Estimating HIV Testing Coverage in Paris to shape an Adequate Testing Policy

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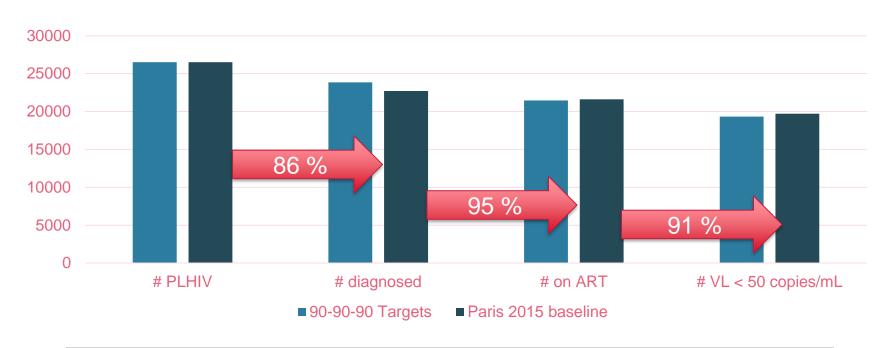








Paris HIV Care Continuum in 2015







Structure of the undiagnosed epidemic

	Overall	Total MSM	MSM born abroad	Women born in SSA	Men born un SSA
New diag	955	475	186	359	
Estimated incidence	959 (759-1226)	530 (413-673)	182 (116-255)	212 (135-305)	122 (50-248)
Undiagnosed people	3601 (3021-4083)	1663 (1462-1960)	618 (493-763)	728 (592-872)	710 (551-927)
Rate / 10000	24 (20-27)	271 (144-467)	366 (186-611)	181 (147-218)	196 (147-276)
Median delays to diag (years)	2,9 (0,9-5,1)	2,1 (0,4-4,3)	2,5 (0,8-4,7)	2,7 (1,2-4,7)	3,8 (1,8-6,0)

Lise Marty, Françoise Cazein, Florence Lot, Dominique Costagliola, Virginie Supervie. Estimation des paramètres de l'épidémie VIH en 2016, communication personnelle, ANRS AC47, novembre 2018.





Testing frequencies & practices

People born in SSA countries (AfroBarometer, 2016):

- 66% had an HIV test in the past 12 months
 - 52% of those had multiple partners
- 15% had an HIV test > 12 months ago
- In the study, 4 out of 8 newly diagnosed for HIV had had a test in the past 12 months
- Supports national guidelines of yearly HIV testing

MSM with multiple partners (ERAS Study, 2017):

- 58% had an HIV test in the past 12 months
- 29% had an HIV test > 12 months ago
- 13% had never been tested for HIV
- Median number of tests when tested in the last year: 2 (IQ: [1-3])
- When HIV-, median number of male partners in the last 6 months: 10 [4-20]
- Supports national guidelines of quarterly HIV testing





The never-ending debate

Demand?

- Misperception of one's exposure to HIV
- Fear of the blood test, the results, of stigma
- Ignorance, lack of information...
- Laziness, irresponsibility...

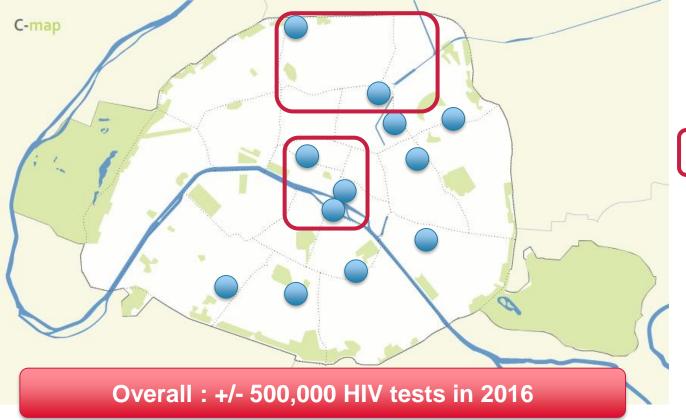
Supply?

- Missed opportunities
- Insufficient funding for community-based & outreach testing
- Too many "useless" tests among the general population









- 12 STI clinics
- Zones of Community-based **Outreach Testing**

1000 drugstores

160 medical labs

2000 GPs





How many additional tests do we need?

To reach the undiagnosed HIV+

1663 MSM / 1%

= 166,300 additional tests

1438 migrant men and women from SSA countries / 0,8%

= 179,750 additional tests

Goal: 350,000 targeted additional

tests

To follow the guidelines

80,000 HIV-negative MSM

x 4 tests / year

= 320,000 tests / year

65,000 HIV-negative people from the African diaspora

x 1 yearly test opportunity

= 65,000 tests / year

Goal: 385,000 tests / year





Can we double HIV testing coverage?









Increase in HIV test prescription

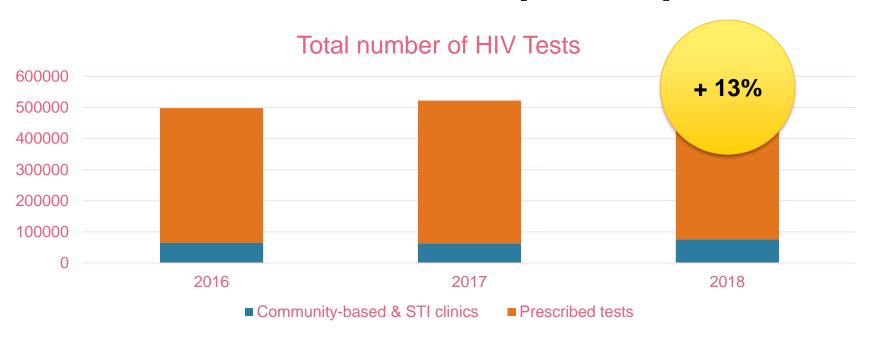
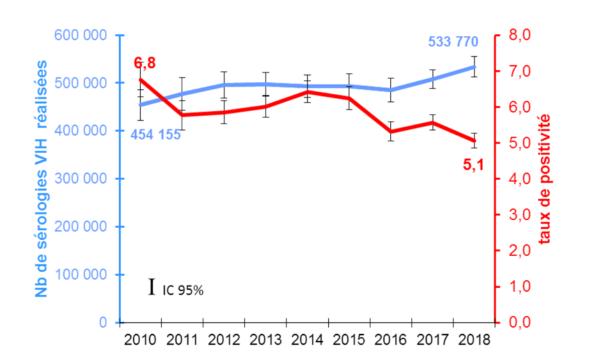




Figure 1 : Nombre de sérologies VIH réalisées et taux de positivité, Paris, 2010-2018.

Source : LaboVIH, données 2018 corrigées.





France



Figure 3 : Nombre de découvertes de séropositivité VIH, par pays de naissance et principaux modes de contamination, Paris, 2010-2018.

Source : Déclaration obligatoire du VIH, données au 31/03/2019 corrigées.

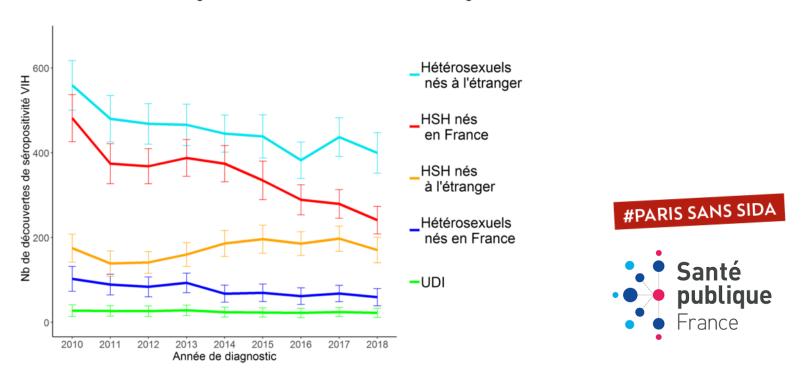


Table 1 | Characteristics of non-HIV-positive respondents whose MRAI was with a causal partner, ERAS 2017&2019. Paris, France (N=1,883)

	ERAS 2017 N = 854	ERAS 2019 N = 1,029	р
Median age [IQR]	31 [25-43]	33 [25-45]	
Born in a foreign country	13%	12%	
Master's degree or higher	58%	63%	**
Comfortable financial situation	63%	71%	***
Steady relationship with a man within previous 6 months	44%	39%	*
Median number of male partners in the last 6 months [IQR]	10 [4-20]	6 [3-15]	
HIV test within previous 12 months	70%	77%	***

^{*}p<0.05 **p<0.01 ***p<0.001

L. Duchesne, N. Lydié, A. Velter, SpF, ERAS 2019 E-Poster #FTC2019



Table 2 | Multivariate logistic regressions comparing the methods used at MRAI between the two samples of ERAS 2017&2019. Paris, France (N=1,883)

	ERAS 2017		ERAS 2019		
	%	a0R*	%	a0R	CI OR [CI 95%]
Exclusive condom use	68.5	1	60.5	0.7	[0.6-0.8]
TasP	1.6	1	1.3	0.8	[0.4-1.8]
PrEP	11.2	1	25.2	2.7	[2.1-3.5]
Post-exposure prophylaxis	0.5	1	0.8	1.8	[0.5-6.2]
None	18.2	1	12.3	0.7	[0.5-0.9]

^{*} the variables of adjustment were the sociodemographic variables for which we observed a significant difference between the two sample: age, financial situation, educational level, steady relationship with a man within previous 6 months



A plan to scale-up HIV Testing opportunities in Paris

- Free tests in medical labs without prescription
- Practical solutions for GPs to offer sexual health check-ups in the context of PrEP
- A label for pharmacists engaged in promoting tests
- Express STI Clinic (Spring 2020)
- Targeted rapid test offer in ERs based on a selfadministered questionnaire







A free walk-in testing solution in medical labs

In Paris (158 labs)
and the Alpes-Maritimes (Nice region, 107 labs)
12 months from July 2019 until June 2020
Goals: +50,000 tests in Paris, +15,000 in AM
Specific navigation system



Paris HIV Testing Scale-Up Policy:

- Must be designed to tackle persistent long delays to diagnosis & high level of undiagnosed HIV prevalence among key affected pop°
- Would not be sufficient if only based on the dedicated system of STI Clinics and community-based outreach testing
- Has benefited from PrEP roll-out among MSM
- Promotes HIV test as a recurrent trivial exam, with daily opportunities adapted to urban life



Acknowledgements

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