A Primary Care Level Algorithm Increases Yield of HIV Positive Adolescents In a Community Intervention: HPTN 071 (PopART) Study, Zambia

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INTRODUCTION

The PopART for Youth (P-ART-Y) study aims to evaluate the acceptability and uptake of a community-level combination HIV prevention package, including Universal Test-and-Treat, among young people. The study is nested within the HPTN 071 (PopART) trial, a 3-arm randomized study in 21 communities in Zambia and South Africa. It's delivered through a door-to-door approach by Community HIV-care Providers (CHiPs).

METHODS

Adolescents contacted at home were offered participation in the PopART intervention. Data were recorded electronically by CHiPs during household visits. For participants aged 10-14 years, a screening tool developed and validated in clinical settings elsewhere was used to identify those at risk of being HIV infected. Screening questions were:

1. History of hospital admission
2. Recurring skin problems
3. Poor health in last 3 months
4. Death of one or both natural parents

A ‘yes’ response to 21 question was considered as an HIV infection suspect (“at risk”). We present findings from 8 Zambian communities for the period, October 2015 - August 2016.

RESULTS

Among those who did not self-report HIV+ and accept an HIV test, there is strong evidence (p<0.0001) that the odds of HIV infection were higher among those classified as “at risk”, with an estimated odds of infection 4.3 times higher (95% CI 2.8-6.8) than in the “not at risk” group.

CONCLUSIONS

The screening tool identified adolescents in the general population who were at relatively high risk of being HIV-infected. This can be exploited to allow targeted offer of HCT in resource limited settings for adolescents aged 10-14 years.

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