Rationale, design and first results of an H-TEAM intervention to increase provider-initiated HIV testing in primary care in Amsterdam, the Netherlands

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PROactive HIV TESTing in the hospital and primary care setting (PROTEST 2.0)
Disclosures

• The authors have no conflict of interest

• This project is funded by the Aidsfonds and is a part of the H-TEAM initiative
H-TEAM

• Collaboration of all organisations and parties involved in prevention and treatment of HIV in Amsterdam, including the target groups

• Combines various innovative interventions throughout the HIV cascade of care and represents a city-focused approach to the HIV epidemic.

• Works closely with various other large cities and strives to ensure that the various campaigns reach a nationwide audience.
Background

PROTest 2.0: Earlier HIV testing and diagnosis

- Sexual Health Clinic (SHC)
- General Practitioner (GP)
- Hospital
Primary care in the Netherlands

- GP’s are the gatekeepers to the healthcare system

- Registration with a GP is mandatory

- 75% of the population visits their GP at least once a year
Where are STIs and HIV diagnosed?

RIVM 2018

**STI:**
- General practitioner: 79%
- SHC: 21%

**HIV:**
- General practitioner: 36.4%
- Hospital: 28.9%
- SHC: 34.7%
PROTest 1.0:

• In 1/3 – 2/3 of all STI consultations by GPs the high risk of HIV was not recognised and no HIV tests was performed (Trienekens 2013, Joore 2016)

• 62% of newly diagnosed PLHIV visited their GP in the year prior to diagnosis (Joore 2015)
Methods

• Educational intervention project

• 2 sessions of 2 hours each on HIV and STI

• Organised by GPs for their group of peers

• Graphical audit and feedback
Graphical audit and feedback: Number of HIV tests per GP

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<tr>
<th>GP</th>
<th>2015</th>
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Average number per calculated full time GP in Amsterdam:
- 2015: 37
- 2016: 38
- 2017: 22
Graphical audit and feedback: Number of HIV tests per GP

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2015: 37
2016: 38
2017: 27
Graphical audit and feedback: Number of HIV tests per GP

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• Quality improvement plans

• Laboratory data → HIV testing rate per 10,000 person-years
Results

• Since 2015:
  – 29 Educational sessions
  – 214 Participating GPs (40% of all Amsterdam GPs)

• Average appreciation in evaluations: 8.5/10

• Laboratory data: 95% coverage
HIV tests performed by GPs per 10,000 residents of Amsterdam by sex
HIV tests performed by GPs per 10,000 residents of Amsterdam by age categories and sex
HIV tests performed by GPs per 10,000 residents of Amsterdam by age categories and sex
HIV tests performed by GPs per 10,000 residents of Amsterdam by age categories and sex
Discussion

Strengths

• Unique dataset: 95% of HIV and STI tests by Amsterdam GPs since 2011
• Good participation rates and appreciation in evaluation of the sessions

Limitations

• Downward trend in HIV testing rates does not necessarily infer to worse testing behaviour
• No patient characteristics in the dataset to correct for patient risk factors
Future work…

• Project runs until 2020

• Analyses on the effect of the intervention
  – Before and after within participants
  – Participants versus non-participants

• Qualitative analyses
  – Using semi-structured interviews amongst participating GPs
Acknowlegements
QUESTIONS?

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## Quality improvement plans

### Quality improvement plans concerning HIV testing

Offer more provider-initiated HIV testing, e.g. by offering an HIV tests at consultations concerning other complaints, at the intake procedure, when performing diagnostics for different reasons and through offering HIV testing on the TV-screens in the waiting room.

Specifically screen high-groups for HIV proactively, including men who have sex with men, people from HIV-endemic countries and patients with positive STI tests in the past.

Test for HIV more when diagnosing or suspecting an HIV indicator condition, including other STI.

### Quality improvement plans concerning STI testing

Be more alert on extragenital STI testing (oral, anal) when indicated.

Choose type and anatomical location of testing (urogenital, oral, anorectal or blood) based on the guidelines and diagnostic decision tool more.

Take more detailed sexual histories, to more accurately assess risk-behaviour to choose the appropriate diagnostics accordingly.
Percentage of positive HIV tests

Men % positive

Women % positive
Chlamydia and gonorrhoea tests per 10,000 residents of Amsterdam by sex

CT = Chlamydia trachomatis, NG = Neisseria gonorrhoeae
Anorectal chlamydia and gonorrhoea tests per 10,000 residents of Amsterdam by sex

ACT = anorectal Chlamydia trachomatis, ANG = anorectal Neisseria gonorrhoeae