

HIV self-testing: The key to controlling the global epidemic

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A new international study has confirmed that self-testing for HIV is effective and could be the answer to controlling the global epidemic. This major systematic review, led by the Research Institute of the McGill University Health Centre (RI-MUHC), shows HIV self-testing removes much of the fear and stigma associated with being tested for the disease. This study, which is published in *PLoS Medicine* is the first of its kind and could pave the way for early detection and treatment around the world, thereby reducing transmission.

"Thirty years into the [HIV epidemic](#), there is no vaccine in sight. Treatment as a prevention strategy has been known to work, but uptake of [HIV screening](#) seems to be limited by a societal problem: HIV stigma and perceived discrimination," says Dr. Nitika Pant Pai, who is the first and corresponding author of the study, a clinical researcher at the RI-MUHC and assistant professor in the Department of Medicine at McGill University.

According to UNAIDS, 50 per cent of people living with HIV worldwide are unaware of their [HIV status](#) and about 2.5 million people become infected every year. Dr. Pant Pai firmly believes that access to an HIV self-test linked to expedited counselling systems will help expand access to screening and reduce judgement and perceived attitudes around HIV testing. Self-tests are performed in oral fluid samples from the gum lining of the mouth in the privacy of one's home. They are non-invasive, convenient, ensure confidentiality and can provide results within 20 minutes. The results are self-interpreted however, and require

confirmation at a medical clinic if positive.

There is a lot of global momentum in favour of HIV self-testing with several countries and health networks advocating their use. Several studies have been conducted to determine the best methods of making a self-test with linked counselling and referral services available in various African, North American and European settings. Dr. Pant Pai and her colleagues decided to look at the global evidence on self-testing strategies based on acceptability, feasibility and accuracy and success with linkages to care.

They examined 21 worldwide studies and found that two distinct self-testing strategies have been tried: supervised self-testing (self-testing and counselling aided by a health-care professional), and unsupervised self-testing (self-testing performed without any help but with counselling available by phone or internet). Most of the data came from studies carried out in high-income settings including the United States, Canada, Spain and the Netherlands, as well as Kenya, Singapore, Malawi and India.

Across the various studies, researchers observed that acceptability (defined as the number of people who self-tested divided by the number who consented to self-test) was very high for both self-testing strategies. They also found evidence that people preferred self-testing to facility-based testing and oral self-testing to blood-based self-testing. "The preference was largely driven by the fact the oral self-tests are non-invasive, convenient, easy to swab and do not involve a finger stick or blood from your arm for a preliminary screen," explains Dr. Pant Pai. "A lot of people also wanted to take the oral self-test home to test their partners."

Dr. Pant Pai's project is supported by a Stars in Global Health award from [Grand Challenges](#) Canada, which is funded by the Government of

Canada. "Canada has a deep pool of talent dedicated to pursuing bold ideas that can have big impact in the developing world," adds Dr. Peter A. Singer, CEO of Grand Challenges Canada. "Grand Challenges Canada is proud to support innovators like Dr. Pant Pai because they will make a difference to many lives."

Dr. Pant Pai and colleagues urge policy makers everywhere to look at the proven results of supervised and unsupervised self-testing, and think how best to put these strategies into practice in their own countries. "We have, as a society, made great progress with biomedical tools, drugs and strategies, but we haven't conquered HIV-related stigma and perceived discrimination. The time is now right to tailor strategies to suit the preferences and lifestyles of patients with a view to expand access."

More information: www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.1001414

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