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HIV testing policies and HIV surveillance among tuberculosis (TB) patients in Europe



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Background and methods

Background

- In the former Soviet Union (East) the incidence of HIV infection and of TB has increased. HIV/TB co-infection is associated with anti-TB drug resistance
- Coordination of HIV and TB programmes is increasingly recognised as an important public health aspect at national and international level
- We implemented a survey to assess available information on HIV testing among TB patients in Europe, in view of harmonising HIV/TB surveillance at European level

Background (cont'd)

- TB as initial AIDS-indicative disease available through European AIDS surveillance is the only routine information on TB/HIV dynamics available at European level.
- In 2002, TB was the most common initial AIDS indicative disease in Europe: 24% of AIDS cases in the West and the Centre and 33% in the East
- TB cases reported as initial AIDS-indicative disease represented 5% of total TB cases in the West and < 0.5% in the Centre and East



Methods

- Questionnaire survey in May 2003 among heads of national TB and HIV surveillance programs participating in the European surveillance networks for tuberculosis (EuroTB) and for HIV / AIDS (EuroHIV) in the 52 countries of the WHO European Region
- 42 of the 52 countries participated (81%)
- Questions on:
 - HIV testing recommendations and practices
 - HIV prevalence data in TB patients: sources and results 1997-2002
 - Estimates of HIV prevalence in the general population
- Data presented by geographic zone: West, Centre and East

HIV testing of TB patients: policies and practice

HIV testing policies for TB patients

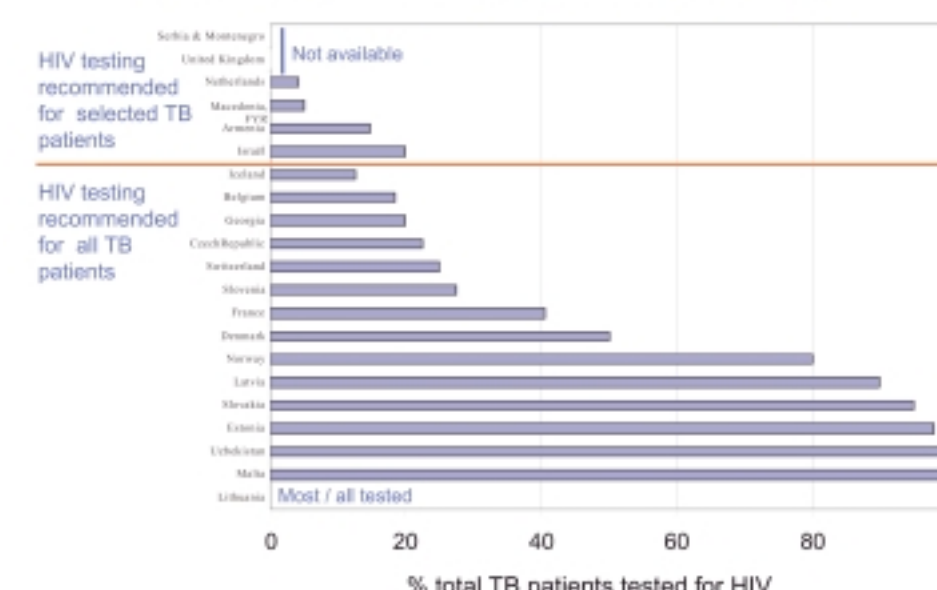
Policies exist in 28 of 42 participating countries

- Mandatory testing still in use in some countries in the East, where testing coverage is very high in most countries
- Voluntary testing recommendations associated with variable coverage
- Lack of recommendations associated with low coverage of HIV testing, except in Portugal and Spain (~50%)

HIV testing policies for TB patients, Europe, 2003



Estimated percentage of TB patients tested for HIV, countries with recommendations, Europe, 2003



HIV prevalence among TB patients: type of data and results

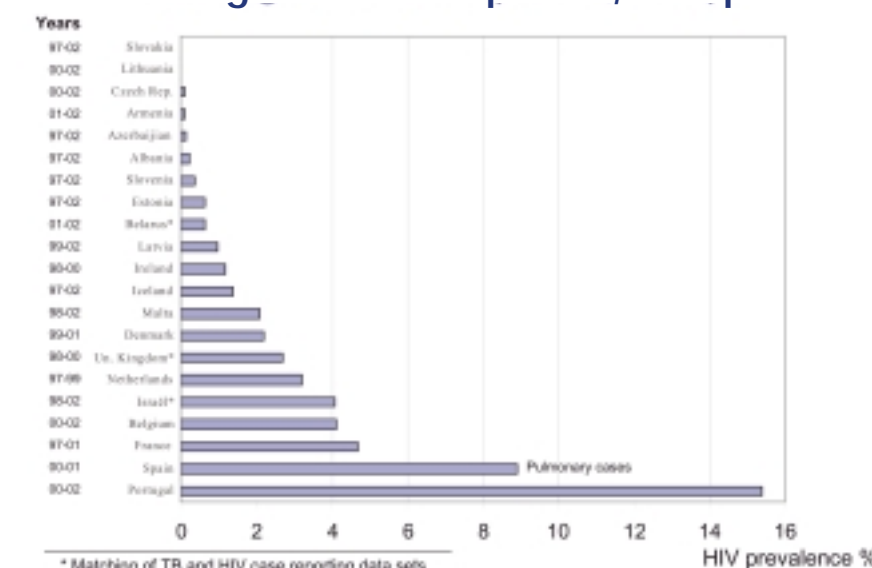
Sources of data on HIV prevalence in TB patients

No data available / provided	21 countries (50%)
HIV serostatus on TB case reporting form - information usually very incomplete	16 countries
Matching of TB and HIV case reporting data sets - possible, never used: 18 countries	6 countries
Results of testing of patients from groups at risk - HIV risk groups (prisoners, IDU)	4 countries
Hospital based surveys (incl. unlinked anonymous)	4 countries

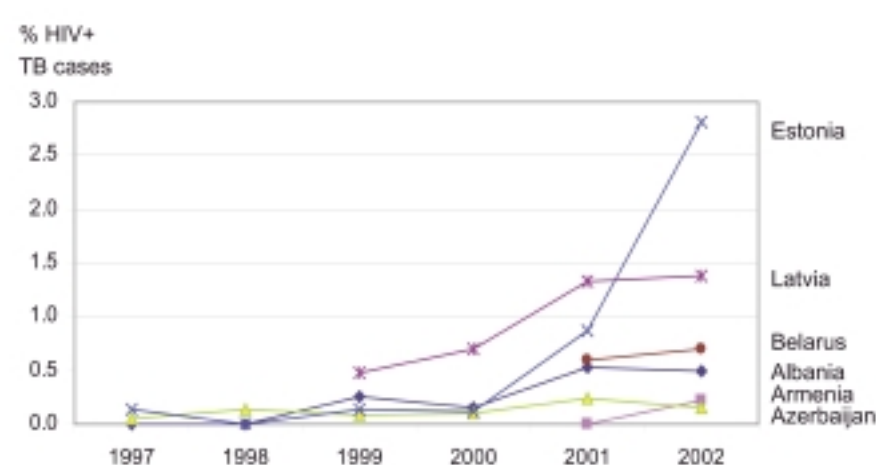
HIV prevalence levels in TB patients in Europe

West	1-5%; highest in Spain (9%) and Portugal (15%); stable overall in recent years; correlation with HIV prevalence in the general population; high HIV prevalence in prisoners with TB.
Centre	very low; reflecting very low HIV prevalence in the general population.
East	low, increasing in the Baltic States; no correlation with HIV prevalence (recent HIV epidemics).

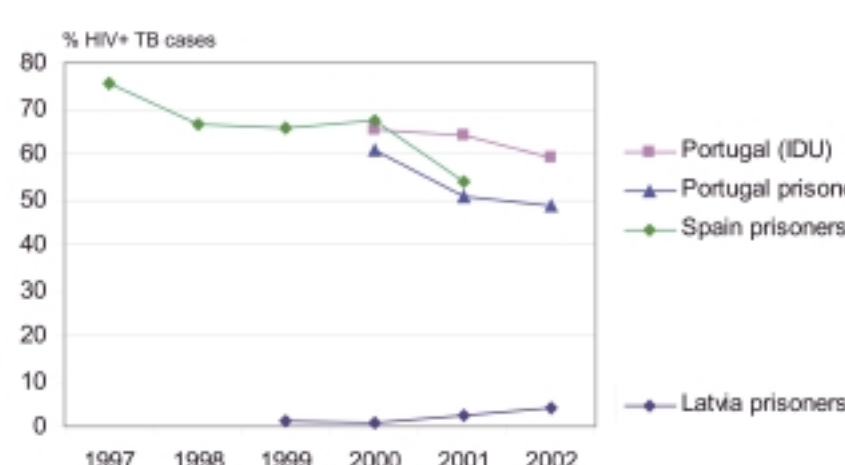
Minimum estimates of HIV prevalence among TB cases reported, Europe



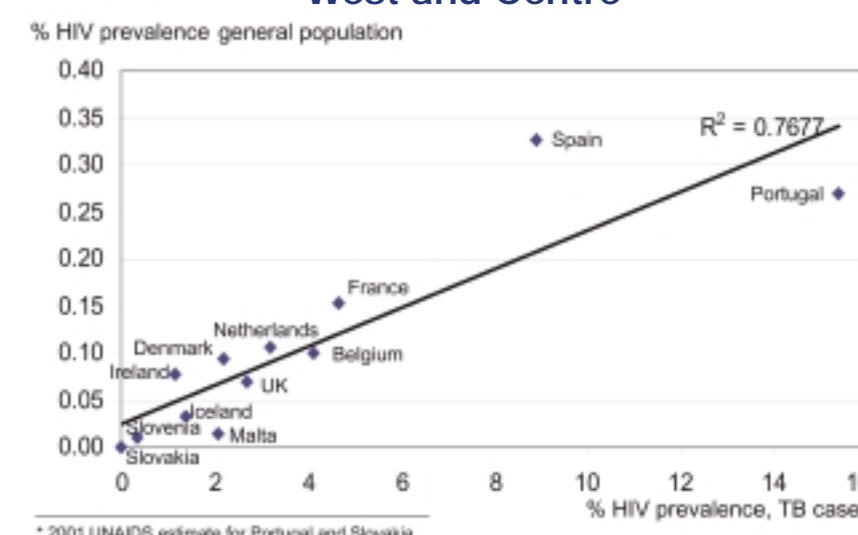
HIV prevalence in TB cases reported in selected countries, Centre and East, 1997-2002



HIV prevalence in selected groups of TB patients (voluntary HIV testing)



Correlation between HIV prevalence in the general population (2003)* and HIV prevalence in TB cases, West and Centre



Recommendations

HIV testing of TB patients

- To discontinue mandatory testing
- To adopt or expand national recommendations to implement voluntary testing of all TB patients

HIV / TB surveillance

- To implement specific HIV prevalence surveys among TB patients (recently revised WHO guidelines)
- To monitor HIV prevalence in TB patients using results of HIV testing done for diagnostic clinical purposes

HIV / TB surveillance (cont'd)

- To match TB and HIV case reporting data sets to obtain additional estimates of HIV prevalence (respecting data confidentiality rules)
- To improve estimates of HIV prevalence in the general population (correlation with HIV prevalence in TB patients)