Division of HIV and STD Programs (DHSP)

‘Focus on HIV’
2015

Presenter:
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Learning Objectives

The learner will:

1. Identify 2 nursing roles at DHSP

2. Describe one way to locate HIV testing services in Los Angeles County

3. State 2 advantages of RTA
Ryan White CARE Act

- Enacted in 1990
- Federal government’s centerpiece for its efforts to improve the quality and availability of care for individuals and families affected by HIV/AIDS
- HRSA allocates funding to programs created by the CARE Act under various Parts (A-F)
PHN roles

Manage medical contracts: (CARE)

✓ Budgets: negotiations, mods, augmentations
✓ Lead site reviews
✓ Technical assistance
✓ Compile, analyze & interpret data
PHN roles cont.

Implement testing guidelines:

- Test site approvals & eval of testers (QA)
- Technical assistance
- Create special reports
- Write and review protocols
- Train nurses & community workers
PHN roles cont.

**Lead a team:** (Supervisory role)

- Ensure integrity of reports
- Technical assistance
- Analyze & interpret data
- Prepare & present materials to inside & other groups working with populations
- Implement special projects for populations
Ryan White* Funded Care

In LAC medically indigent** HIV+ clients not included in Healthy Way LA/Covered California may attend:

• One of 28 medical clinics (9 LAC) → 40 sites

• One of 14 oral health clinics (1 LAC)

• One of 4 specialty OB / Gyn clinics for medically indigent pregnant women with HIV

*Ryan White HIV/AIDS Program

**Medically indigent is ≤ 400% of the FPL
Locating an HIV Provider

- Use search engine: to seek ‘HIV medical care Los Angeles’
  You are looking for → hivla.org

- Click on the HIV LA website link:
  http://www.hivla.org/search.cfm

- Scroll through, then click on Prenatal Care Services to get the list of Prenatal specialty sites treating HIV+ medically indigent women
Vertical Transmission of HIV

• Pre-Antiretroviral treatment (ART) the transmission rate was: **25%**

• With Prenatal testing & timely ART the transmission rate in LAC is: **1-2%**
HIV Testing

Old school – oral specimen: (Orasure)

- Western Blot test – results in 1-2 weeks
- 31% of “Pos” don’t return for results *
- Unknown HIV+ transmit the majority of HIV **

* CDC 2000: 31% of Positives did not return for Conventional results at Publicly funded sites
** LAC HIV Epi 2009: Est 21.5% of 62,800 do not know status. (CDC estimates ~54% of transmissions are from those unknown Positives.)
HIV Terms

- Routine vs. Targeted testing
- Opt-in vs. Opt-out
- CDC recommendations
- CA law
Awareness of Serostatus Among People with HIV and Estimates of Transmission

-~25% Unaware of Infection
-~75% Aware of Infection

People Living with HIV/AIDS: 1,039,000-1,185,000

New Sexual Infections Each Year: ~32,000

Accounting for:

-~54% of New Infections

Marks, et al
AIDS 2006;20:1447-50

-~46% of New Infections

CDC
Rapid HIV Testing Algorithm (RTA)

2 test algorithm

- Test 1 → reactive
  - Conduct test 2
- Test 2 reactive → Client is HIV antibody +
  - Link to care
- Test 2 non-reactive → Inconclusive
  - Link to care for further lab-based testing

Eliminates ‘no show’ for + results greatly enhancing linkage to care
OraQuick ADVANCE HIV 1/2 Antibody Test
Clearview COMPLETE HIV 1/2
INSTI HIV-1/HIV-2 Rapid Antibody Test

Single-use rapid assay for the detection of antibodies to Human Immunodeficiency Virus Types 1 (HIV-1)

Integrated Device Testing International (INSTI) HIV-1 Antibody Test Kit

It is recommended that the test be done in a laboratory setting.

IMPORTANT USE: Not for donor screening.

The INSTI HIV Antibody Test is a single use, rapid test for the detection of antibodies to Human Immunodeficiency Virus Type 1 (HIV-1). The test is performed on whole blood, dried blood spots, plasma, or serum from individuals at high risk for HIV infection. The test is used to identify individuals who should be referred for confirmatory testing with an approved HIV antibody assay. Individuals with a positive INSTI HIV Antibody Test result should be referred for confirmatory testing with an approved HIV antibody assay. Individuals with a negative INSTI HIV Antibody Test result may be referred for counseling and testing. The INSTI HIV Antibody Test is not a substitute for consultation with healthcare providers, and all results must be interpreted in the context of the patient’s clinical history and other diagnostic findings.

The test is performed by placing the reagent on the test site, and the results are read within 15 minutes. The test is designed to be used with the INSTI HIV Antibody Test Kit and is intended for use by healthcare providers in a laboratory setting.
Uni-Gold Recombigen HIV-1/2
CLIA-Waived HIV Rapid Test Kits (Antibody only)
Run Time vs. Read Window

Time in Minutes

- OraQuick: 20 minutes
- HIV 1/2 Stat-Pak Assay: 5 minutes
- Clearview Complete: 2 minutes
- Uni-Gold: Up to 1 minute
- Insti: 45 minutes

Type of Rapid HIV Test
Rapid HIV Testing

Paradigm shift:

• Targeted HIV testing
  o Vet’s ‘Stand Down’
  o Gay Pride events
  o Bars
  o CSVs
  o Courts & Jails
  o Storefronts / MTUs
  o Health Care & other Community events

• Routine HIV testing
  o Ambulatory care
    • Urgent care
    • Community clinics
    • Health Centers
    • Women’s Health and Prenatal clinics
    • Dental Clinics
  o Hospitals
    • ED’s
    • Urgent Care
Review objectives

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2015 Dates to Remember

• National Public Health Week: April 6-12
• National Youth HIV & AIDS Awareness Day: April 10
• National Asian & Pacific Islander HIV/AIDS Awareness Day: May 19
• National HIV Testing Day June 27
• National Latino AIDS Awareness Day: October 15
• National Day of Action To End Violence Against Women with HIV: October 23
• World AIDS Day: December 1
DHSP

Website:  http://publichealth.lacounty.gov/aids

Phone: (213) 351-8000