

## Background

- Opportunities for timely HIV diagnosis are missed, both in the hospital and primary care setting
- Proactive provider-initiated testing and counselling (PITC) is needed to optimize HIV prevention, diagnosis and treatment

## Objectives

To improve PITC by general practitioners (GPs) and hospital-based specialists in Amsterdam

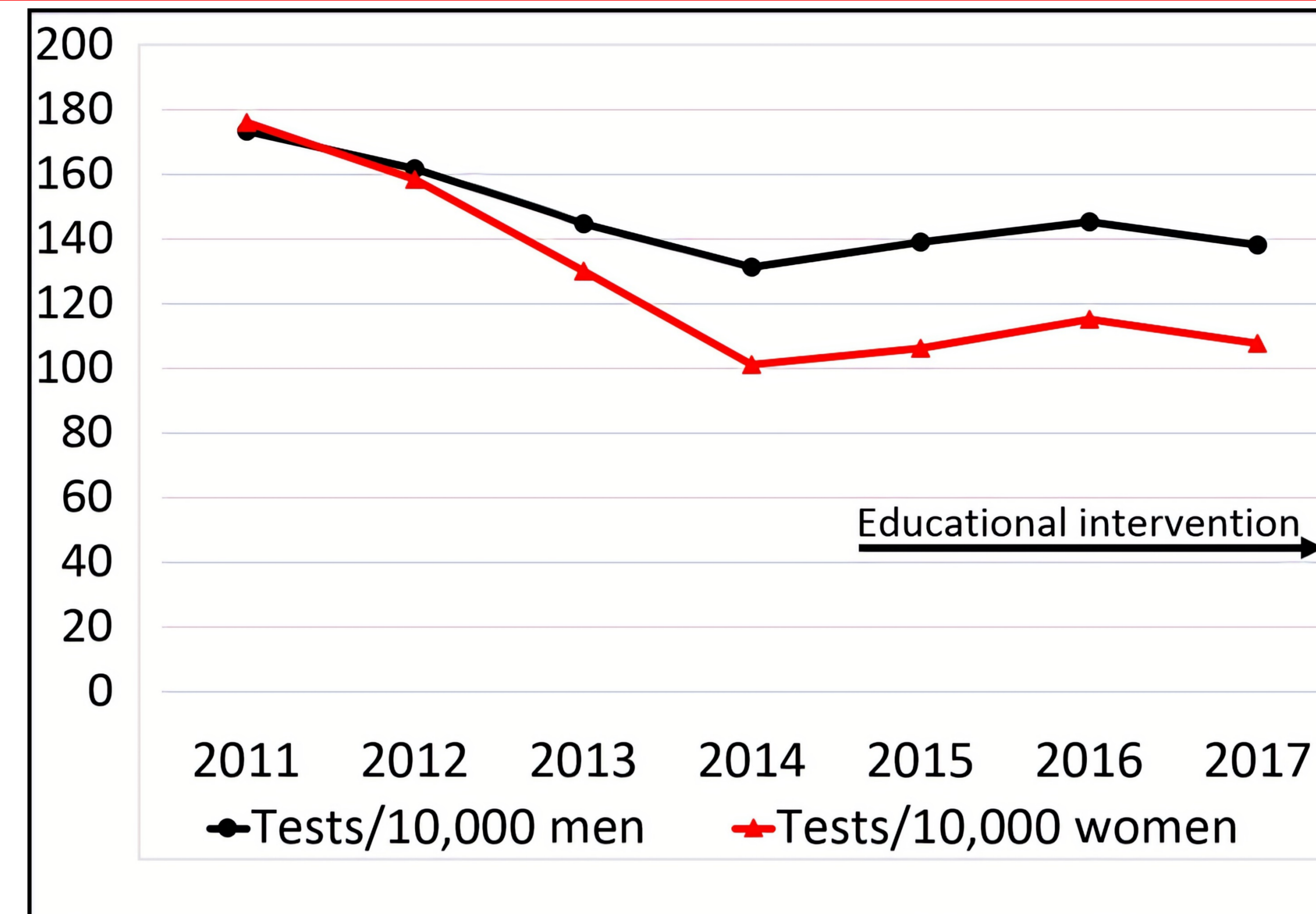
## Methods

**Primary care:** An evidence-based educational intervention for GPs using graphical audit and feedback is implemented since 2015. Data on HIV and STI testing by GPs is collected from 7 diagnostic laboratories. Primary outcome is the HIV testing rate by GPs per 10,000 person-years.

**Hospital setting:** We will design an educational intervention in 5 hospitals around Amsterdam to improve the HIV testing rate in the HIV indicator conditions: tuberculosis (TB), hepatitis B and C, cervical and vulvar cancer, malignant lymphoma and peripheral neuropathy of unknown cause. Baseline data on these HIV testing rates will be used as graphical feedback in the educational intervention.

Here, we present the baseline data on HIV testing rates in TB in one university hospital.

## Initial results primary care setting



- Since 2015, 41% (220/534) of Amsterdam GPs have participated in the educational intervention
- The declining HIV testing rate by GPs observed since 2011 stabilized from 2014 onwards
- In 2017, full-time GPs annually performed an average of 30 HIV tests in men and 23 in women
- The ratio of positive tests declined from 2011 to 2017 from 0.8% to 0.5%

## Initial results hospital setting

- 39 patients with TB were included between 2015-2019 in one university hospital
- 76.9% had been tested for HIV within 90 days of TB diagnosis
- One patient (1/39, 2.6%) tested positive for HIV with an initial CD4 count of 110 cells/ $\mu$ L

| Characteristics of 39 TB patients                   | N(%)/median(IQR)  |
|---|-------------------|
| Age at TB diagnosis (years)                         | 47 (31-63)        |
| Male sex  | 24 (61.5%)        |
| <b>HIV test within 90 days of TB diagnosis</b>      | <b>30 (76.9%)</b> |
| Days between TB diagnosis and HIV test              | 8 (1-20)          |
| <b>HIV diagnosis within 90 days of TB diagnosis</b> | <b>1 (2.6%)</b>   |
| Days between TB- and HIV diagnosis                  | 3                 |
| Initial CD4 count in cells/ $\mu$ L                 | 110               |

## Conclusions

- The observed stabilization in the previously declining HIV testing rate by GPs coincided with the implementation of this educational intervention
- The HIV testing rate in TB patients is low and indicates room for improvement
- Multifaceted educational interventions are needed to improve PITC in the hospital and primary care setting