

OPTIMIZATION STRATEGIES FOR HIV, SYPHILIS AND HEPATITIS TESTINGS IN INFECTIOUS DISEASE AND DERMATOLOGY CLINICS: PRELIMINARY RESULTS OF MODENA COLLABORATION EXPERIENCE

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Background: HIV and sexually transmitted diseases (STDs) screening tests are usually offered in many Italian health institutions. These tests are very important for detection of HIV and STDs, for treating them at an early stage and for prevention of diffusion inside communities. Generally, HIV test is the only screening exam performed in Infectious Disease Clinic (IDC). Increased collaboration between IDC and STDs Centre using the same approach to test sexually transmitted infections could implement the number of new diagnoses. In the Azienda Ospedaliero-Universitaria (AOU) of Modena, the IDC and STDs Centre of Dermatology Clinic began a strict collaboration and adopted a common diagnostic profile including HIV, syphilis, HBV and HCV screening tests since 2013. The aim of the study was to observe the results of a seven-years collaboration in term of number of new HIV and STDs diagnoses.

Material & Methods: Consecutive patients who underwent at least 1 screening test for HIV, syphilis, HBV and HCV from January 2010 to September 2016 in IDC or STDs Centre were included. Demographical data were electronically recorded in clinical databases. “Linkage to care” was obtained through a capture and recapture method using Modena HIV surveillance System and Modena HIV clinic databases.

Results: During the study period 10675 admittances related to 8623 patients, who carried out at least 1 screening test, were registered in the centres. They were mainly male (68.2%). Median age was 33 years-old (IQR 26-43). Foreigners represented 26.5% of tested people. Since 2013 an increasing number of admittances was observed (1343 accesses in 2010 and 1901 in 2015). HBV, HCV and syphilis tests increased in IDC after 2013 as well as HIV tests in STDs Centre (Figure 1). A total of 700 people were positive for at least 1 screening test: 71 with HIV infection (2016 incidence rate 1.4%), 314 with syphilis (2016 incidence rate 1.3%), 182 with HCV infection (2016 incidence rate 1.64%) and 161 with HBV infection (2016 incidence rate 3.8%). The number of HIV and HBV positive tests increased in the last 2 years but the trend was statistically significant only for HIV ($p < 0.001$). 57% of HIV new infections were observed in Italian men, while 82% of new HBV infections were detected in young foreigners. During the study period the number of new

syphilis infections showed a reduction ($p < 0.001$) while HCV positive tests were changeless ($p = 0.245$). 87.6% of new infections were found be linked in care in AOU of Modena.

Conclusion: The agreement between IDC and STDs Centre has proven to work well increasing the diagnosis over the time and obtaining a good results in “linkage to care”, which allows to patients with positive screening test to be sent to the pertinent Clinic for further investigations and therapeutical management.

Figure 1: Number of tested infection by year of observation.

