

## Routine HIV screening in community health centers boosts HIV testing

December 15 2009

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UCSF researchers have that found routinely offering rapid HIV tests to patients in community health centers can significantly increase the number of patients screened for HIV.

Study findings are published in the December 2009 issue of the [Journal of General Internal Medicine](#).

"In the six centers implementing the new procedures, the number of [patients](#) screened for [HIV](#) jumped from 3,000 in the prior year to almost 11,000—more than a three fold increase. Our results show that you can successfully implement routine HIV screening in primary care settings," said Janet J. Myers, PhD, MPH, assistant professor of medicine at the UCSF Center for [AIDS](#) Prevention Studies.

The research, conducted in partnership with the National Association of Community Health Centers, took place in community health centers in Mississippi, North Carolina and South Carolina. The national network of centers sees more than 20 million patients, of whom 90 percent are low income, half are rural with most of the rest in inner cities, and two-thirds are racial and ethnic minorities. HIV disproportionately affects health center patients; so increasing testing in these settings is a priority.

Patients in the clinics were offered the tests routinely as part of their primary health care visits. While most patients offered a test accepted, results varied by health center and by race, ethnicity and age. Patients over age 55 were less likely to receive testing when offered. And non-

white patients, particularly Latinos, were more likely to receive testing when it was offered.

"While centers were able to increase testing considerably, implementation was an issue for some clinics. One health center tested over 80 percent of its patients while another tested less than 10 percent of patients. Leadership, training and additional resources for testing could improve the results we saw," said Myers.

Seventeen new cases of HIV were identified during the study period and 14 of those patients were linked to care.

"This testing model could be an important feature of the emerging 'test and treat' paradigm, especially if the linkage and referrals to treatment are expanded and strengthened," said Myers.

Provided by University of California - San Francisco

Citation: Routine HIV screening in community health centers boosts HIV testing (2009, December 15) retrieved 25 April 2024 from <https://medicalxpress.com/news/2009-12-routine-hiv-screening-health-centers.html>

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