

Doctors failing to diagnose HIV early in UK Africans

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Doctors are missing valuable opportunities to diagnose HIV in Africans living in the UK, with serious consequences for their long term health, according to research funded by the Wellcome Trust. The researchers, led by Dr Fiona Burns at the Centre for Sexual Health & HIV Research, University College London (UCL), are calling for GPs and other patient services to be much more proactive in offering HIV testing to higher-risk groups.

There are an estimated 63,500 adults living with HIV in UK and infections within the heterosexual community are increasing. The majority of heterosexually-acquired cases are found in African communities, and a small but significant number of these infections occur within the UK.

The introduction of highly active antiretroviral therapy (HAART) means that if HIV is diagnosed early – in other words, before symptoms show – then in most cases it becomes a chronic long term condition rather than a terminal illness. However, HIV-positive individuals who are diagnosed late are approximately fourteen times more likely to die within one year of diagnosis than those diagnosed early.

Dr Burns and colleagues surveyed 263 HIV-positive patients from Africa and found that half were diagnosed late despite above average use of primary and secondary healthcare services such as GPs and clinics. In more than 80% of cases of people who were later diagnosed as HIV-positive, HIV testing was never discussed by the GP, despite the



individuals coming from countries with high HIV prevalence. The results are published today in the journal AIDS.

"What we are seeing here is a failing to utilise opportunities for earlier diagnosis of HIV," says Dr Burns. "People are dying because they are not being tested early enough. We need to be in a position where GPs are prepared to discuss HIV risks and offer HIV tests as a matter of course to people from at-risk communities."

The study echoes advice in a letter to healthcare professionals from Chief Medical Officer Sir Liam Donaldson. In the letter, Sir Liam recommends that colleagues, including GPs, "be alert to the circumstances in which it is appropriate to offer and recommend an HIV test. This is especially important when the patient may have an unacknowledged but identifiable risk."

Dr Burns believes that GPs are ideally positioned within the local community to discuss HIV testing with their patients. However, she acknowledges that this may also work against them.

"GPs have a long-term relationship with their patients and their communities, which should make it easier for them to discuss HIV testing," says Dr Burns. "However, given the stigma surrounding HIV, patients may be concerned about confidentiality issues."

People in African communities also need to be more aware of the risks that they face and of the benefits of HIV testing, says Dr Burns. Despite coming from countries of high HIV prevalence, personal appreciation of risk amongst the community is relatively low and knowledge as to the benefits of HIV testing lacking.

"African communities stand to benefit tremendously from increased awareness and uptake of HIV testing," says Dr Burns. "When individuals



test regularly and know their HIV status, they can make an informed choice about their behaviours, get treatment more quickly if needed, and help prevent the onwards spread of the disease."

The research has been welcomed by Rhon Reynolds, Senior Policy Officer and Deputy CEO of the African HIV Policy Network.

"We welcome the important findings from this study," says Mr Reynolds. "It is clear that African people in the UK need to be informed of the benefits of early testing. We need to seize every opportunity to combat the dire consequences of a late diagnosis. Simultaneously we need to be aware of the social, political and cultural barriers that make it hard for African people to test."

Source: Wellcome Trust

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