



## ViiV Healthcare's Position on HIV Testing

ViiV Healthcare is a company 100% committed to HIV, and we are always looking to move beyond the status quo and find new ways of navigating the challenges of the HIV epidemic. While tremendous progress has been made over the past 30 years, the HIV landscape is constantly changing. We are using our heritage and expertise to refine our approach and map an HIV free future in HIV, leaving no patient behind. We are a patient-centric company with patients at the forefront of all our decisions.

We will work in partnership with all stakeholders and policy-makers in order to

1. Focus on key affected populations
2. Focus on most impacted geographies
3. Support priority interventions with meaningful partnerships.

By working in conjunction with key stakeholders, we can achieve better outcomes for people impacted by the disease through expertise-sharing, synergy of partnerships, innovative R&D, and ensuring that the care provided supports PLHIV to lead healthy and full lives.

### The Issue

A cornerstone target of the UNAIDS 90-90-90 strategy is that by 2020, 90% of all people living with HIV (PLHIV) will know their HIV status.<sup>i</sup> In order to achieve this, there is a need for a significant scale-up in current testing efforts. Early diagnosis of HIV infection is essential in reducing mortality, morbidity and transmission rates of HIV, allowing for counselling, and assessing suitability for treatment.

Despite the priority accorded to testing in the UNAIDS 90-90-90 strategy, in 2015 it was estimated that 40% of PLHIV globally did not know their status<sup>ii</sup>, and evidence suggests that a significant breaking point in the treatment cascade remains at the point of diagnosis across many countries.<sup>iii</sup> Global analysis indicates that at a regional level some of the poorest diagnostic performance is in countries within Eastern Europe and sub-Saharan Africa,<sup>iv</sup> which represent both diverse populations and healthcare systems.

In addition, uptake of testing varies greatly within countries themselves. In countries with low HIV prevalence, there is often low uptake of HIV testing for key affected populations<sup>v</sup>. In countries with high HIV prevalence, HIV testing rates for men are generally lower than for women.<sup>vi</sup> Key diagnostic challenges have also been identified at the international level for children and adolescents, including the

inappropriateness of several existing tests for very young children and the difficulties faced by adolescents in accessing testing services.<sup>vii viii</sup>

PLHIV who are being diagnosed are all-too-often picked up late, at an advanced stage of the disease. For example, in 2014 in Latin America at least 38% of PLHIV had advanced disease when tested for the first time<sup>ix</sup>. In Eastern Europe and central Asia almost half of all newly diagnosed adults already have CD4 counts lower than 350.<sup>x</sup>

Early and effective diagnosis not only limits the impact of HIV on individuals who have contracted the virus, but it is now widely accepted that placing PLHIV on antiretroviral treatment (ART) is the most effective form of prevention for those without HIV. PLHIV on ART are less likely to transmit the virus because of the viral suppression that effective treatment offers.<sup>xi,xii</sup> One recent study found that people on treatment were 96% less likely to transmit HIV to their partners than untreated people.<sup>xiii</sup> This underlines not only the need for the strategic use of treatment, but also increases the importance of early and increased testing, particularly amongst at-risk groups, in terms of tackling transmission.

Recent reports further suggest that there are challenges in the quality of HIV testing, and evidence in resource-limited settings indicates that there are significant numbers of false positives. There are likely to be further false negatives that are difficult to pick up. Policy analysis has suggested that under 20% of national HIV testing strategies align with WHO recommendations.<sup>xiv</sup>

## ViiV Healthcare's Position

HIV testing is the entry point into care for PLHIV and as such should represent a core component of HIV response strategies. It is clear that testing rates remain too low worldwide and programmes to improve testing, especially of key affected populations, are needed to meet the goals of the UNAIDS 90-90-90 strategy that 90% of all people living with HIV (PLHIV) will know their HIV status by 2020.

In particular, the points below should be considered by all stakeholders:

- HIV testing is the entry point into care for PLHIV. As such, investment in, and the expansion of, testing programmes should be viewed as a priority for all HIV stakeholders.
- Particular focus should be given to widely available and user-friendly HIV testing technologies, as well as by expanding community-based and outreach testing services. Non-healthcare professional providers who are trained and supervised to use rapid diagnostic tests (RDTs) can independently conduct safe and effective HIV testing services.<sup>xv</sup> There may also be significant benefits to increasing access to self-testing, which will improve HIV diagnosis in a manner consistent with human rights principles by allowing people to choose their own form of diagnosis whilst also widening reach. However, this approach can only be effective if individuals have strong linkages to counselling and high quality care.

- Countries should consider a strategic mix of approaches to deliver HIV testing services. Universal access to testing should be provided equally across a country or population. Additionally, further focus should be given to populations at greatest risk and deploy a mix of tests and settings to maximise reach and effectiveness.<sup>xvi</sup> National HIV stakeholders should recognise that some populations are more affected than others and should develop screening programmes that take into account the specific circumstances of these key affected populations.
- Stakeholders should focus on moving 'beyond a passive approach to testing', and should instead undertake to proactively expand the reach of, and increase the demand for testing services.<sup>xvii</sup> This will involve promoting testing, expanding the number of settings, through which testing can be made available, utilising a broader array of testing approaches, and tackling stigma and discrimination. For instance, studies have suggested that the inclusion of HIV in multi-disease strategies can drive up demand.<sup>xviii</sup>
- Studies have shown how fear of high levels of HIV-related stigma, such as within Black African communities in England, have acted as a barrier to HIV testing.<sup>xix</sup> Stakeholders should aim to combat stigma and discrimination in all its forms, and provide testing options that help address stigma and target testing to at-risk communities in order to increase testing.
- Given ongoing issues with misdiagnosis in low resource areas, countries must develop effective quality assurance systems and access to accurate testing methods. This will ensure the robust delivery of accurate HIV testing services.<sup>xx</sup>
- Viral load testing also increasingly needs to be recognised as a component of HIV testing and treatment. Treatment as Prevention should be considered the cornerstone of HIV prevention efforts due to its impact on the onward transmission. Every PLHIV should have access to viral load testing in order to ensure that their HIV is appropriately managed.<sup>xxi</sup>
- Lastly, consideration must be given to ensuring that all testing programmes are implemented in a manner consistent with human rights. PLHIV should have a right to choose how and where they are diagnosed, yet many countries have implemented coercive programmes.

## Conclusion

Effective, targeted HIV testing with linkage to high quality care can have a real impact on the HIV epidemic. Early diagnosis not only means that PLHIV can benefit from earlier treatment that allows them to lead longer, healthier and more productive lives, but also can dramatically decrease the probability of onward transmissions and the associated added cost and burden on society.

Universal access to HIV testing should therefore be considered a priority by all stakeholders engaged in the response to the HIV epidemic

As a specialist HIV company, ViiV Healthcare is focused on continuing to improve outcomes for society and for PLHIV. Through our Positive Action programmes, ViiV

Healthcare partners with stakeholders, including community organisations and national health authorities, to help increase HIV testing rates globally.

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- <sup>i</sup> UN AIDS. 90-90-90 An ambitious treatment target to help end the AIDS . 2014.  
[http://www.unaids.org/sites/default/files/media\\_asset/90-90-90\\_en\\_0.pdf](http://www.unaids.org/sites/default/files/media_asset/90-90-90_en_0.pdf) Accessed July 2016
- <sup>ii</sup> UNAIDS. Prevention Gap Report.2016. <http://www.unaids.org/en/resources/documents/2016/prevention-gap>. Last accessed July, 2016
- <sup>iii</sup> Levi J et al. *Can the UNAIDS 90-90-90 target be achieved? Analysis of 12 national level HIV treatment cascades.* Eighth International AIDS Society Conference on HIV Pathogenesis, Treatment and Prevention, Vancouver, abstract MOAD0102, 2015. IAS Conference. 2015  
Accessed via <http://www.aidsmap.com/Treatment-cascades-show-90-90-90-goal-within-reach-for-some-but-Eastern-Europe-lags-behind-Africa/page/2986802/> Last accessed July, 2016
- <sup>iv</sup> Levi J et al. *Can the UNAIDS 90-90-90 target be achieved? Analysis of 12 national level HIV treatment cascades.* Eighth International AIDS Society Conference on HIV Pathogenesis, Treatment and Prevention, Vancouver, abstract MOAD0102, 2015. IAS Conference. 2015  
Accessed via <http://www.aidsmap.com/Treatment-cascades-show-90-90-90-goal-within-reach-for-some-but-Eastern-Europe-lags-behind-Africa/page/2986802/> Last accessed July, 2016
- <sup>v</sup> UNAIDS. Prevention Gap Report.2016. <http://www.unaids.org/en/resources/documents/2016/prevention-gap>. Last accessed July, 2016
- <sup>vi</sup> WHO. Consolidated guidelines on HIV testing services. 2015.  
[http://apps.who.int/iris/bitstream/10665/179870/1/9789241508926\\_eng.pdf?ua=1&ua=1](http://apps.who.int/iris/bitstream/10665/179870/1/9789241508926_eng.pdf?ua=1&ua=1). Accessed July 2016
- <sup>vii</sup> Vancouver delegates call for greater innovation in HIV diagnostics. Press Release UNAIDS. July 2014.  
[http://www.unaids.org/en/resources/presscentre/featurestories/2015/july/20150722\\_HIVdiagnostics](http://www.unaids.org/en/resources/presscentre/featurestories/2015/july/20150722_HIVdiagnostics) Accessed July 2016
- <sup>viii</sup> UNAIDS. GAP Report. 2014.  
[http://www.unaids.org/sites/default/files/en/media/unaids/contentassets/documents/unaidspublication/2014/UNAIDS\\_Gap\\_report\\_en.pdf](http://www.unaids.org/sites/default/files/en/media/unaids/contentassets/documents/unaidspublication/2014/UNAIDS_Gap_report_en.pdf) Accessed July 2016
- <sup>ix</sup> UNAIDS. GAP Report. 2014.  
[http://www.unaids.org/sites/default/files/en/media/unaids/contentassets/documents/unaidspublication/2014/UNAIDS\\_Gap\\_report\\_en.pdf](http://www.unaids.org/sites/default/files/en/media/unaids/contentassets/documents/unaidspublication/2014/UNAIDS_Gap_report_en.pdf) Accessed July 2016
- <sup>x</sup> UNAIDS. GAP Report. 2014.  
[http://www.unaids.org/sites/default/files/en/media/unaids/contentassets/documents/unaidspublication/2014/UNAIDS\\_Gap\\_report\\_en.pdf](http://www.unaids.org/sites/default/files/en/media/unaids/contentassets/documents/unaidspublication/2014/UNAIDS_Gap_report_en.pdf) Accessed July 2016
- <sup>xi</sup> WHO. Antiretroviral treatment as prevention (TASP) of HIV and TB. 2012 Update.  
[http://whqlibdoc.who.int/hq/2012/WHO\\_HIV\\_2012.12\\_eng.pdf?ua=1](http://whqlibdoc.who.int/hq/2012/WHO_HIV_2012.12_eng.pdf?ua=1) Last accessed July, 2016.
- <sup>xii</sup> Cohen MS, Chen YQ, McCauley M, Gamble T, Hosseinipour MC, Kumarasamy N, et al. Prevention of HIV-1 infection with early antiretroviral therapy. *N Engl J Med* 2011;365:493-505
- <sup>xiii</sup> Cohen MS, Chen YQ, McCauley M, Gamble T, Hosseinipour MC, Kumarasamy N, et al. Prevention of HIV-1 infection with early antiretroviral therapy. *N Engl J Med* 2011;365:493-505.
- <sup>xiv</sup> Flynn D, Johnson C, Sands A, Wong V, Baggaley R. A global analysis of the role of lay providers in national HIV testing and counseling policies. Paper presented at: 8th International AIDS Society Conference on HIV Pathogenesis, Treatment and Prevention; 2015 July 19-22; Vancouver, Canada. [http://www.ncbi.nlm.nih.gov/books/NBK316018/pdf/Bookshelf\\_NBK316018.pdf](http://www.ncbi.nlm.nih.gov/books/NBK316018/pdf/Bookshelf_NBK316018.pdf). Last accessed, July, 2016
- <sup>xv</sup> WHO.Guidleines. HIV Testing Services, July, 2015.  
[http://apps.who.int/iris/bitstream/10665/179870/1/9789241508926\\_eng.pdf?ua=1&ua=1](http://apps.who.int/iris/bitstream/10665/179870/1/9789241508926_eng.pdf?ua=1&ua=1). Accessed 18.01.2016. Last accessed, July, 2016
- <sup>xvi</sup> WHO.Guidleines. HIV Testing Services, July, 2015.  
[http://apps.who.int/iris/bitstream/10665/179870/1/9789241508926\\_eng.pdf?ua=1&ua=1](http://apps.who.int/iris/bitstream/10665/179870/1/9789241508926_eng.pdf?ua=1&ua=1). Accessed 18.01.2016. Last accessed, July, 2016
- <sup>xvii</sup> UN AIDS. 90-90-90 An ambitious treatment target to help end the AIDS epidemic. 2014.  
[http://www.unaids.org/sites/default/files/media\\_asset/90-90-90\\_en\\_0.pdf](http://www.unaids.org/sites/default/files/media_asset/90-90-90_en_0.pdf) Accessed July 2016
- <sup>xviii</sup> UN AIDS. 90-90-90 An ambitious treatment target to help end the AIDS epidemic. 2014.  
[http://www.unaids.org/sites/default/files/media\\_asset/90-90-90\\_en\\_0.pdf](http://www.unaids.org/sites/default/files/media_asset/90-90-90_en_0.pdf) Accessed July 2016
- <sup>xix</sup> NAT. HIV and Black African Communities in the UK JUNE 2014: A POLICY REPORT <http://naz.org.uk/publications/> Accessed July 2016
- <sup>xx</sup> WHO.Guidleines. HIV Testing Services, July, 2015.  
[http://apps.who.int/iris/bitstream/10665/179870/1/9789241508926\\_eng.pdf?ua=1&ua=1](http://apps.who.int/iris/bitstream/10665/179870/1/9789241508926_eng.pdf?ua=1&ua=1). Accessed 18.01.2016. Accessed July 2016
- <sup>xxi</sup> UN AIDS. 90-90-90 An ambitious treatment target to help end the AIDS epidemic. 2014.  
[http://www.unaids.org/sites/default/files/media\\_asset/90-90-90\\_en\\_0.pdf](http://www.unaids.org/sites/default/files/media_asset/90-90-90_en_0.pdf) Accessed July 2016