

Foreword by Dr Mary Armitage



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Tackling HIV Testing

The outlook for many patients with HIV-related conditions has been greatly improved in recent years and HIV prevalence is increasing year on year, primarily as a result of effective therapies. Despite these advances in treatment, HIV infection remains incurable and a life-altering diagnosis, but if diagnosed early, most people with HIV can be well managed and lead full and healthy lives. Conversely, those who are diagnosed late have a much greater risk of complications and death. Currently, around one-third of the new cases identified in the UK each year are late diagnoses and overall HIV continues to be underdiagnosed, with around 20,000 adults with HIV in the UK unaware of their infection. Delayed diagnosis also increases the risk of onward transmission.

Historically, there has been a perception that HIV testing is the province of HIV specialist clinicians, yet there are compelling reasons for making the HIV test a routine investigation in primary care and many secondary care settings:

- to reduce preventable complications, unnecessary illness and death
- to combat the spread of HIV by reducing both the number of people undiagnosed who may transmit infection and the infectiousness of those diagnosed
- better use of NHS resources: a lifetime's HIV treatment is significantly cheaper than prolonged spells of inpatient care as well as optimising the quality of life for patients.

There have been a number of recent initiatives to encourage healthcare professionals in all settings to offer and carry out more HIV testing:

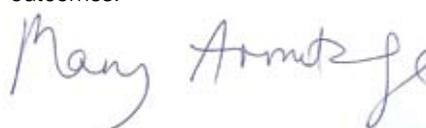
- the Chief Medical Officer's letter of September 2007 asking all medical practitioners for 'a special effort' to identify cases and help to combat HIV
- the release of the *UK national guidelines for HIV testing 2008* along with a MedFASH booklet for non-HIV specialists in secondary care
- a further letter in September 2009 from the Chief Medical Officer to Presidents of Royal Colleges and Faculties, asking them for an update on progress and renewing the call to improve the detection and earlier diagnosis of HIV.

These initiatives are all aimed at normalising the HIV test for clinicians and consequently for patients too. It is known that the HIV test is more likely to be accepted by patients when offered as a routine investigation, and this in turn helps to reduce the stigma associated with HIV.

The MedFASH booklet, *HIV for non-HIV specialists*, was launched last year alongside the *UK national guidelines for HIV testing 2008* and it provides practical information for the individual clinician on the signs and symptoms of undiagnosed HIV infection. This resource pack builds on the work of the booklet and the focus is to reach the entire healthcare community in secondary care. The resource pack is aimed predominantly at HIV leads in hospital trusts to support them in making the case for routine HIV testing to clinical colleagues and to policy and decision makers across secondary and primary care trusts.

The pack will give busy clinicians the tools they need to make HIV testing routine. There are educational materials for use in grand rounds and departmental education sessions as well as ready-made policy documents and other useful resources for staff and patients. A copy of *HIV for non-HIV specialists* is also included in this resource pack. All the materials in the pack have been reviewed by a multidisciplinary advisory group of clinicians working in HIV and other specialties and patient representatives.

I would like to thank the members of the Advisory Group and other contributors to the project who have given so much of their valuable time and expertise, and also Russell Fleet and Ruth Lowbury from MedFASH for their enthusiasm and hard work. Our aims are to encourage more HIV testing, reduce levels of undiagnosed HIV and increase earlier diagnoses. We hope that this resource pack will help to achieve these outcomes.



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