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Clinician-related factors associated with offering HIV tests to people aged ≥50 years: a qualitative study

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Disclosures

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Background

- Despite a decline in number of new HIV diagnoses in the UK, proportion of new diagnoses in people age ≥50 years continues to increase.
- Offer rate of HIV testing is low.


Aim

Identify clinician-related factors associated with offering HIV testing to patients’ age ≥50 years
Method

• Qualitative study
• Part of a linked study (P342)
• Non-HIV clinicians who had seen an older patient with undiagnosed HIV were recruited from 6 hospital sites in SE England
• Semi-structured interviews
• Data transcribed verbatim and thematically analysed
Results

• 20 clinicians recruited:
  – All were consultants;
  – 12 from a high prevalence area;
  – 10 from a medical speciality, 7 from a surgical speciality, 3 from acute/emergency medicine

• Seven major themes related to HIV test offer to people aged ≥50 years were identified

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<th>Medical speciality:</th>
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<tr>
<td>• Respiratory (x4)</td>
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<td>• Cardiology (x2)</td>
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<td>• Endocrinology</td>
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<td>• Neurology</td>
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<th>Surgical specialities:</th>
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<td>• Urology (x3)</td>
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<td>• Orthopaedic</td>
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<td>• MaxFax</td>
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<td>• Ophthalmology</td>
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<th>Acute/emergency:</th>
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<td>• A&amp;E (x2)</td>
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<td>• AMU</td>
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Themes

1: Knowledge
2: Stigma
3: Perception of risk and stereotyping
4: Symptom attribution
5: Discussing HIV with patients
6: Consent procedures
7: Practical factors
Theme 1: Knowledge

- Outdated HIV knowledge
- Knowledge is specialised
- Limited time for training - HIV was not a priority
- Acknowledgment that lack of knowledge was a barrier
- Some offered ways to increase exposure
- Some reported valuable areas for training
Theme 2: Fear of stigmatising

- Although most felt it had reduced, some felt there was a “hangover” from early campaigns
- Additional stigma in older people
- Stigma within healthcare settings:
  - Different to other LTC/STI
  - Consent procedures promote stigma
  - Cant access results/notes, perception you can not document
The juniors are telling me that you’re not allowed to write “HIV” as a diagnosis on handover sheets - I just thought that was completely ridiculous and it’s kind of going backwards and suggesting to them that there is a stigma with it. [Respiratory physician, high prevalence]
Theme 3: Perception of risk and stereotyping

- Stereotyping impacted on a decision to offer a test
- Perception older people are less at risk
- Some adopted special measures if someone was known to be positive
- Risk assessments uncommon
Theme 4: Symptom attribution

• HIV in “unusual” presentations – typical presentations did not warrant further testing
• An “unusual” presentation is easier to identify in someone younger
• Start with the most likely cause for symptoms first – usually within own speciality
• CICs – some very uncommon and some too common (particularly in elderly) to test all for HIV
Dementia’s quite tricky, thinking about it, all of my patients have got dementia, so which ones am I gonna screen then? Most of the ward’s got dementia  [Endocrinology physician, low prevalence]
Theme 5: Discussing HIV with patients

• Uncomfortable to discuss HIV testing – particularly with older patients
• Some factors facilitate a conversation
• Some factors make a conversation more difficult
• Perception patients will be offended or feel judged
Most of them tend to look completely appalled, and think that you’re accusing them of being a drug addict or a sex maniac or something like that.  

[Cardiology physician, low prevalence]
Limitations

• Many clinicians did not respond to an invite to take part – bias?

• Lack of involvement from primary care

Future research

• Research in primary care to verify findings and shape design of future interventions
Conclusions

• There are clinician related barriers to offering testing to people aged ≥50 years

• Some clinicians offered some practical solutions
  – Clear flow diagrams of process
  – Specific list of CICs
  – Education including consent procedures

When implementing testing guidelines in people age ≥50 years the factors identified in this study have to be addressed
THANK YOU

QUESTIONS?

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