

Assessing the impact of COVID-19 on testing for HIV, viral hepatitis and STIs in the WHO European Region

Viral Hepatitis Prevention Board Technical Meeting
25 March 2021

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EuroTEST Initiative (formerly HIV in Europe)



EUROPEAN TESTING WEEK
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Consortium composition

Representation/support from:



+ independent experts

COVID-19 impact assessment – objectives

Main objective: To assess the impact of COVID-19 on HIV, viral hepatitis and STI testing in the WHO European Region.

Specific objectives:

1. To assess the quantitative and structural impact among different actors of the testing response:
 1. Laboratories
 2. Secondary care clinics
 3. Primary health care units
 4. Community testing sites
 5. National public health level
2. Collect information about reasons for the observed impact
3. Identify and describe measures put in place to mitigate impact and areas where guidance or support are needed.



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Addressing Hepatitis, HIV, STIs and TB

COVID-19 impact assessment – process

Additional initial objective: Document and disseminate good practices in service provision for HIV, viral hepatitis and STIs in the context of the COVID-19 pandemic.

- → Case stories collected as part of the WHO/Europe [call for good practices](#) (virtual library)

Survey period: 14 October to 13 November 2020

Survey available in **English and Russian**

Survey website: <https://www.eurotest.org/Projects-Collaborations/COVID-19-impact-assessment-on-testing>

Preliminary results **published:**
[Euro Surveil 26 Nov 2020](#)

Impact of the COVID-19 pandemic on testing services for HIV, viral hepatitis and sexually transmitted infections in the WHO European Region, March to August 2020

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2. Grupo de Ativistas em Tratamentos (GAT), Lisboa, Portugal

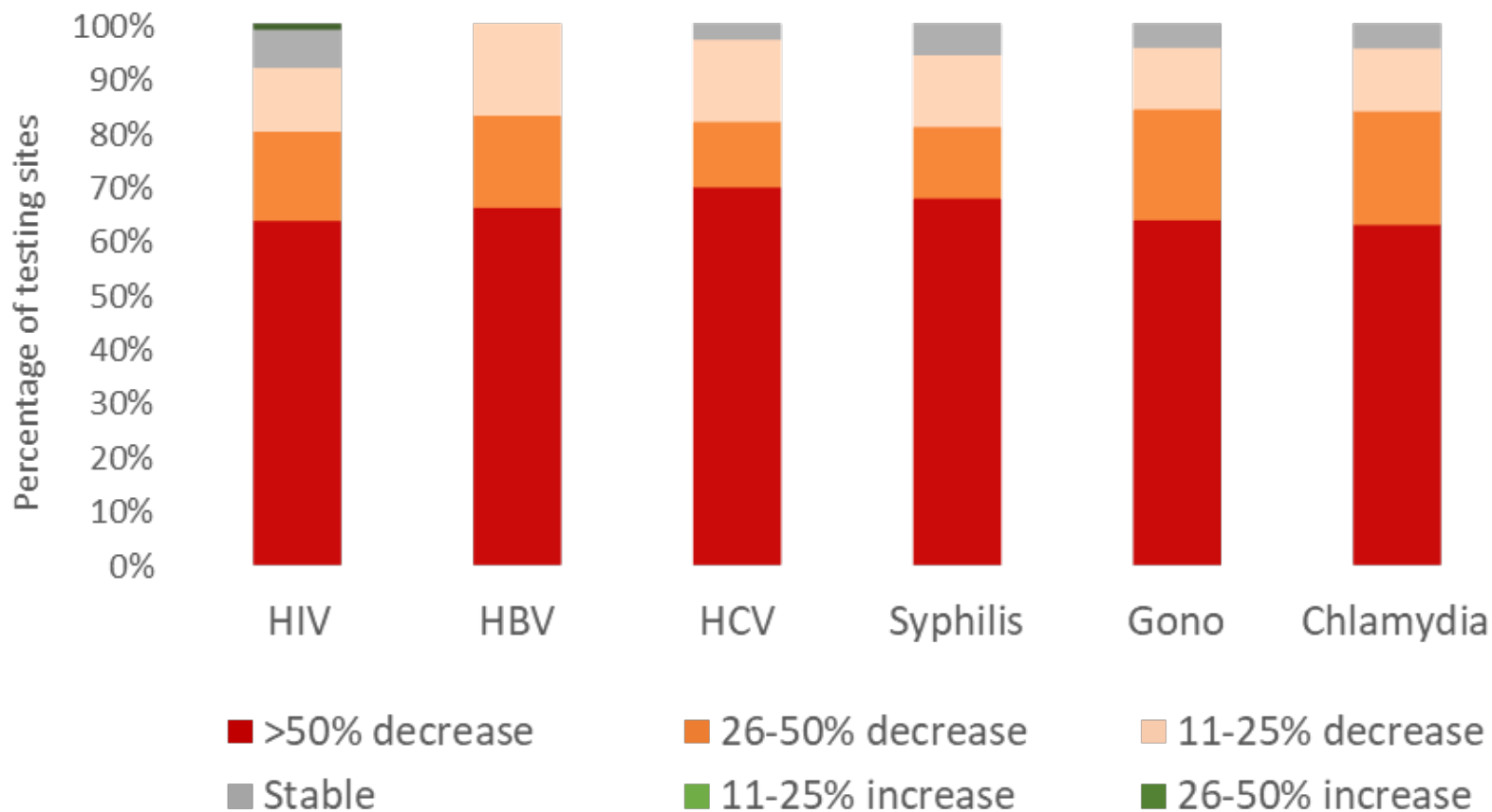
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4. The members of the EuroTEST consortium of partners are listed at the end of the article

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Percentage changes in testing volume, by infection

March-May 2020 compared to March-May 2019 (n=96)



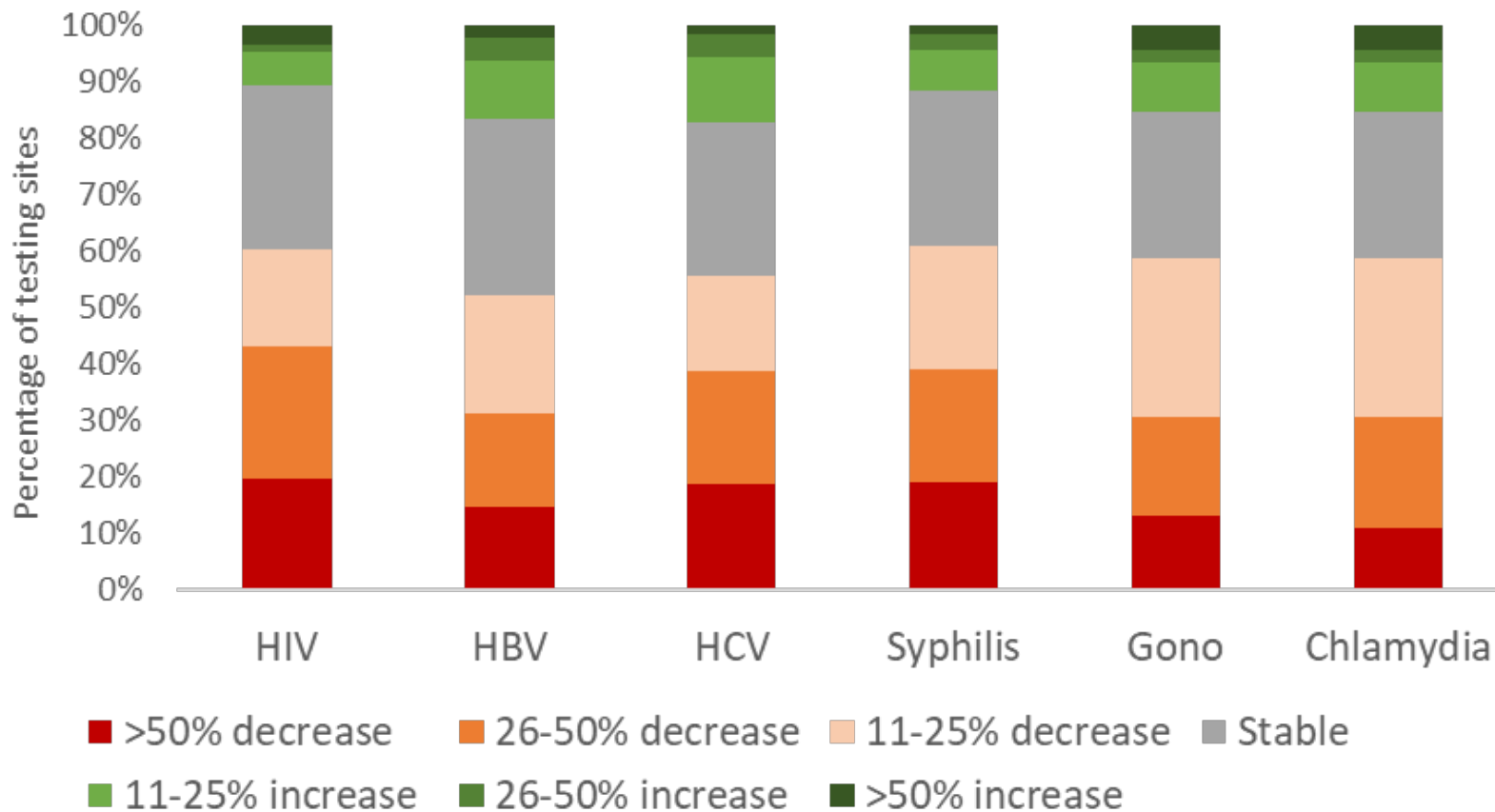
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Percentage changes in testing volume, by infection

June-August 2020 compared to March-May 2019 (n=96)



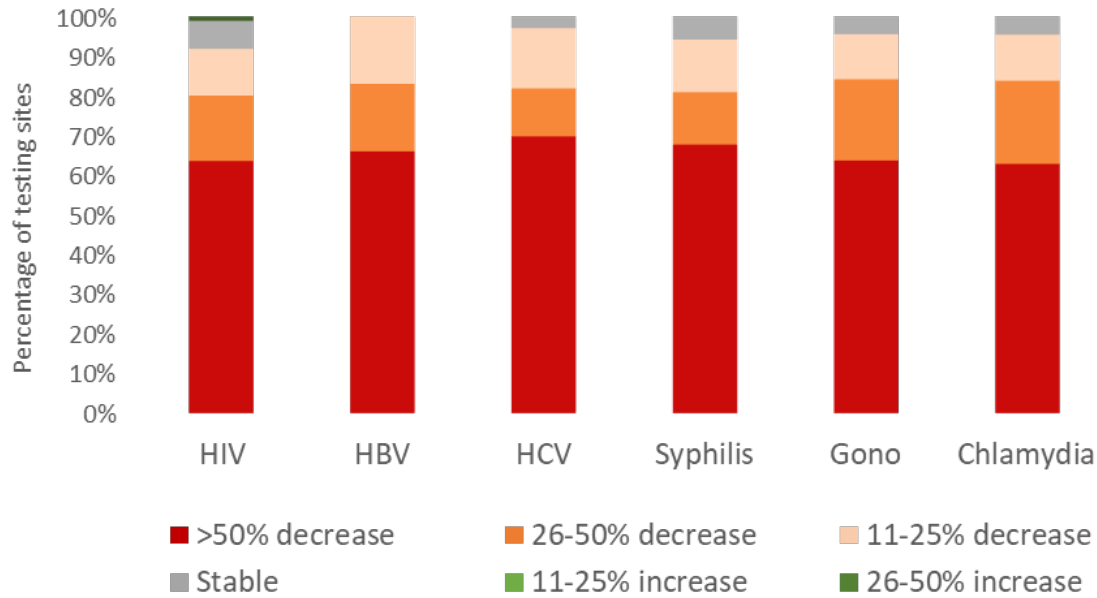
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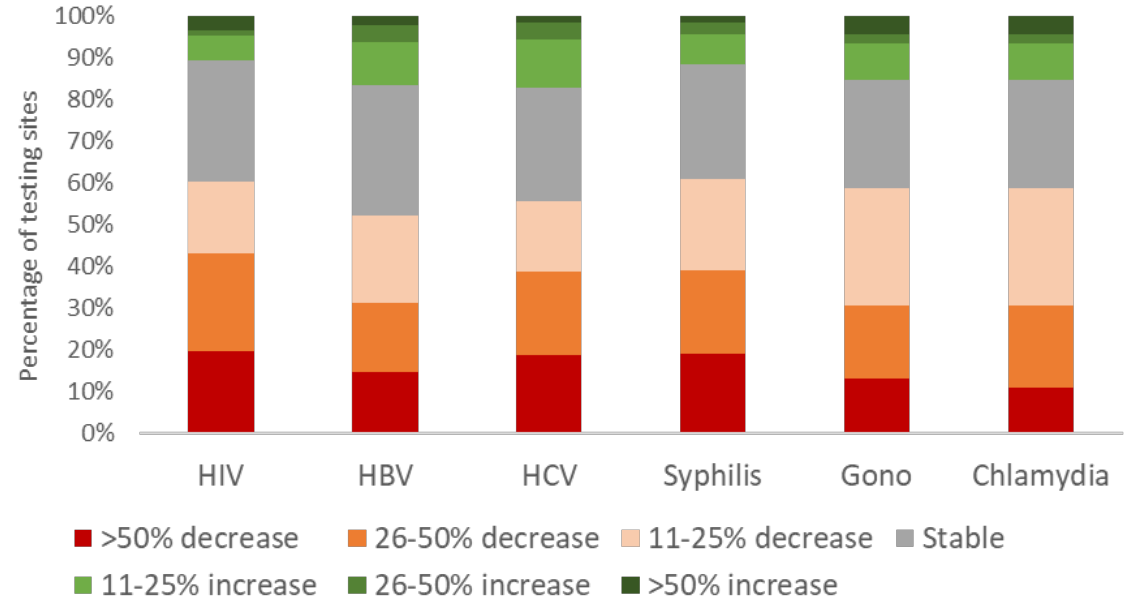
Addressing Hepatitis, HIV, STIs and TB

Percentage changes in testing volume, by infection

March-May and June-August 2020 compared to March-May 2019 (n=96)



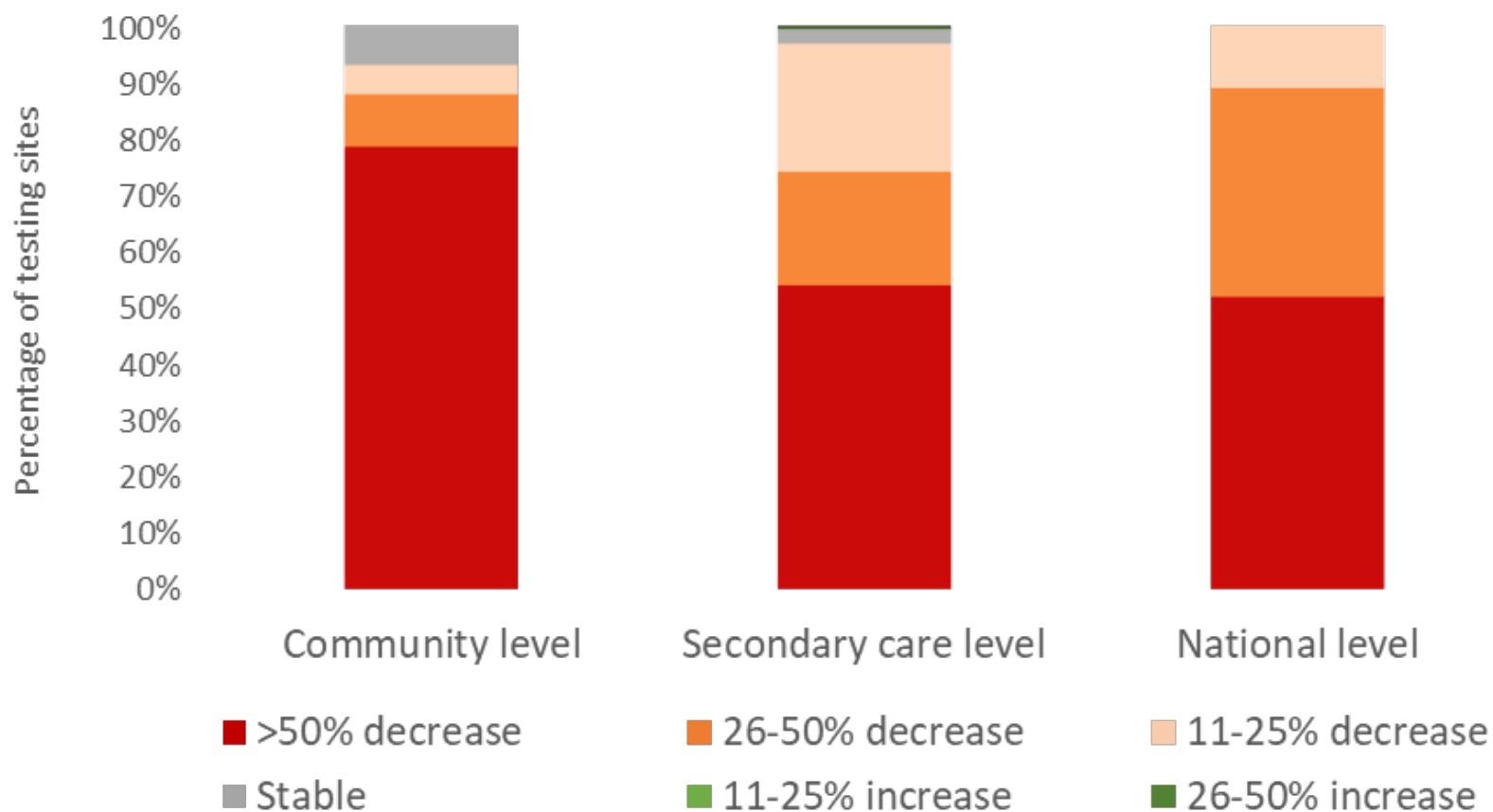
March-May 2020



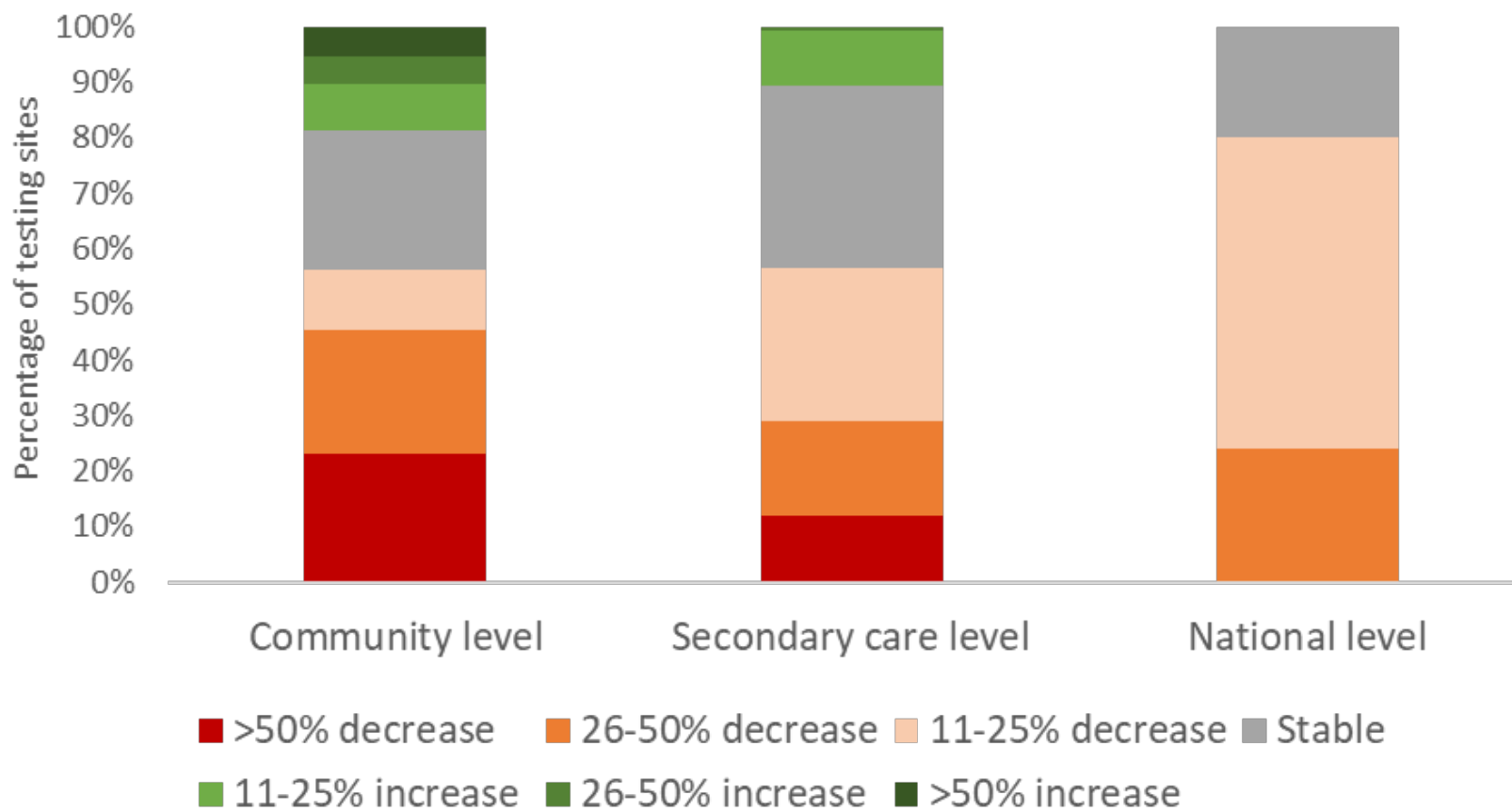
June-August 2020

Percentage changes in testing volume (all infections) by sector

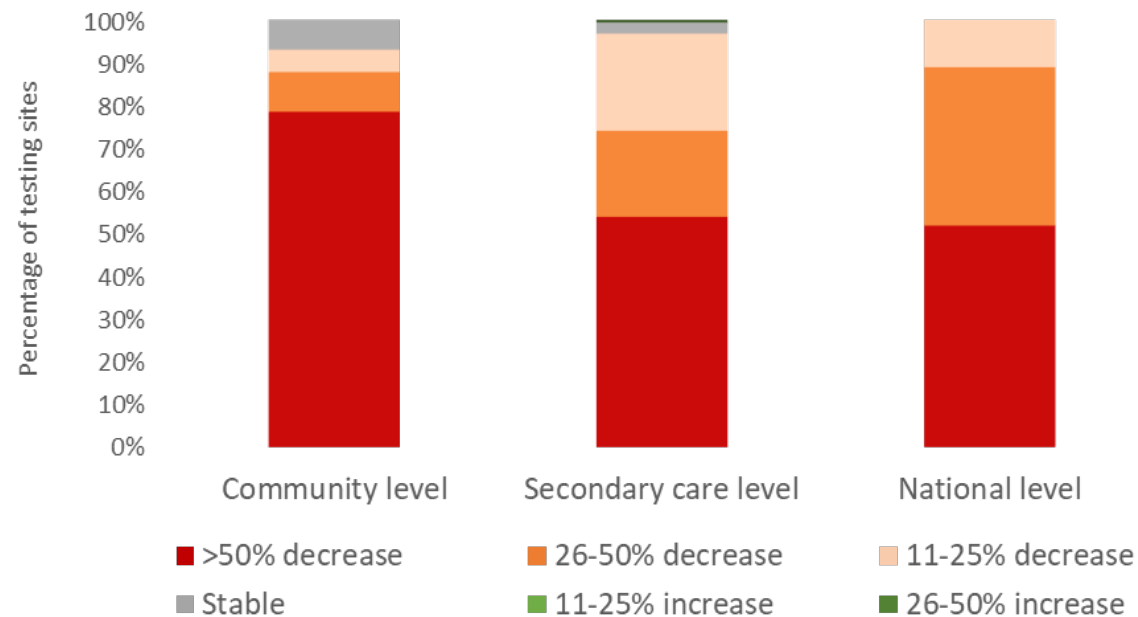
March-May 2020 compared to March-May 2019 (n=96)



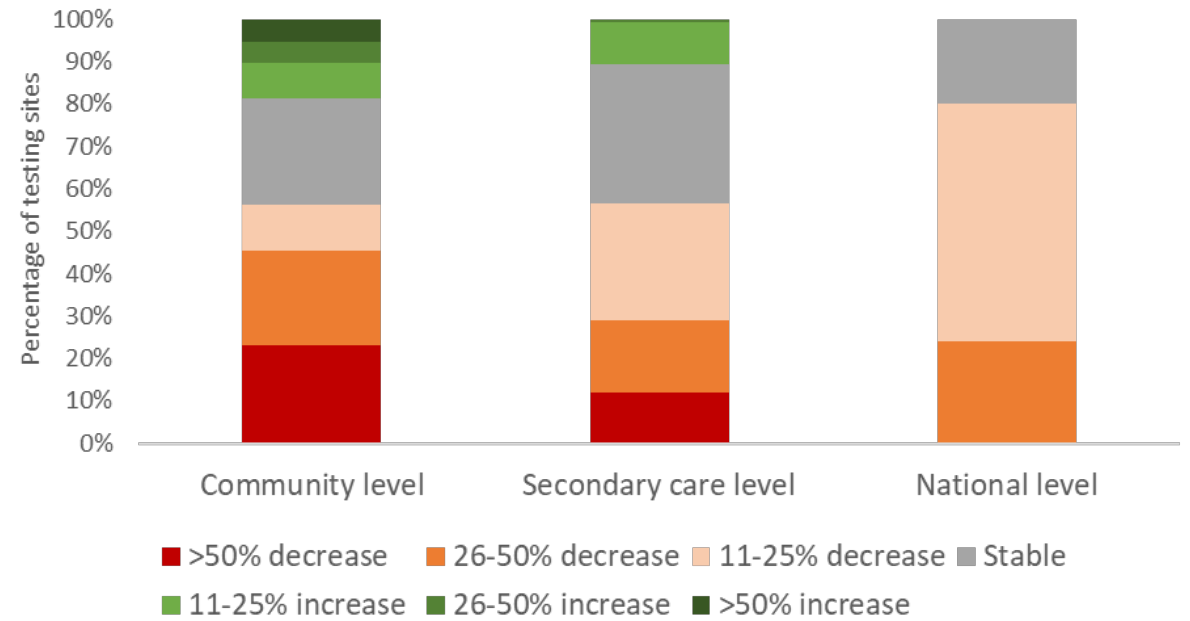
Percentage changes in testing volume (all infections) by sector June-August 2020 compared to March-May 2019 (n=96)



Percentage change in testing volume (all infections) by sector March-May and June-August 2020 compared to March-May 2019 (n=96)

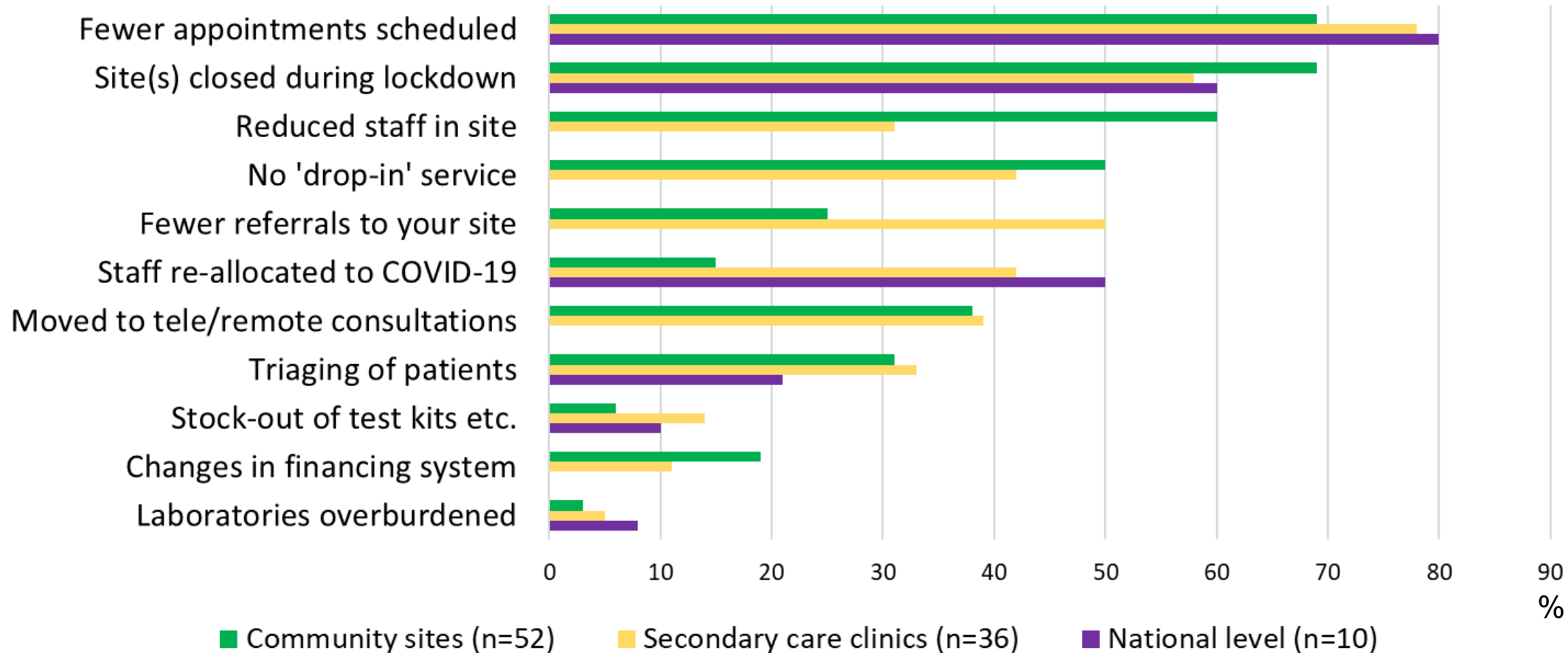


March-May 2020



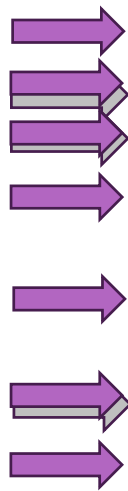
June-August 2020

Reported reasons for observed declines in testing volume, by sector (n=98)



Reported reasons for observed declines in testing volume, by sector (n=98) (Preliminary results)

	Community level sites (n=52)		Secondary level care sites (n=36)		National level (n=10)	
	n	%	n	%	n	%
Reasons for observed declines in testing volume						
Site(s) closed during lockdown	36	69%	21	58%	6	60%
Staff re-allocated to COVID-19	8	15%	15	42%	5	50%
Reduced staff in site	31	60%	11	31%	-	-
Fewer appointments scheduled/reduced attendance	36	69%	28	78%	8	80%
Fewer samples sent to the lab/ fewer referrals to blood draw/testing	10	19%	24	67%	-	-
No 'drop-in' service (only testing by appointment)	26	50%	15	42%	-	-
Fewer referrals to your site	13	25%	18	50%	-	-
Changes in financing system	10	19%	4	11%	0	0%
Stock-out of test kits, tubes, reagents or consumables	3	6%	5	14%	1	10%
Triaging of patients ^b	16	31%	12	33%	2	20%
Moved to telemedicine/remote consultations	20	38%	14	39%	-	-
Laboratories overburdened	-	-	-	-	4	40%



Reported new measures implemented to restore testing provision, by sector (n=98) (Preliminary results)

	Community level sites (n=52)		Secondary level care sites (n=36)		National level (n=10)	
	n	%	n	%	n	%
New measures implemented to restore testing provision						
Remote counselling appointments	35	67%	25	69%	0	0%
Home-based sampling	8	15%	6	17%	2	20%
HIV self-testing (on-site or by referral)	23	44%	4	11%	1	10%
Triaging of patients	16	31%	13	36%	0	0%
No 'drop-in' service	25	48%	13	36%	-	-
Referral to other testing sites	19	37%	6	17%	-	-
Staff reinforcement	5	10%	8	22%	0	0%
Funding reallocations	13	25%	1	3%	-	-
Equipment acquisition	5	10%	0	0%	-	-
Expanded outreach testing	11	21%	4	11%	-	-
Testing campaigns	19	37%	4	11%	-	-
Revised diagnosis algorithm	-	-	-	-	0	0%
Community based testing	-	-	-	-	0	0%
Lay provider testing	-	-	-	-	1	10%

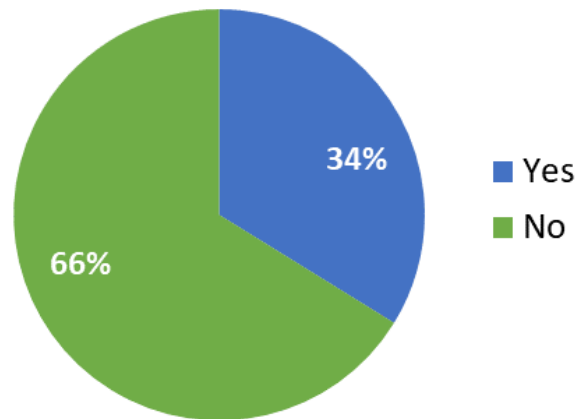


Guidance or support considered important to reduce impact of COVID-19 on testing, by sector (n=98) (Preliminary results)

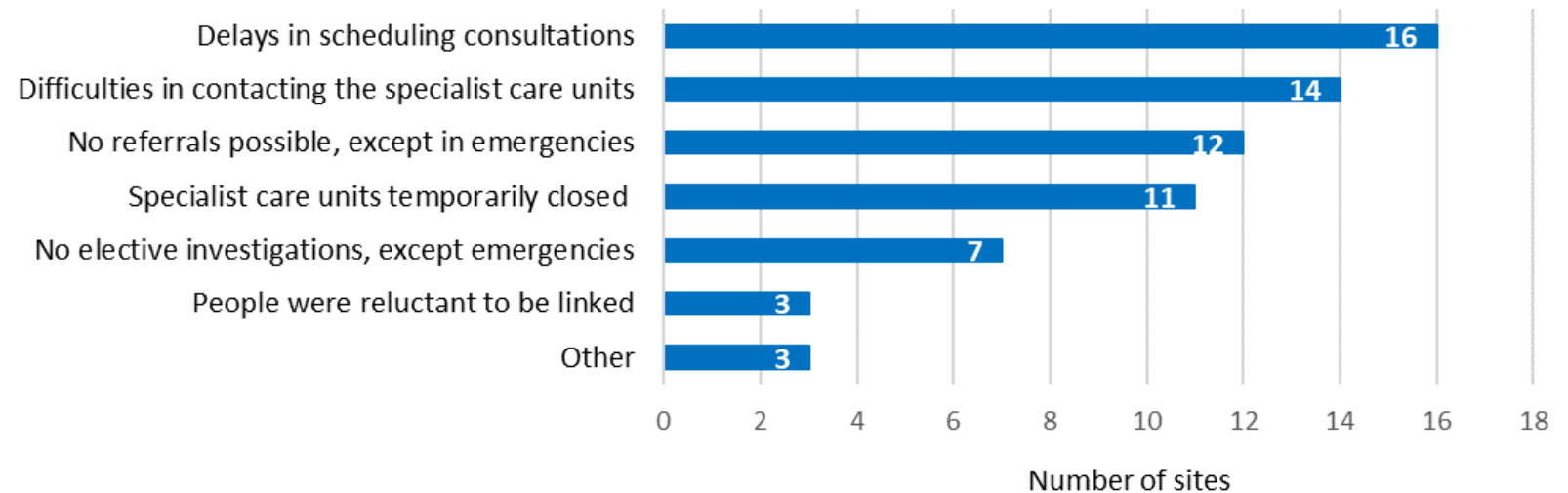
	Community level sites (n=52)		Secondary level care sites (n=36)		National level (n=10)	
	N	%	n	%	n	%
Additional human resources	23	44%	16	44%	1	10%
Increased financial support	35	67%	13	36%	1	10%
Regulatory changes	16	31%	2	6%	0	0%
Programmatic guidance	4	8%	1	3%	2	20%
Technical guidance	6	12%	3	8%	1	10%
Technical support on specific issue	5	10%	4	11%	1	10%
Procurement/supply chain related support	6	12%	4	11%	1	10%
Other	4	8%	2	6%	0	0%
None	7	13%	5	14%	4	40%

Linkage to care (HIV/viral hepatitis/STI)

Percentage of community testing sites experiencing problems in ensuring linkage to care (March-August 2020) (n=71)



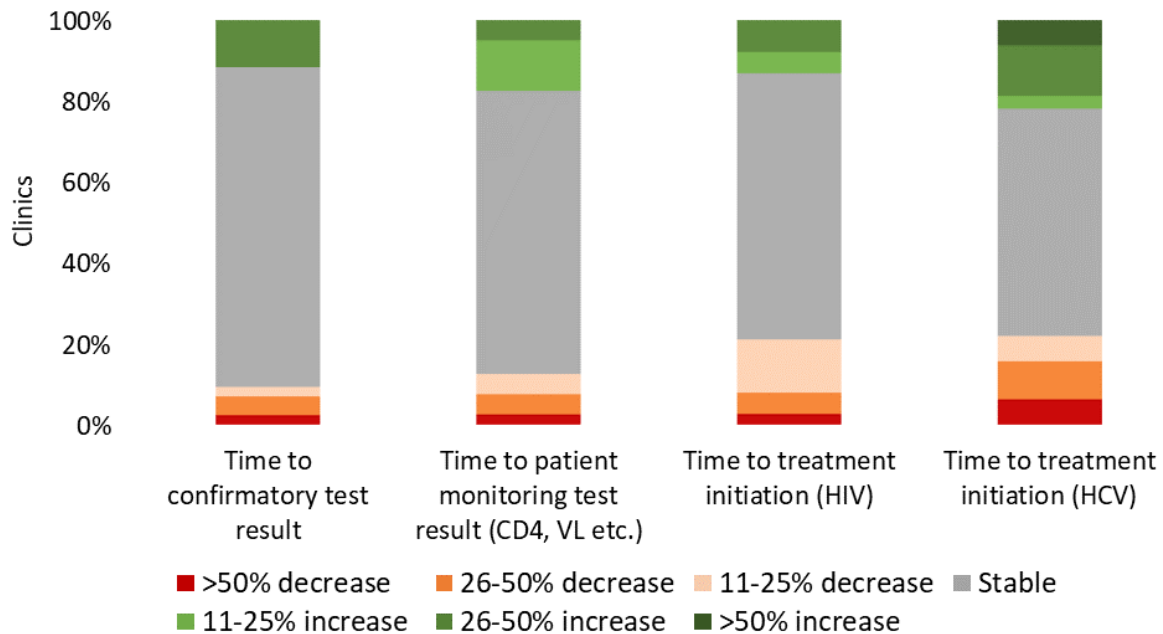
Main reported challenges in ensuring linkage to care for people testing/screening positive in a community testing site (March-Aug 2020)



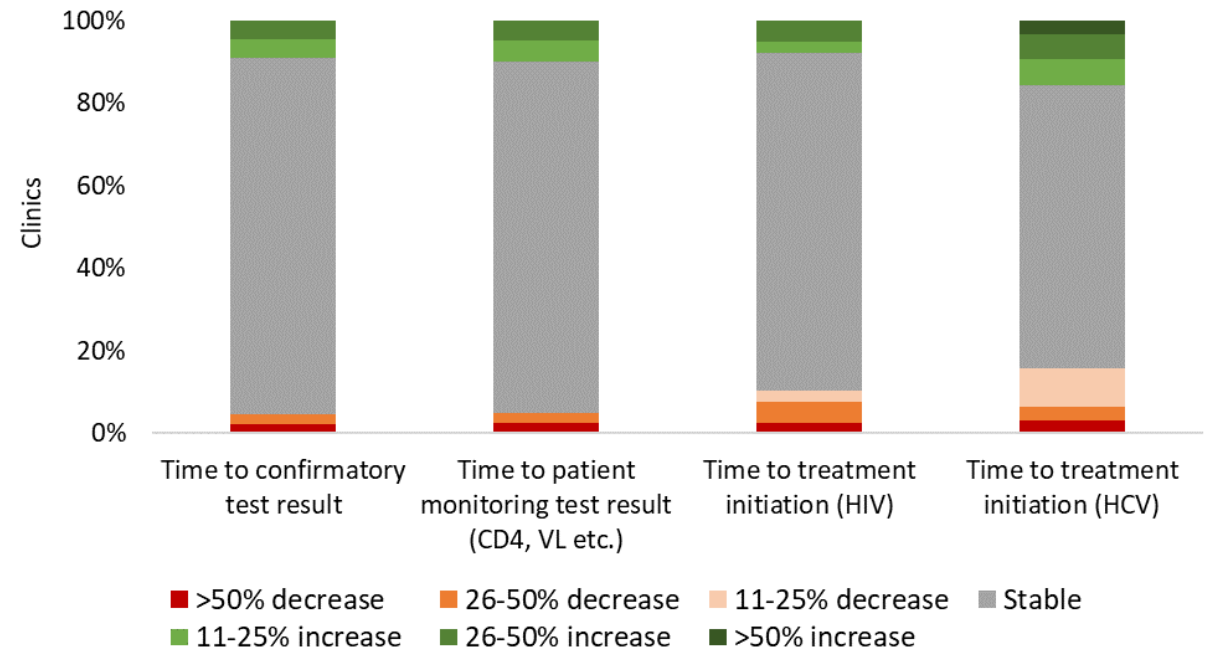
Continuum of care

Changes in selected continuum of care measures (all infections), by category of change

March-May 2020 compared to March-May 2019 (n=43)

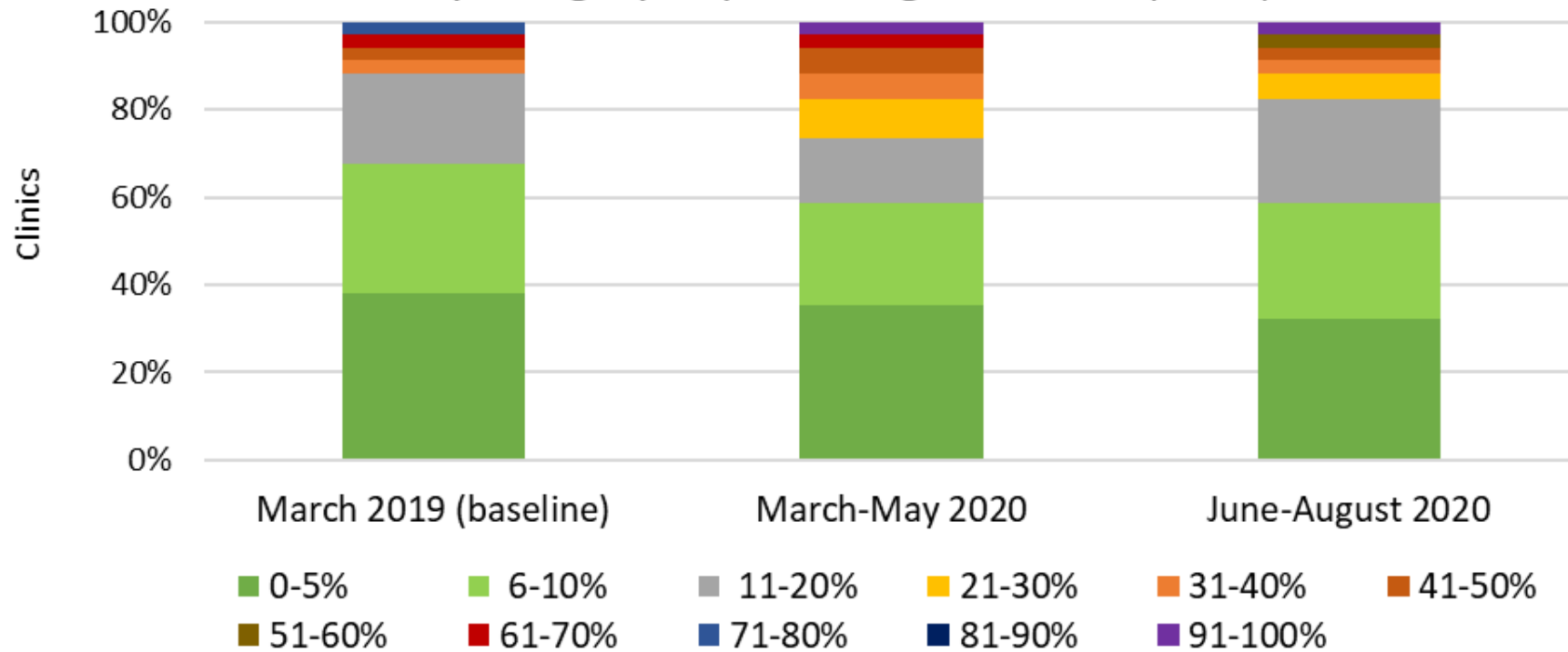


June-Aug 2020 compared to March-May 2019 (n=44)



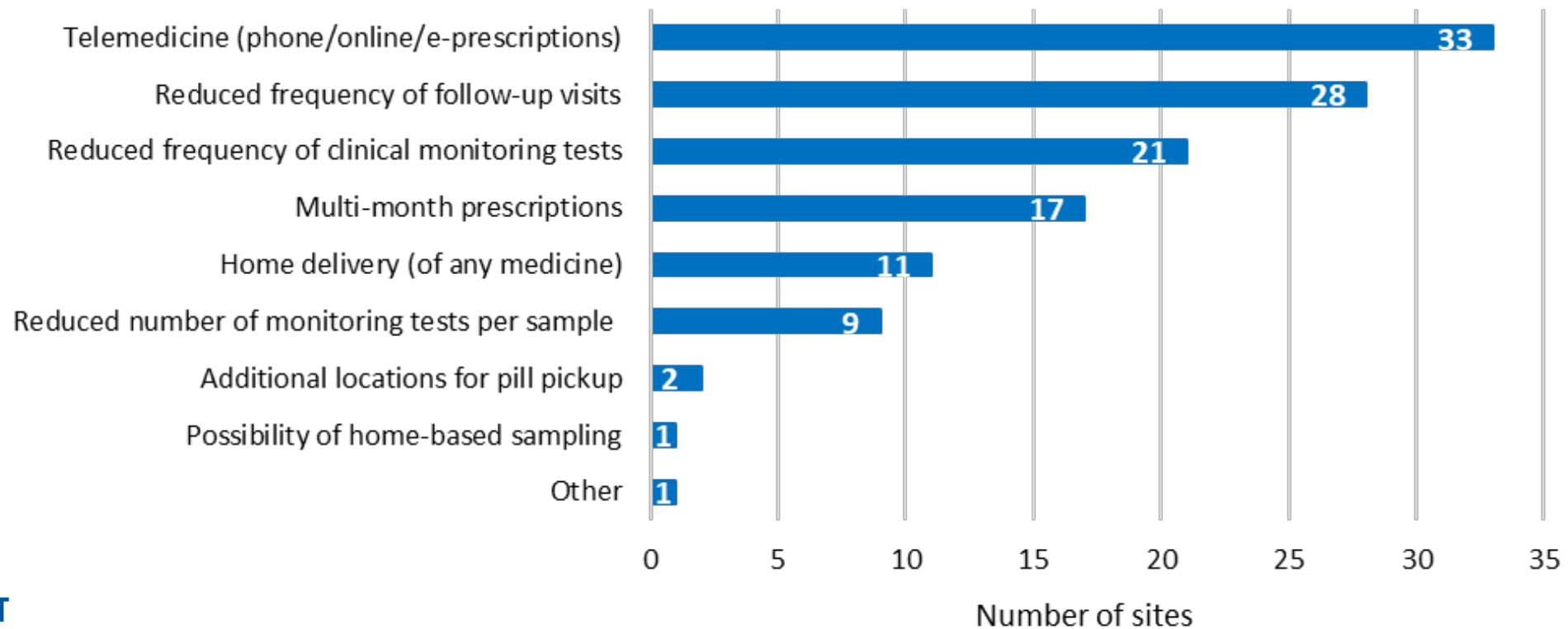
Clinic no-show

Percentage of secondary care clinics reporting that patients with an appointment did not show up or were not reachable, by category of percentage no-show (n=34)



Measures implemented post-COVID to HIV/HBV/HCV/STI clinical care and follow-up practice

Measures implemented to mitigate impact on linkage and retention in care (March-Aug 2020) (n=43)



HepHIV2021 Conference (Lisbon/virtual)

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More information via the conference website
(<https://www.eurotest.org/Conferences/HepHIV-2021-Lisbon-Virtual-Conference>)

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THANK YOU

For any questions, please contact
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No conflict of interest