

# Efforts to ensure earlier diagnosis of HIV infection across Europe are still needed

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Late diagnosis of HIV infection and entry into care remains a substantial problem across Europe according to a study published in this week's *PLOS Medicine*. The study, which was an international collaboration led by Amanda Mocroft from University College London, UK, analysed data from the COHERE in EuroCOORD study, an international collaboration including over 84,000 individuals with HIV infections from 35 European countries from January 2000 to January 2011.

The researchers analysed data from over 20 observational studies from across Europe that contribute data to the COHERE collaboration and found that nearly 54% of the participants diagnosed with HIV presented late to a clinic, that is they had a CD4 count of less than 350 cells/mm<sup>3</sup> (a measure of [white blood cells](#) used to monitor HIV infection) or an AIDS-defining illness within 6 months of HIV diagnosis within the time period studied.

Diagnosis of HIV infection and receiving care as soon as possible after becoming infected with HIV is important for patients because individuals who receive anti-retroviral drugs, which can control but not cure HIV, and counselling earlier have better health outcomes. Individuals who are receiving treatment that reduces the amount HIV virus in their system are also less likely to pass on the virus.

Although researchers found that late presentation overall decreased from 57.3% in 2000 to 51.7% in 2010/11, in some populations, such as [injection drug users](#) in Southern Europe, late presentation increased.

Late presentation was found to be associated with an increased rate of AIDS/deaths, particularly in the first year after HIV diagnosis, although this also varied across Europe. They also found that less than 10% of individuals had delayed entry into care after diagnosis, although this information was only available for a minority of patients.

The authors note, "while late presentation has decreased over time across Europe, it remains a significant issue across the European continent with implications for both individuals and the public health in most European regions."

The authors conclude, "It is important that earlier HIV testing strategies are targeted to all populations at risk both within the health care system and in community based programs, to ensure timely referrals after testing positive, improved retention in care strategies, and optimal clinical management and initiation of ART in those testing HIV positive."

**More information:** Mocroft A, Lundgren JD, Sabin ML, Monforte Ad, Brockmeyer N, et al. (2013) Risk Factors and Outcomes for Late Presentation for HIV-Positive Persons in Europe: Results from the Collaboration of Observational HIV Epidemiological Research Europe Study (COHERE). *PLoS Med* 10(9): e1001510. doi:10.1371/journal.pmed.1001510

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