



17TH ANNUAL CONFERENCE OF THE
BRITISH HIV ASSOCIATION (BHIVA)

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A STUDY TO ASSESS THE
ACCEPTABILITY, FEASIBILITY AND
COST-EFFECTIVENESS OF
UNIVERSAL HIV TESTING WITH
NEWLY REGISTERING PATIENTS
(AGED 16-59) IN PRIMARY CARE

Research Team Members

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**Peter Wilkinson, Public Health,
NHS Brighton and Hove**

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HIV epidemiology for Brighton and Hove (2009)*

- **Highest diagnosed prevalence rate outside of London**
 - 8th highest PCT nationally
 - Prevalence 7.57/1,000 people aged 15 -59years.
- **1,381 people in the city diagnosed with HIV**
 - 91% male, 87% white ethnic group.
 - 67% aged 35-54 years old
 - 84% acquired through sex between men
- **75 new diagnoses in 2009**
 - 5.7% increase on previous year

* SOPHID, 2009

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Study Aims

- **Understand if patients feel it is **acceptable** to be offered an HIV test as part of their new patient health check in the primary care setting**
 - Number of patients having a test
 - Responses from self completed questionnaires
- **Assess if universal HIV testing is **feasible** in primary care**
 - Clinicians' reflective diaries
 - Regular working groups and contact with primary care
 - Focus group
 - On-line survey
- **Assess if universal HIV testing in primary care is **cost effective****
 - Cost effectiveness analysis is being conducted separately and will be reported later

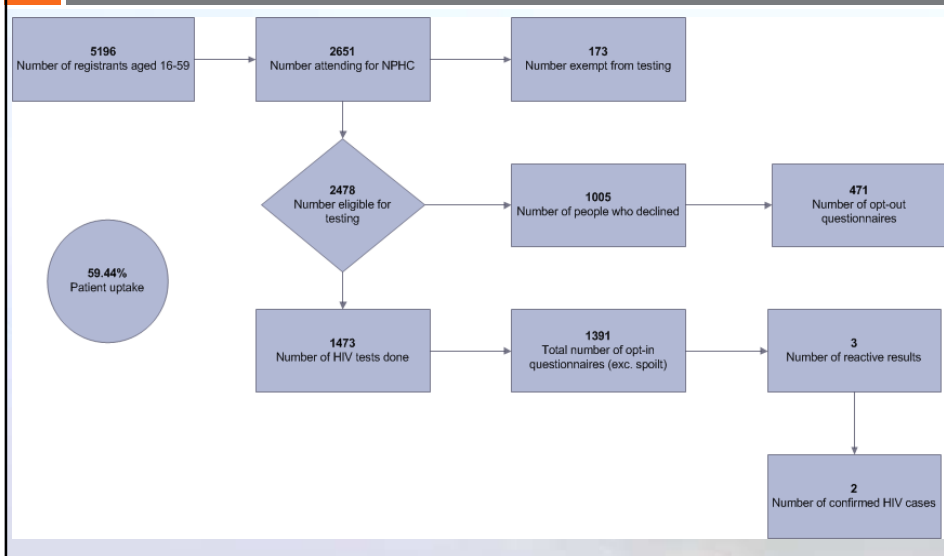
Study Design

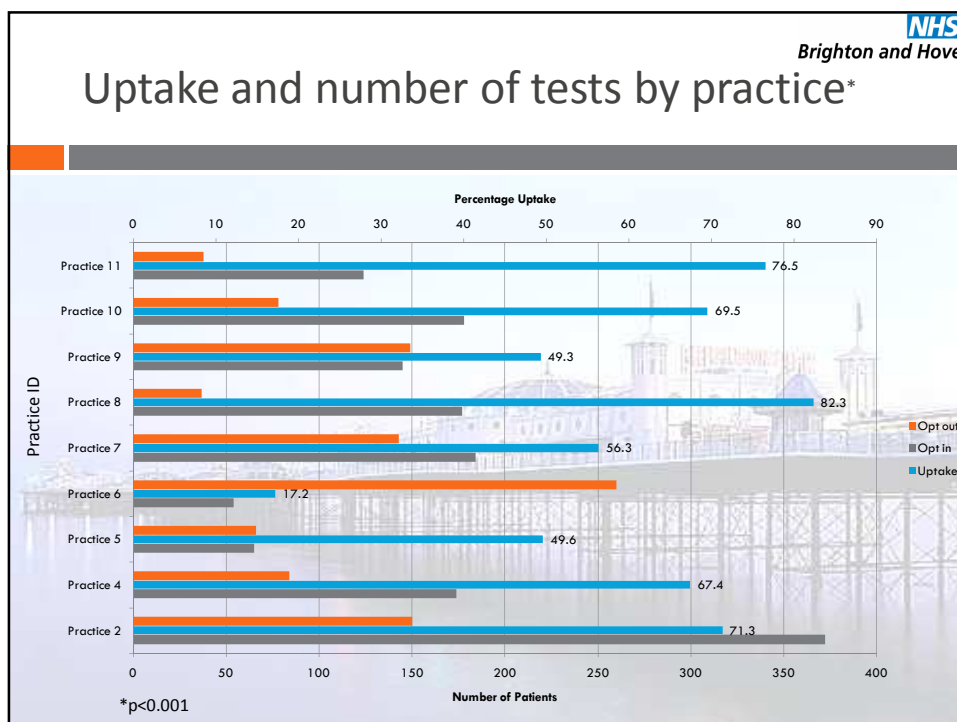
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- Ten practices providing a Locally Enhanced Service (LES) for patients with HIV (One practice later withdrew)
- Newly registering patients attending for a New Patient Health Check (May – November 2010)
 - Aged between 16-59 years old
 - Able to give informed consent and not known to be HIV positive
- bioLytical INSTi® point of care test used
- Patient questionnaires using Likert scales
- Practices paid £500 plus £20 per questionnaire/test

Results

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Results

Questionnaire items	% agreeing		
	Accepted	Declined	Total
It was a good idea to offer me an HIV test today during my new patient health check*	92	86	90
I think I may be at risk of HIV*	11	7	10
I had enough time to decide whether or not to have an HIV test today*	84	71	81
I would like to receive my HIV test result straight away*	93	48	83
I am happy to have an HIV test at my doctor's surgery*	92	72	87
I would prefer to have an HIV test at a specialist sexual health clinic	8	10	8
Overall I would rate my experience of being offered an HIV test as helpful and useful*	95	83	92

* p<0.05

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Clinicians' Feedback

- Feasible to deliver the service and acceptable to patients
- Changed clinicians' views on HIV testing in a positive way – increased confidence about HIV testing
- “Normalisation” of HIV testing –surprised by patients' responses
- Helps to build rapport with new patients and to discuss sexual health issues
- Concerns about impact on consultation time
- All involved were keen for the service to continue within their practice

Conclusions and next steps

- Universal HIV testing in primary care is both acceptable and feasible
- Clinicians now more confident in offering HIV tests and in delivering results
- Service continues in six practices. No payment but test kits provided.
- Plans to roll out testing to other local practices in a phased manner.
- The protocol will need to accommodate individual practices' policies for new patients

Acknowledgements

Research Team

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