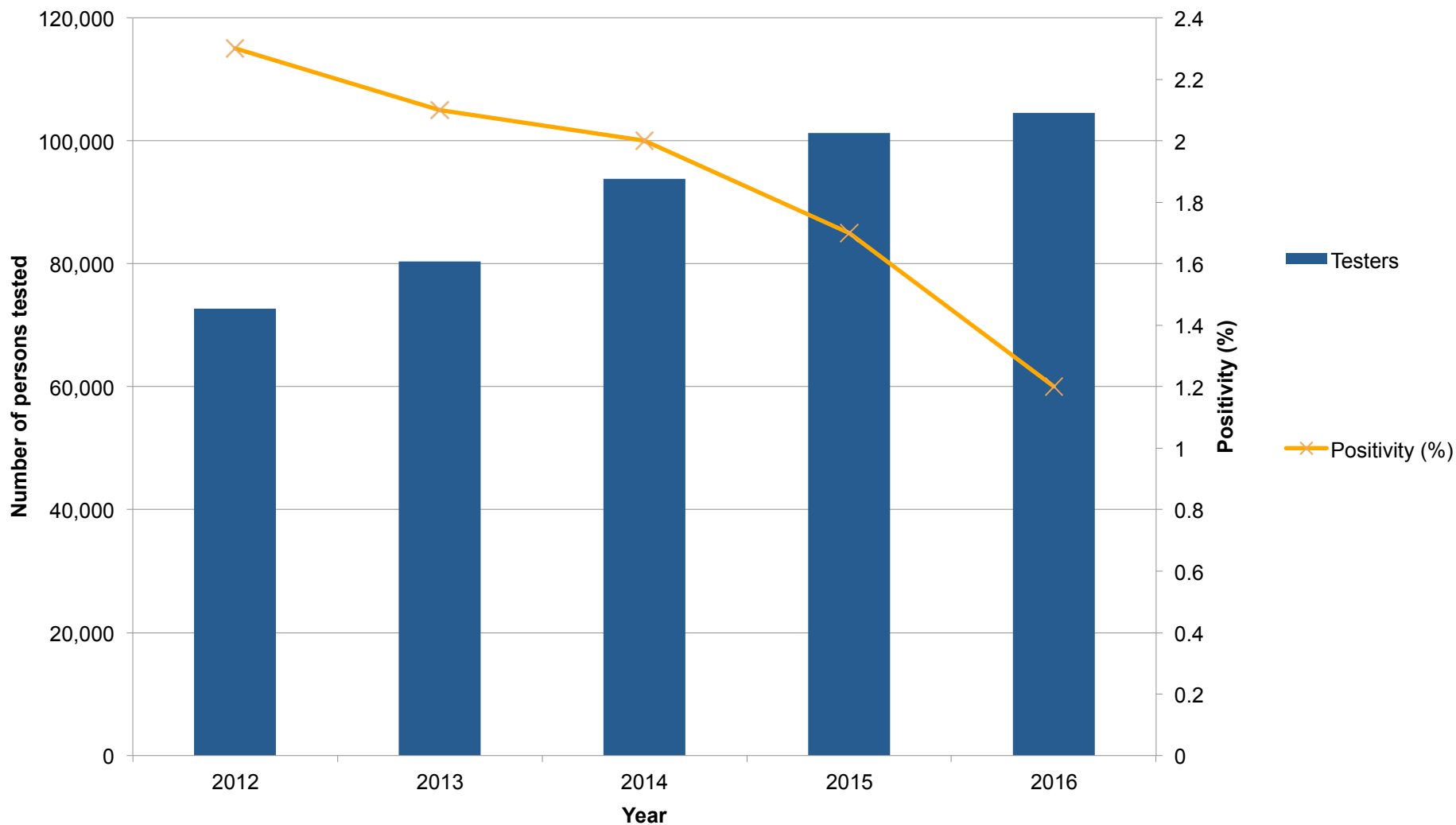


NICE guideline: HIV testing in specialist sexual health services

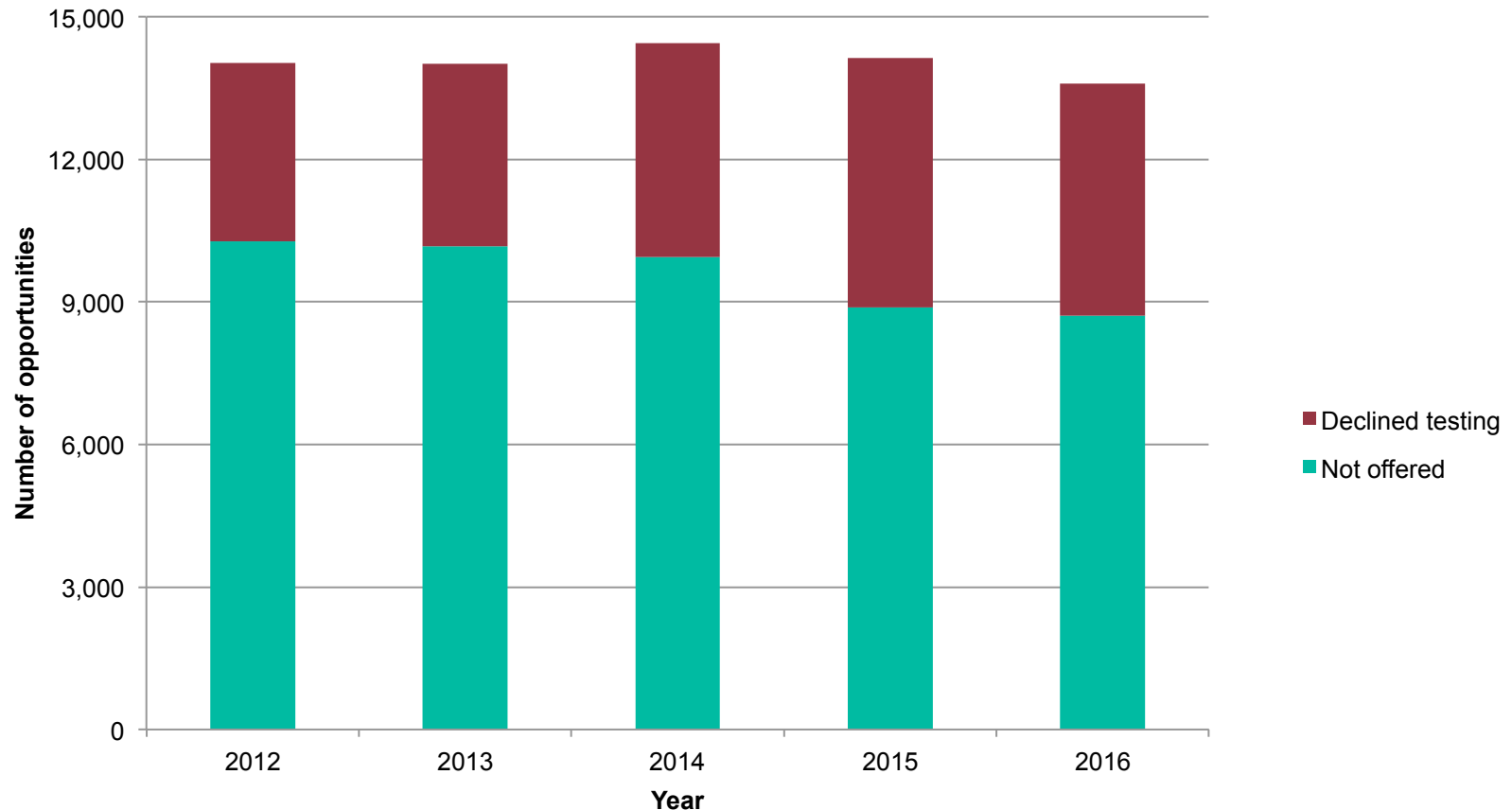
Offer and recommend HIV tests to:

- Everyone who attends for testing or treatment
- Partners of people who test positive for HIV
- Annual or more frequent testing for people in groups with high rates of HIV

Trends in HIV testing and positivity for gay and bisexual men, 2012-2016, England Residents

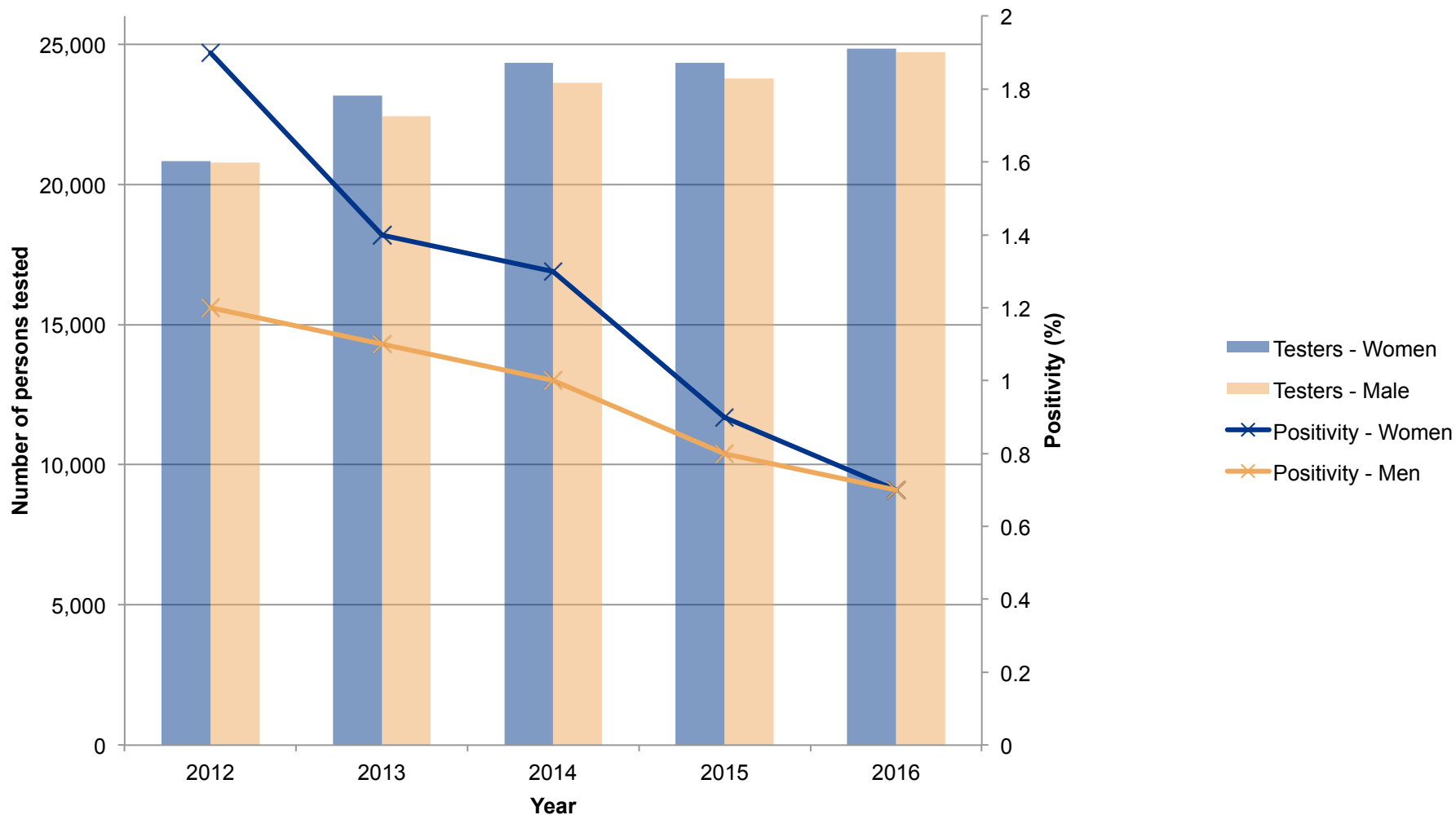


Trends in the number of missed opportunities in SHS: eligible¹ gay and bisexual attendees not offered an HIV test or offered but declined an HIV test, 2012-2016



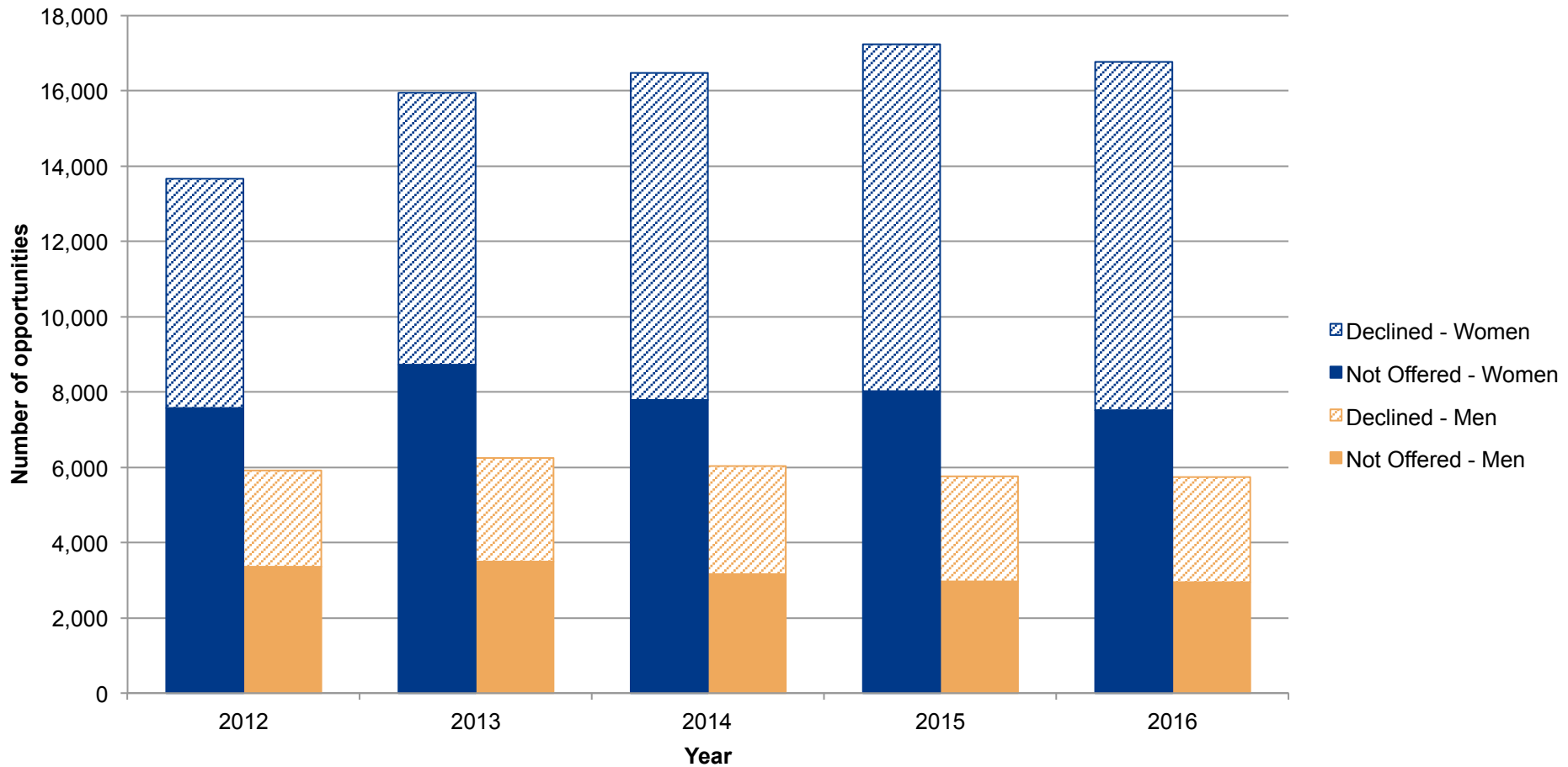
¹ eligible SHS attendee: any patient attending a SHS at least once during a calendar year; patients known to be HIV positive or for whom an HIV test was not appropriate, or for whom the attendance was reported as being related to SRH care only are excluded. This includes England residents only.

Trends in HIV testing and positivity for eligible¹ black African men and women attending SHS, 2012-2016, England Residents



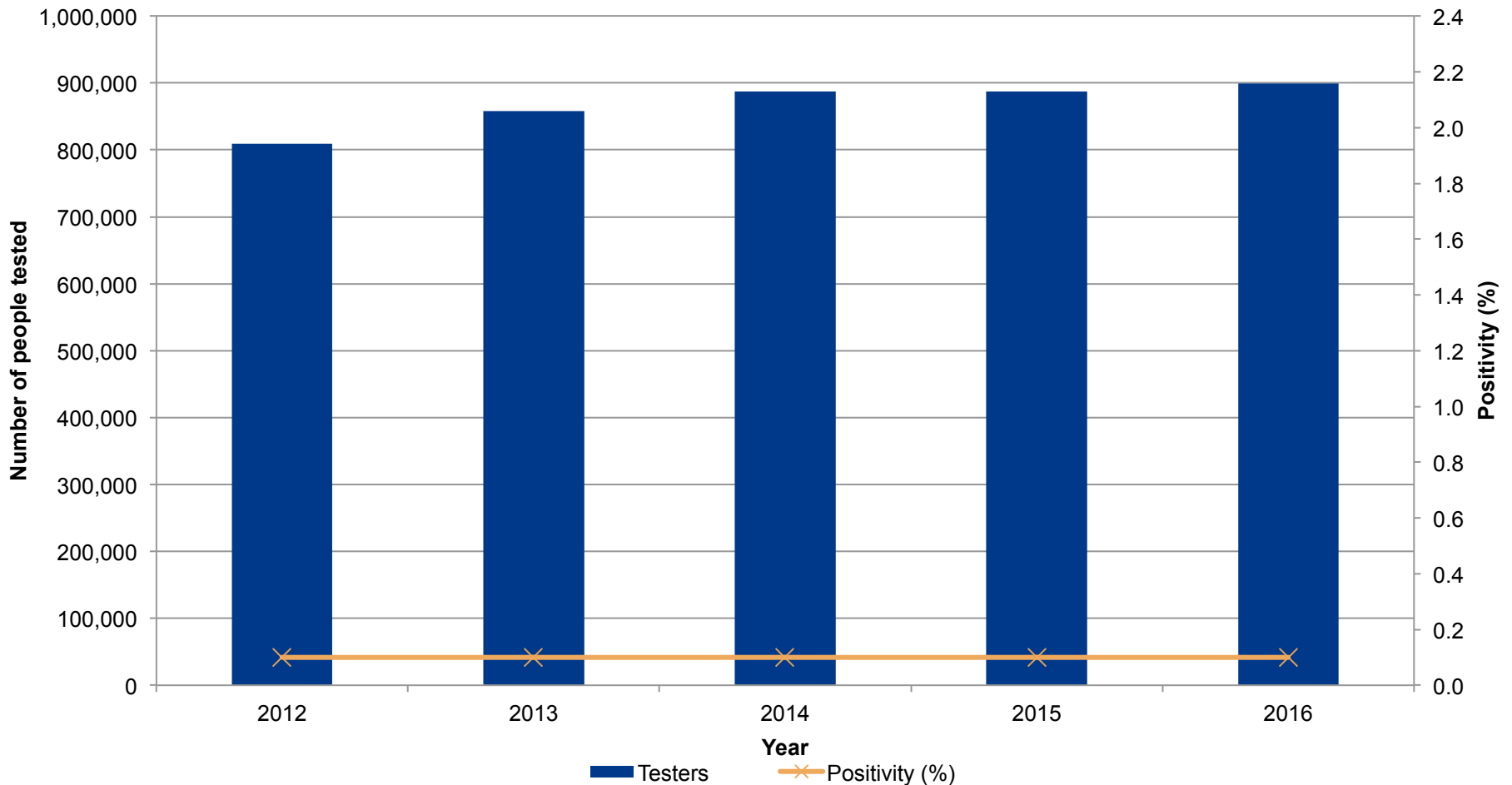
¹ eligible SHS attendee: any patient attending a SHS at least once during a calendar year; patients known to be HIV positive or for whom an HIV test was not appropriate, or for whom the attendance was reported as being related to SRH care only are excluded. This includes England residents only.

Trends in the number of missed opportunities in SHS eligible¹ black African men and women not offered and HIV test or offered but declined an HIV test, 2012-2016



¹ eligible SHS attendee: any patient attending a SHS at least once during a calendar year; patients known to be HIV positive or for whom an HIV test was not appropriate, or for whom the attendance was reported as being related to SRH care only are excluded. This includes England residents only.

Trends in HIV testing and positivity for eligible¹ other² SHS attendees, 2012-2016, England Residents

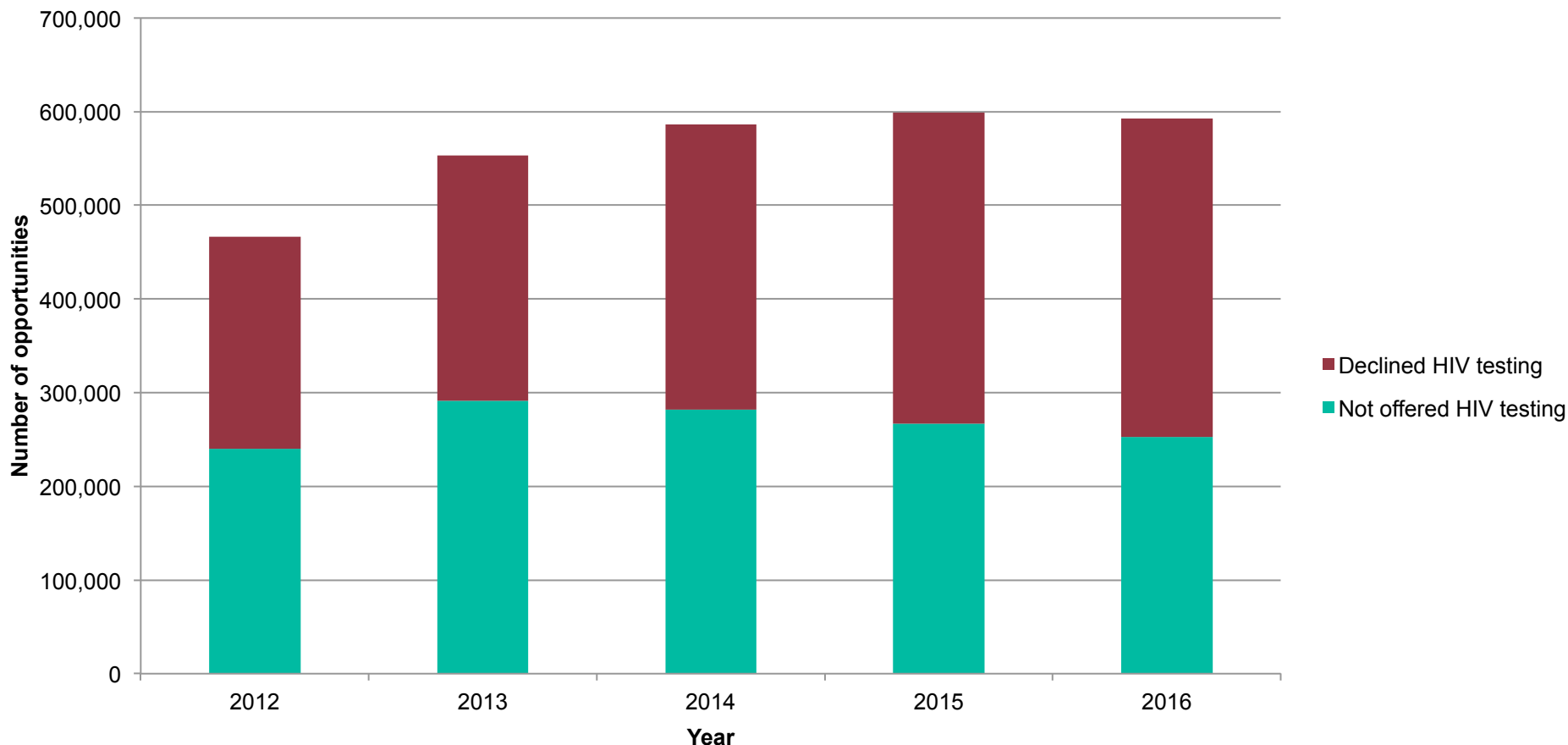


¹ an other attendee is an attendee who is not a gay and bisexual male, black African man or woman or born in a country with high HIV prevalence³

² eligible SHS attendee: any patient attending a SHS at least once during a calendar year; patients known to be HIV positive or for whom an HIV test was not appropriate, or for whom the attendance was reported as being related to SRH care only are excluded; includes England residents only.

³ countries where known HIV diagnosed prevalence is >1% in ages 15-49 [See [UNAIDS Report](#)]

Trends in the number of missed opportunities in SHS: other¹ eligible attendees² not offered and HIV test or offered but declined an HIV test, 2012-2016



¹ an other attendee is an attendee who is not a gay and bisexual male, black African man or woman or born in a country with high HIV prevalence³

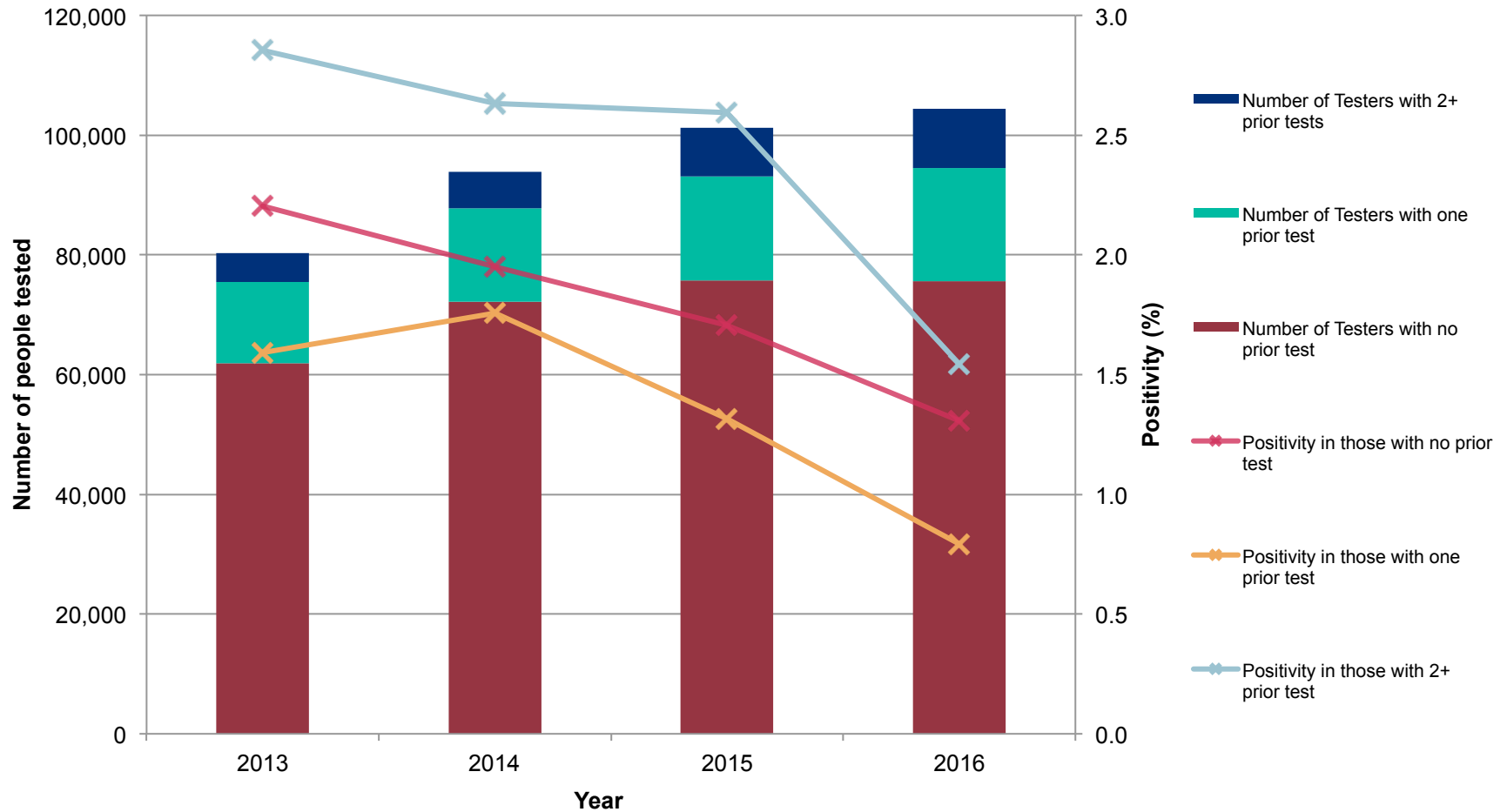
² eligible SHS attendee: any patient attending a SHS at least once during a calendar year; patients known to be HIV positive or for whom an HIV test was not appropriate, or for whom the attendance was reported as being related to SRH care only are excluded; includes England residents only.

³ countries where known HIV diagnosed prevalence is >1% in ages 15-49 [See [UNAIDS Report](#)]

NICE Quality Standards for HIV testing

- People in at-risk groups advised to test at least annually
- People exposed to HIV by a person newly diagnosed with HIV
- People admitted to hospital or attending an emergency department
 - All (extremely high prevalence area),
 - Those having a blood test (high prevalence area)
- People registering at a general practitioner, or having a blood test (if they have not had an HIV test in the past 12 months)
 - High and extremely high prevalence areas
- People newly diagnosed with an HIV indicator condition

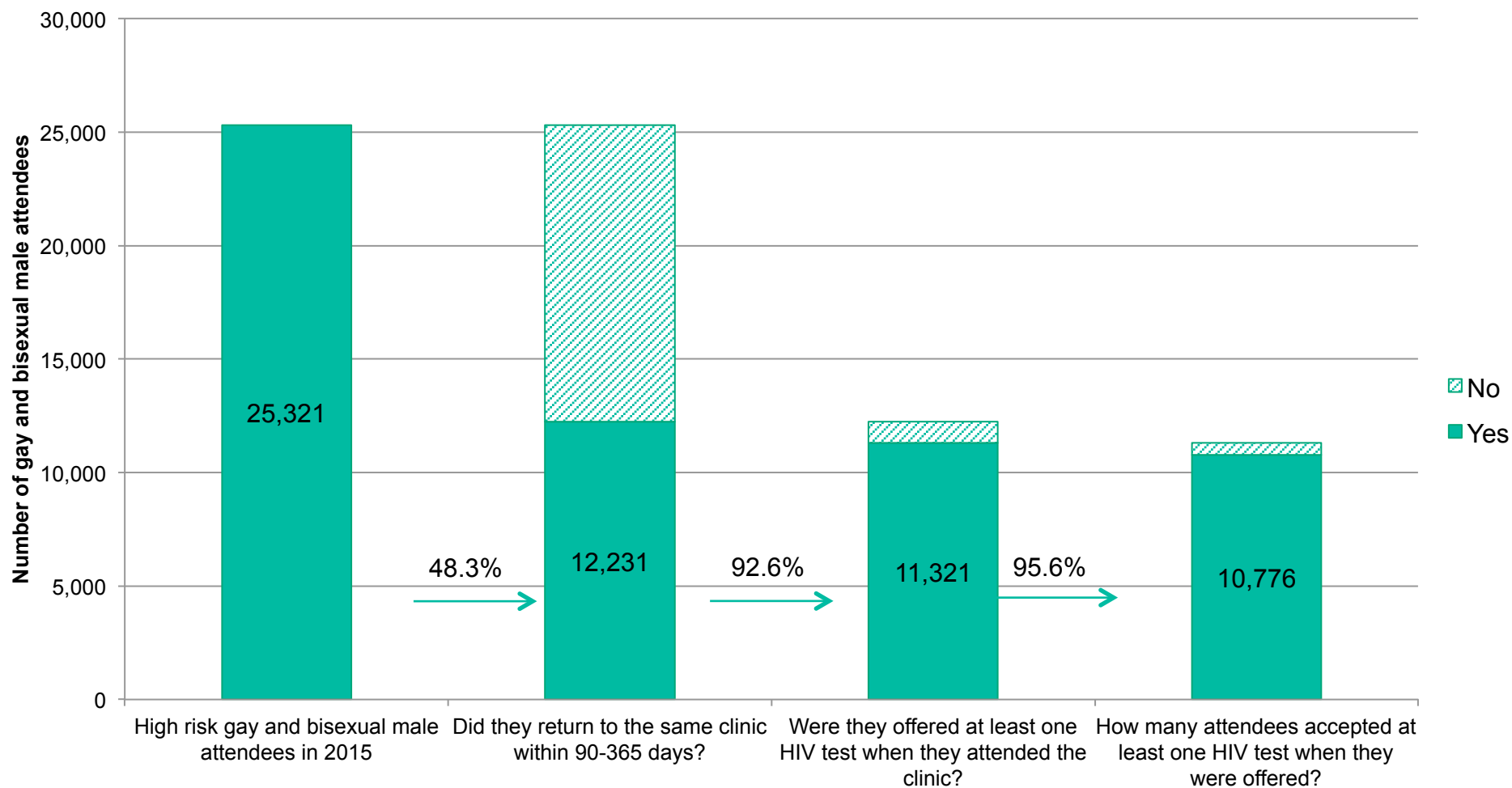
Trends in HIV testing and positivity among gay and bisexual men without a prior HIV test¹, with 1 prior test^{1,2} and with 2+ prior tests^{1,2}, 2013-2016



¹ prior HIV test is an HIV test in the 43-365 days preceding the attendee's first HIV test in that calendar year.

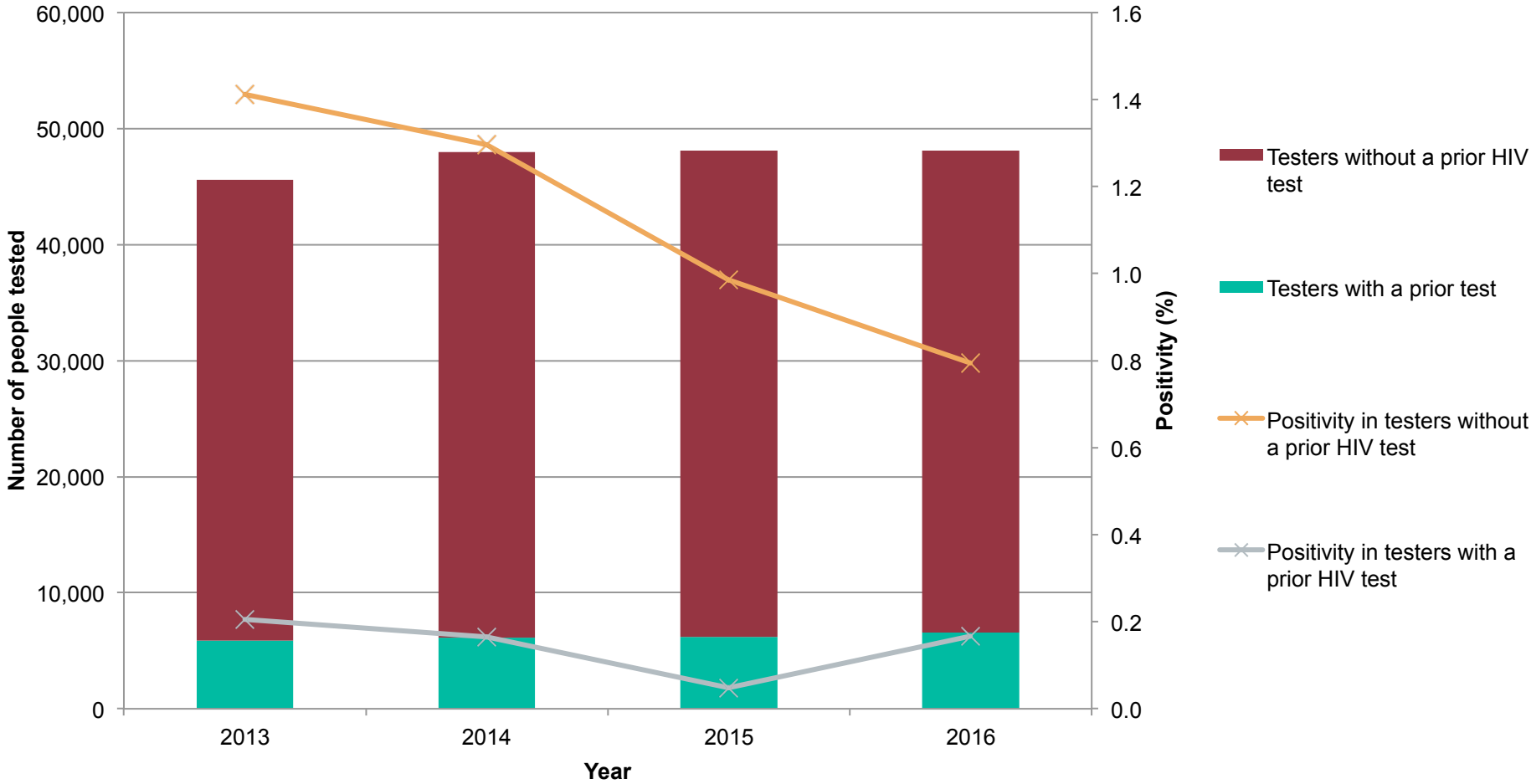
² this data represents testers who returned to test at the same SHS

HIV testing cascade among gay and bisexual men who have a high HIV risk¹ who attended specialist SHS, 2015-2016



¹ Includes gay and bisexual men with an anogenital bacterial STI diagnosis in 2015.

Trends in HIV testing and positivity among black African men and women with and without a prior HIV test¹, 2013-2016, England Residents

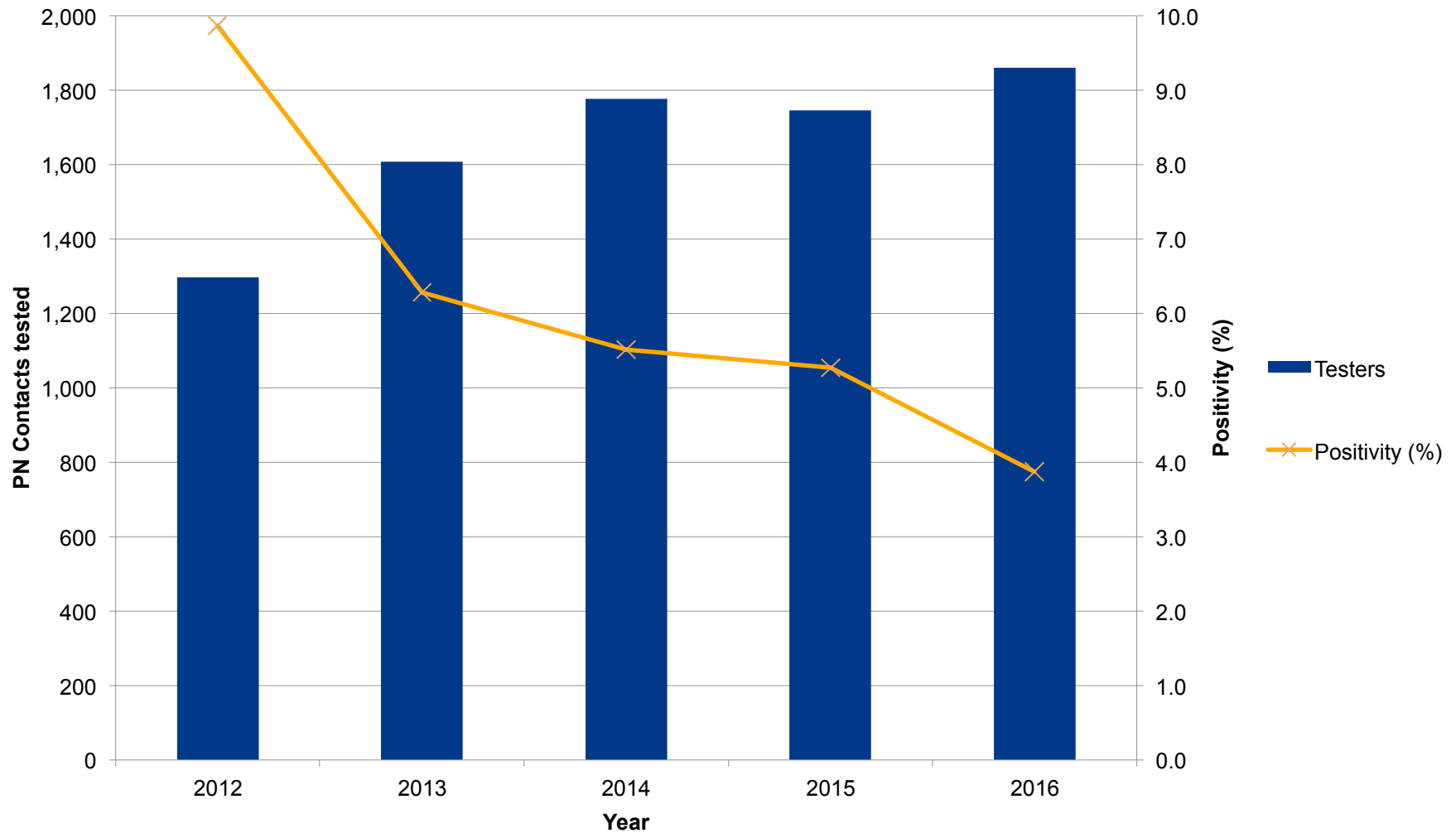


¹ prior HIV test is an HIV test in the 43-365 days preceding the attendee's first HIV test in that calendar year

NICE Quality Standards for HIV testing

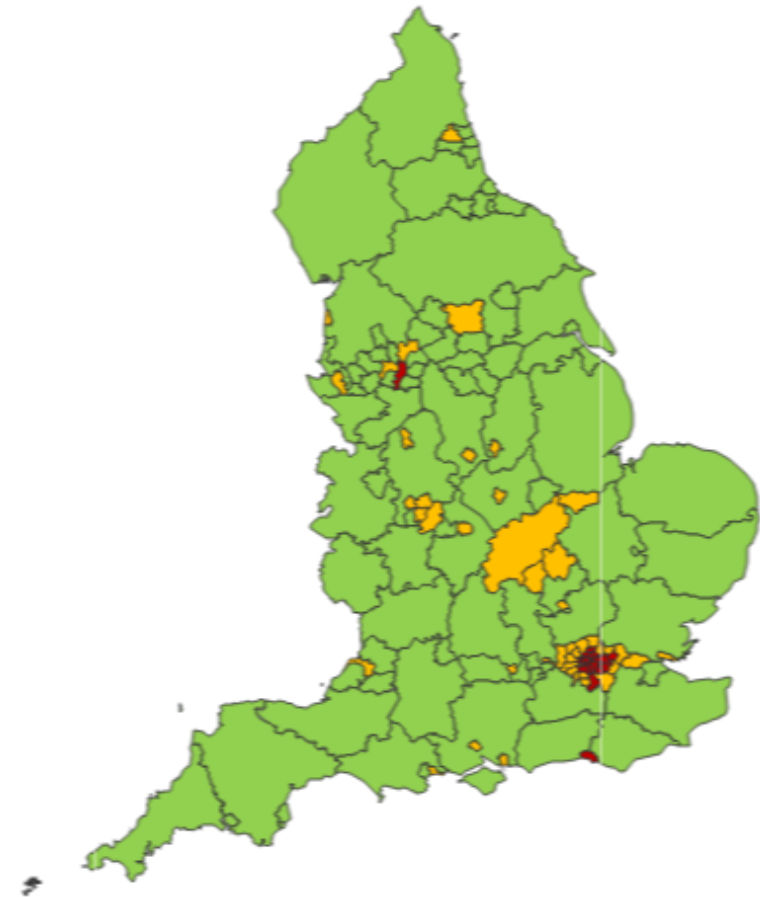
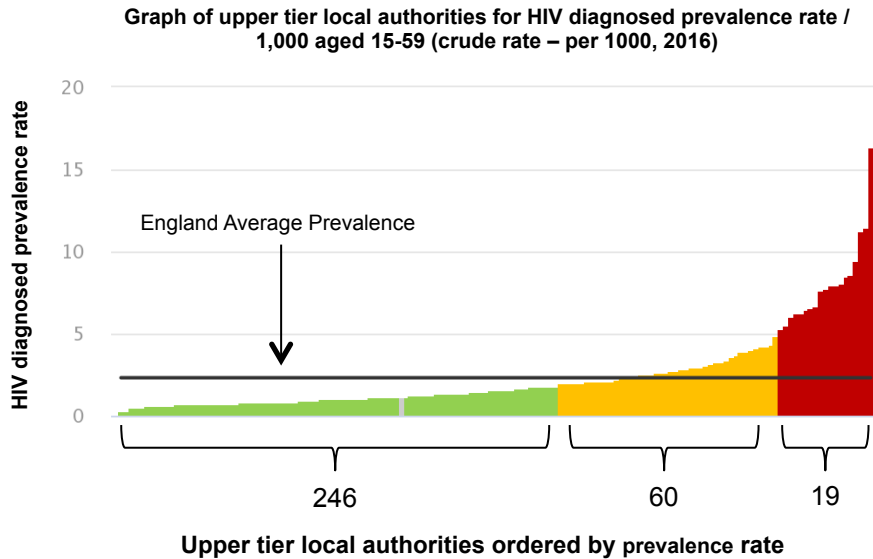
- People in at-risk groups advised to test at least annually
- People exposed to HIV by a person newly diagnosed with HIV
- People admitted to hospital or attending an emergency department
 - All (extremely high prevalence area),
 - Those having a blood test (high prevalence area)
- People registering at a general practitioner, or having a blood test (if they have not had an HIV test in the past 12 months)
 - High and extremely high prevalence areas
- People newly diagnosed with an HIV indicator condition

Partner notification contacts tested for HIV and positivity in specialist SHCs, England residents 2012-2016



Diagnosed HIV prevalence bands

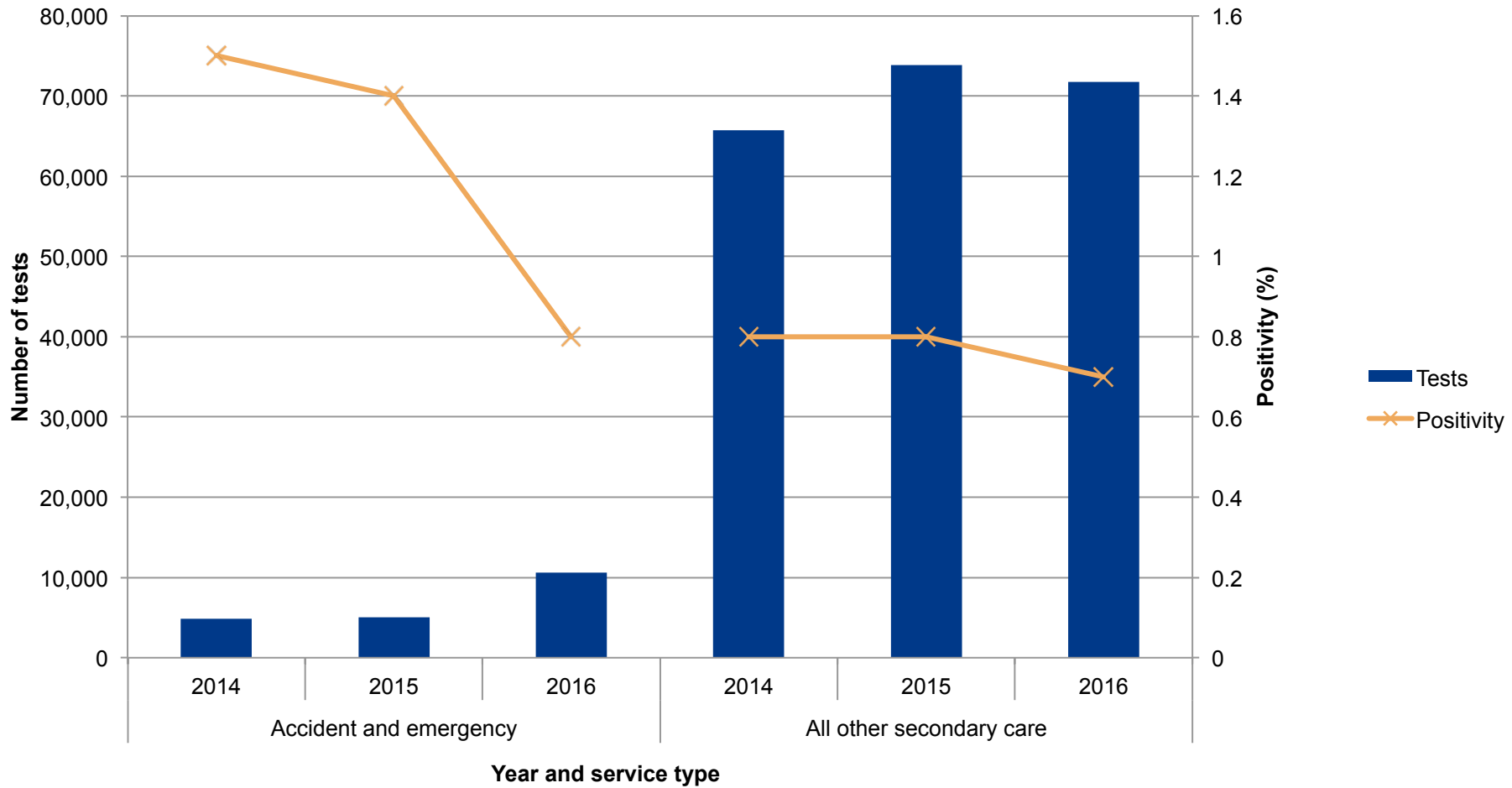
Map of upper tier local authorities for HIV diagnosed prevalence rate / 1,000 aged 15-59 (crude rate – per 1000, 2016)



NICE Quality Standards for HIV testing

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- People registering at a general practitioner, or having a blood test (if they have not had an HIV test in the past 12 months)
 - High and extremely high prevalence areas
- People newly diagnosed with an HIV indicator condition

Trends in the total number of tests and positives in accident and emergency and all other secondary care settings¹ in data captured by the SSBBV², 2016



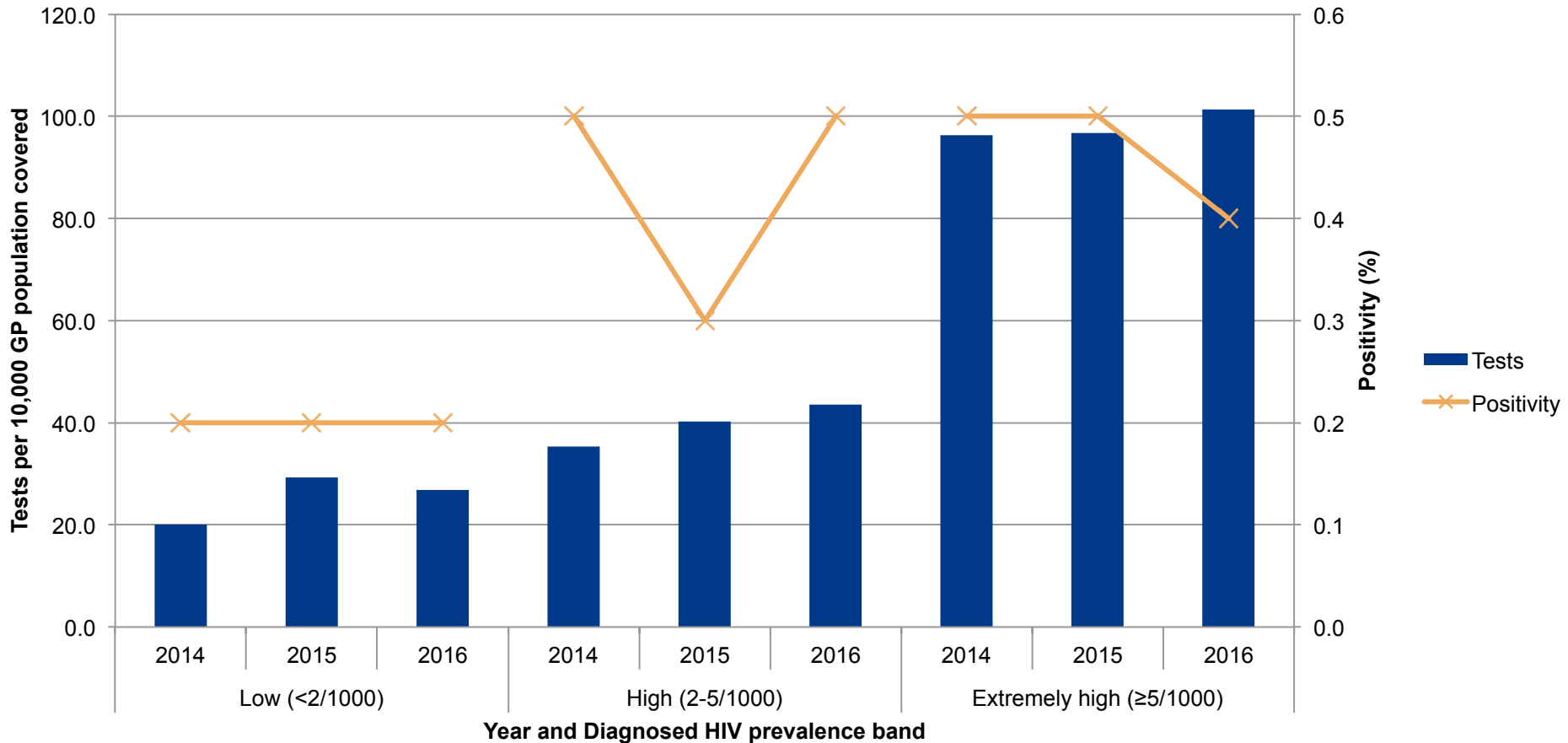
¹ comprises of HIV tests carried out in all other secondary care services other than A&E except antenatal and HIV services.

² from services within the sentinel surveillance of blood borne virus testing who consistently reported between 2014-2016.

NICE Quality Standards for HIV testing

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 - Those having a blood test (high prevalence area)
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 - High and extremely high prevalence areas
- People newly diagnosed with an HIV indicator condition

HIV tests and positivity¹ in general practice² by diagnosed HIV prevalence band³ in data captured by SSBBV, England, 2014-2016



¹ number of positive tests/number of total tests (x100%)

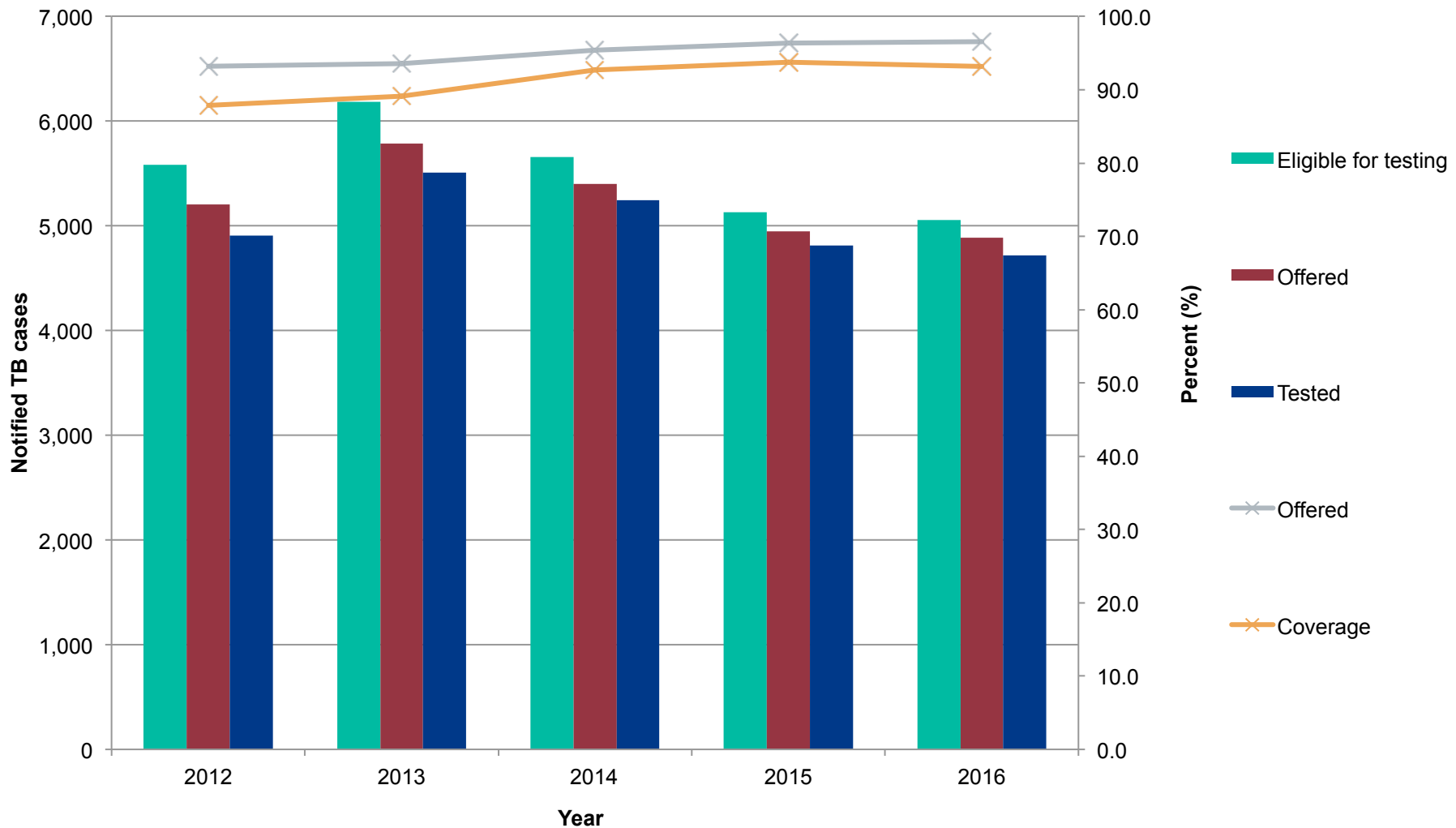
² GP practices who consistently reported to SSBBV from 2014-2016

³ based on the diagnosed HIV prevalence data in those aged 15-59 in 2016, banding by service local authority

NICE Quality Standards for HIV testing

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- People exposed to HIV by a person newly diagnosed with HIV
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- People registering at a general practitioner, or having a blood test
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HIV testing offer and coverage¹ in notified TB cases² by year, England 2012-2016



¹ coverage % is defined as % of notified TB cases tested for HIV

² total with previously unknown HIV status where HIV testing is known and excluding those diagnosed post-mortem

HIV testing: hepatitis B & C



32,114 people test +ve for anti-HCV

45.4% tested for HIV within 6 months

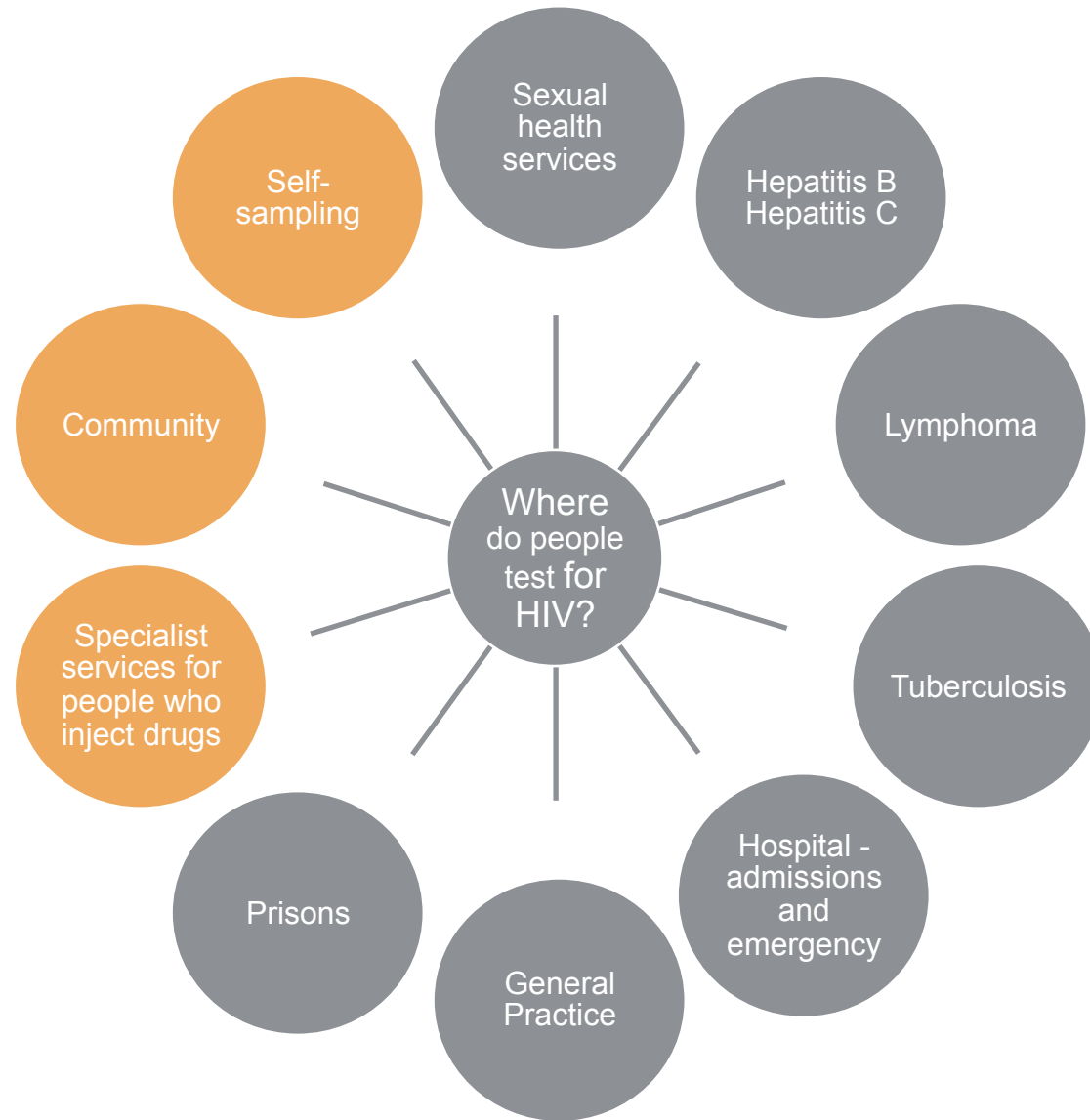
1.9% HIV positive

16,086 people test +ve for HBsAg

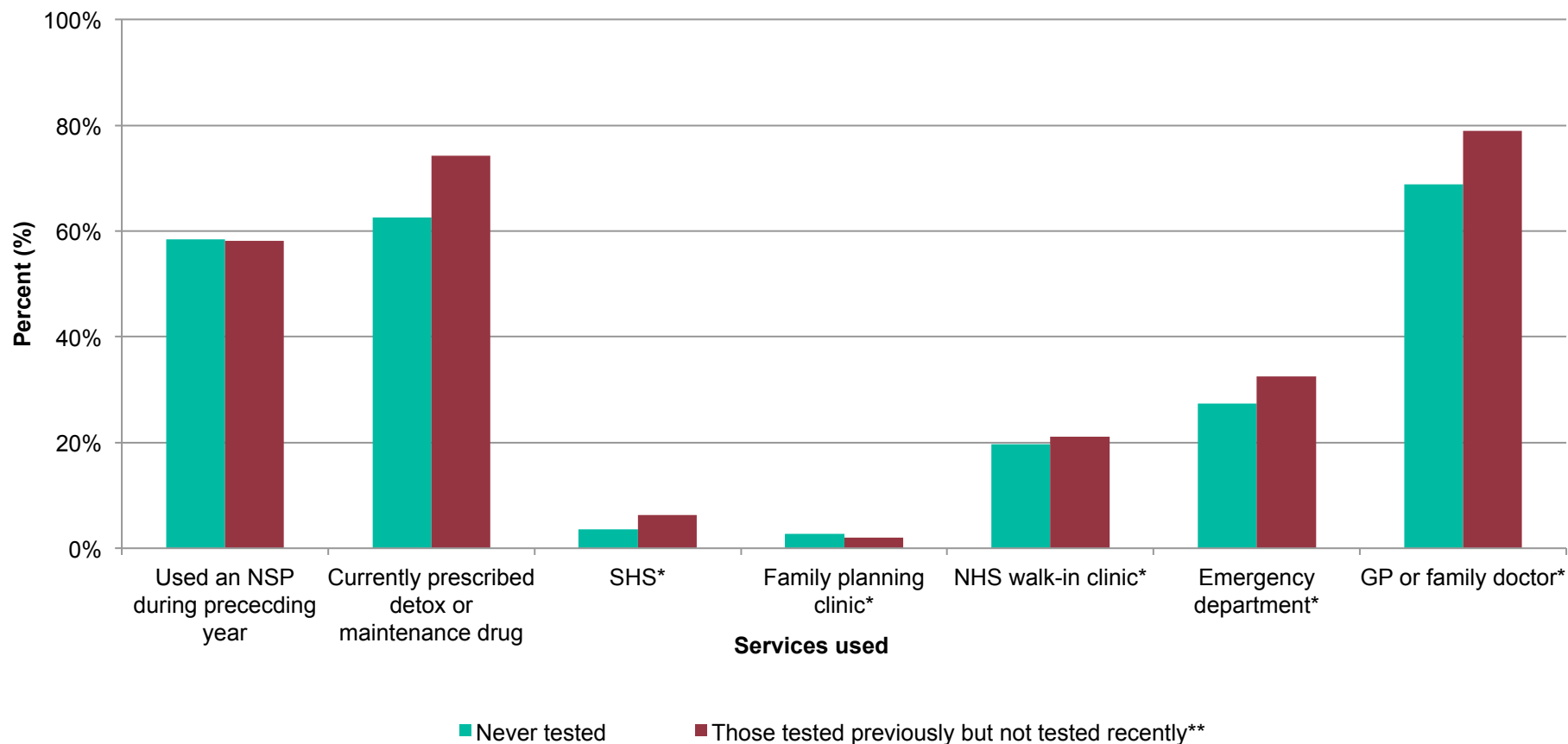
45.5% tested for HIV within 6 months

2.4% HIV positive

NICE Guideline: Increasing HIV testing



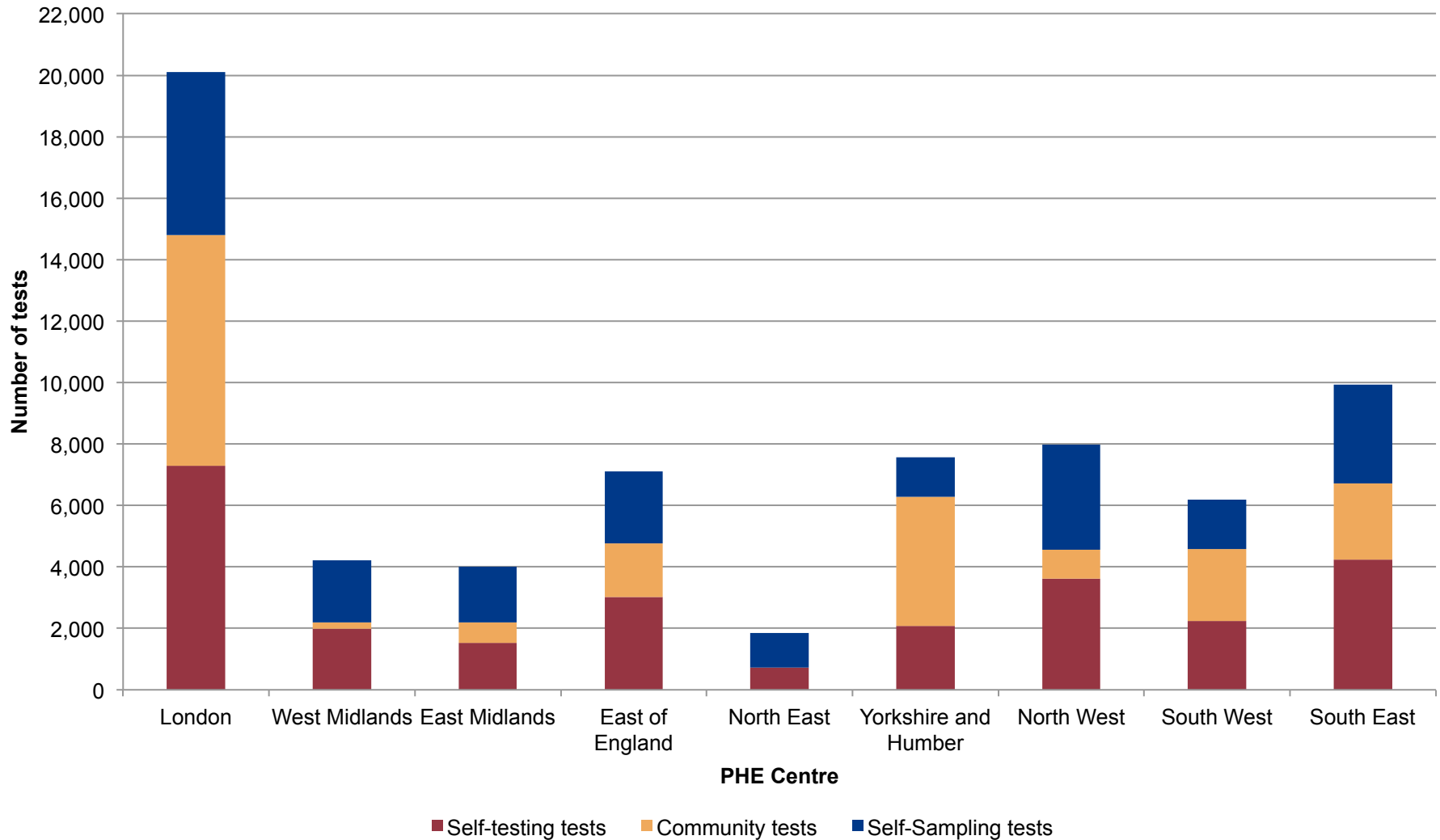
Proportion of PWID (%) never tested for HIV and not recently tested¹ for HIV accessing health services in the previous year, England 2016



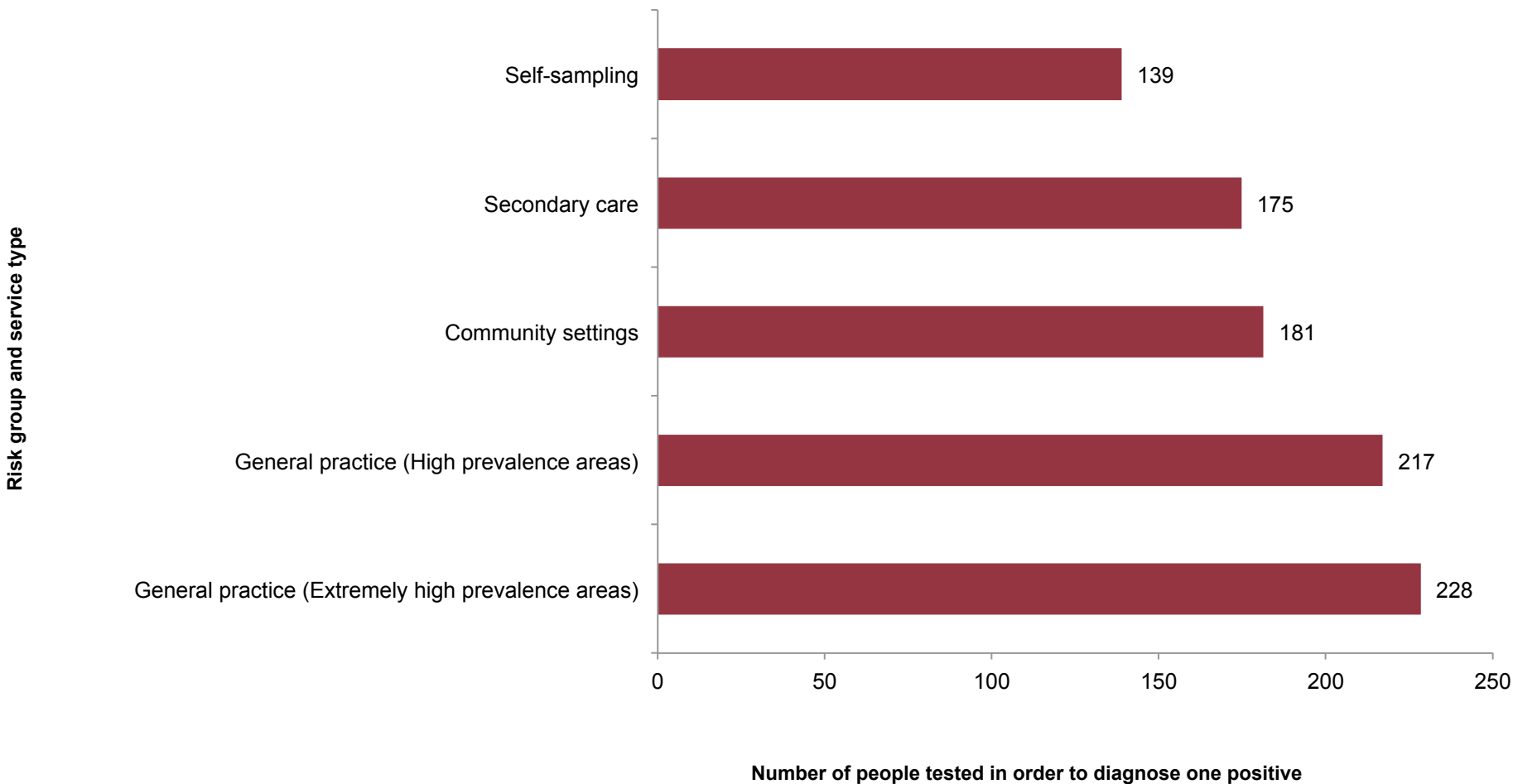
* In the preceding 12 months

** Not tested in the preceding 2 years

HIV tests carried out through self-sampling, self-testing and community testing services, PHE centre, 2016



Number of people tested in order to diagnose one positive/reactive by service type, 2016



Key points

1. Strengthen combination prevention (condom use, HIV testing, prompt ART and pre-exposure prophylaxis (PrEP)) to eliminate HIV transmission, AIDS and HIV-related deaths in the UK.
2. Focussed HIV Testing in specialist sexual health services
 - Repeat testing for gay and bisexual men
 - HIV partner notification – heterosexuals and gay/bisexual men
 - Testing black African men and women
3. Expand HIV testing
 - general practice and secondary care in high and extremely high prevalence areas
 - Community testing and self-sampling for those at higher risk of HIV
4. Improve HIV testing
 - services for patients with hepatitis B and C
 - Services for people who inject drugs
 - Prisons

Context: PrEP Impact Trial, TasP, Meeting the needs of people living with HIV

Acknowledgements

HIV Testing team: Sophie Nash, Martina Furegato, Noel Gill

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Contributors: Colin Campbell, Sara Croxford, Maciej Czachorowski, Jennifer Davidson, Rachel Glass, Luis Guerra, Gwenda Hughes, Georgina Ireland, Maeve Lalor, Louise Logan, Sema Mandal, Hamish Mohammed, Anthony Nardone, Dana Ogaz, Eamonn O'Moore, Claire Reynolds, Ruth Simmons, Bhavita Vishram