



Indicator condition based HIV testing in Estonia

Kristi Rüütel & Liis Lemsalu

Infectious Diseases and Drug Monitoring Department National Institute for Health Development Estonia







Executive summary

Indicator condition based HIV testing is low in Estonia

Men and younger people are tested more

No increase in testing since the development of HIV testing guidelines



New HIV diagnoses in Estonia

17.6 per 100,000 (n=229) (2016)

nr - mean age ↑ - 40% women heterosexual transmission ↑

60% have CD4 < 350, median CD4 = 310 (2015)



HIV testing in Estonia HIV and Viral Hepatitis: Challenges of Timely Testing and Care

12% 221,000 tests to population tested 159,000 people (increasing) Only by 2015 medical personnel 60 per 1000 0.3% people tested positivity rate (excl. blood donors, (declining) pregnant women)



Guidelines

- 1. National HIV testing guidelines (2012)
- 2. Universal HIV testing in primary care in 2 epidemic regions (2015)
- 3. HIV testing in IC guidelines:
 - Viral hepatitis √
 - STIs √
 - Pneumonia (√)
 - Herpes zoster?
 - Infectious mononucleosis ?

Indicator conditions HIV and Viral Hepatitis: Challenges of Timely Testing and Care in Estonian HIV testing guidelines

- 1. TB
- 2. STIs
- 3. Lymphoma
- 4. Kaposi's sarcoma
- 5. Cervical, anal cancers
- 6. Herpes zoster
- Disseminated herpes simplex
- 8. HBV, HCV

9. Infectious mononucleosis

- 10. Unexplained leukopenia, thrombocytopenia
- 11. Recurrent pneumonia
- 12. Generalized seborrheic dermatitis
- 13. Generalized fungal infections
- 14. Generalized infectious warts and mollusks



Analysis

Data extraction

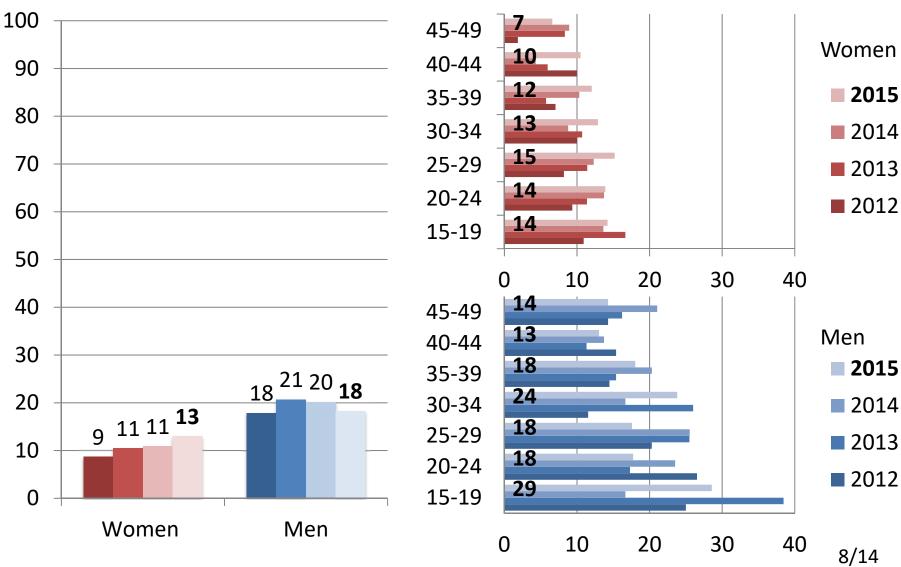
- Estonian HealthInsurance Fund
 - covers >94% population
- 15 49 yo
- -2012 2015
- Included:
 in- and outpatient care,
 primary, specialist care
- Excluded:palliative care, dentistry

Indicator conditions (ICD-10)

- 1. Pneumonia (*J12 J18*)
- 2. Infectious mononucleosis (B27)
- 3. Viral hepatitis (B16 B18)
- 4. Herpes zoster (BO2)
- 5. STIs
 - Syphilis (A51 A52)
 - Gonorrhoea (A54)
 - Chlamydia (A56)
 - Trichomoniasis (A59)
 - Genital herpes (A60)



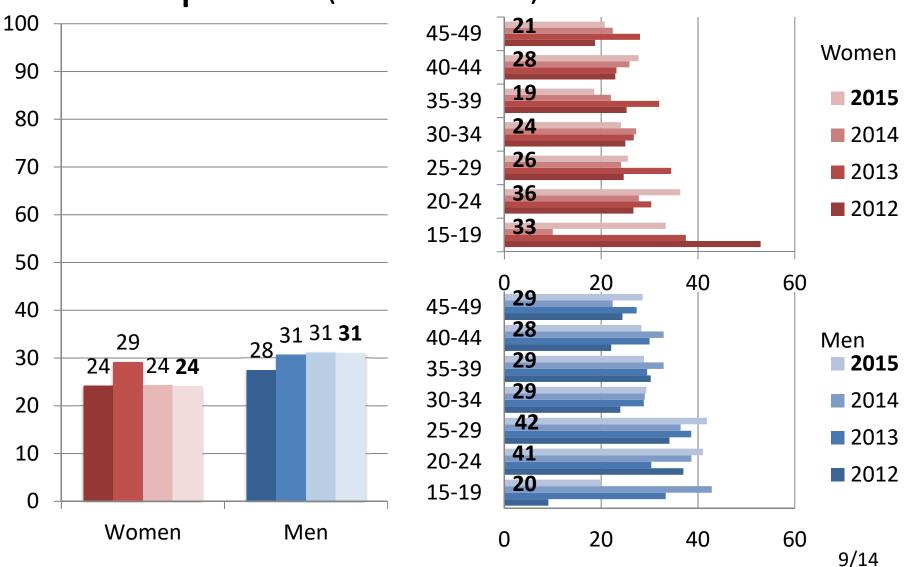
STIS (% HIV tested)



^{*} Testing rates in 2015 are shown in bold



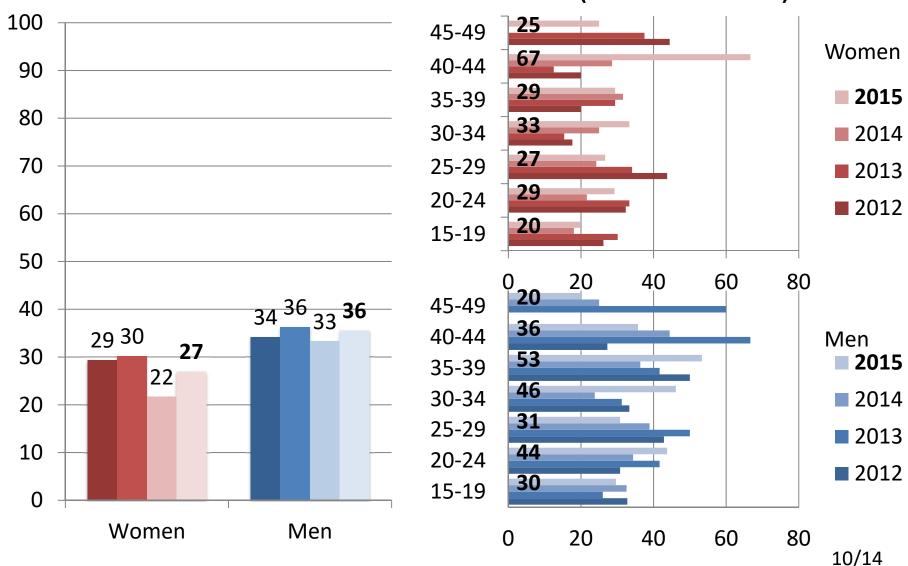
Viral Hepatitis (% HIV tested)



^{*} Testing rates in 2015 are shown in bold



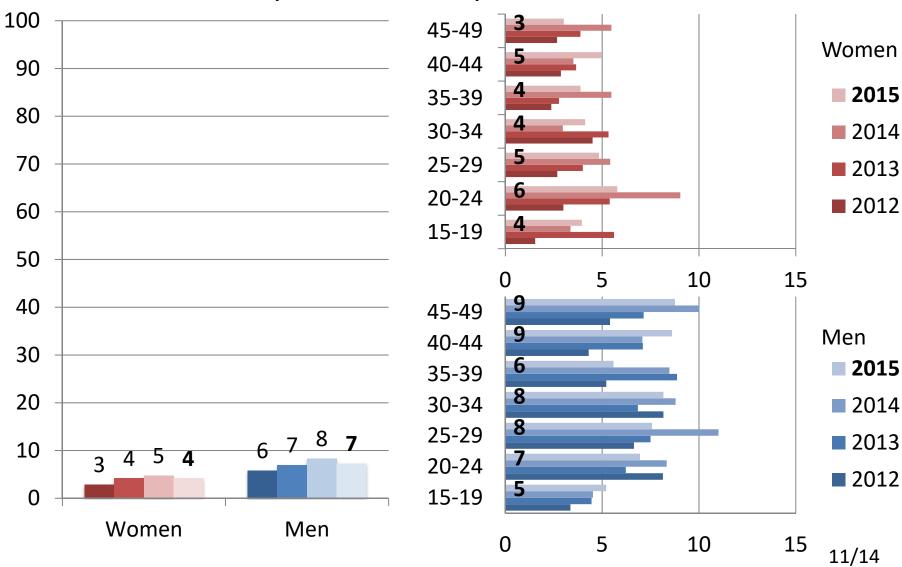
Infectious mononucleosis (% HIV tested)



^{*} Testing rates in 2015 are shown in bold



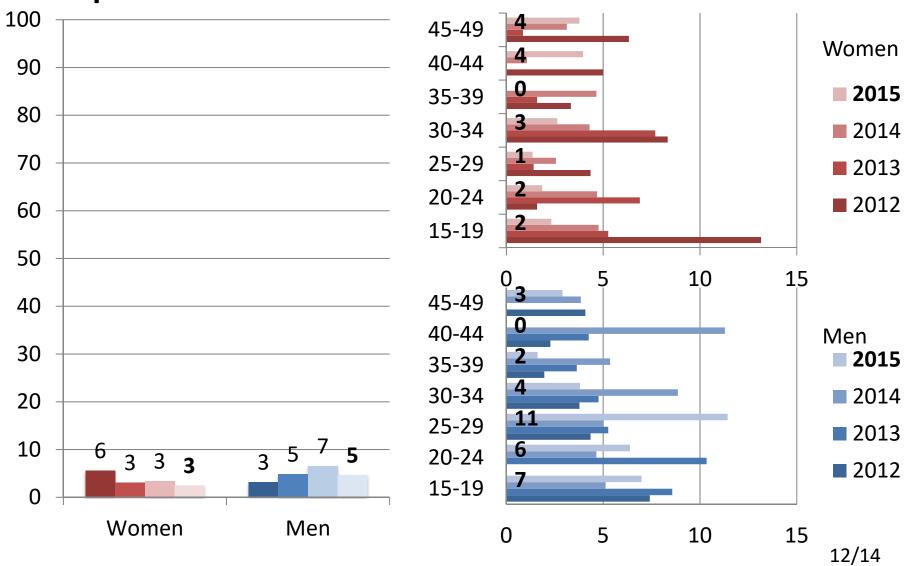
Pneumonia (% HIV tested)



^{*} Testing rates in 2015 are shown in bold



Herpes zoster (% HIV tested)



^{*} Testing rates in 2015 are shown in bold



Challenges

- 7% of those tested in VCTCs were advised to go there by a doctor
 - doctor did not test the patient him/herself
 - Unknown how many did not reach VCTCs yet doctor suspected HIV
- Cost of the test from provider's general budget
- Educating medical personnel on IC based testing
- HIV test coding in EHIF database



Conclusions

- 1. IC based HIV testing is low:
 - ~ 5% pneumonia, herpes zoster
 - ~ 13% STIs
 - ~ 30% viral hepatitis, mononucleosis
- 2. Men tested slightly more than women
- 3. Younger people tested generally more
- 4. No upscale of IC based testing since guidelines
- 5. Administrative databases good for monitoring