

HIV self-testing: feasibility and acceptability of a large scale national service

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Context

- A substantial increase in HIV testing is required to:
 - Reduce late diagnosis of HIV
 - Reduce undiagnosed HIV
 - Support a combination HIV prevention approach:
 - Early treatment for those who are positive
 - Staying negative strategies for those who are not
- There are well recognised barriers to HIV testing which may be addressed by HIV self testing
- Self-testing remains on the margins of our approach to HIV testing

Methods (1)

- We piloted a national HIV self-testing service
- A dedicated website was created and the service was promoted through social media.
- The service was offered to men who have sex with men (MSM) and Black Africans
- Participants provided demographic information, contact details and answers to HIV risk assessment questions.
- An HIV self-testing kit was then posted to them.

HIV self testing kit

- Biosure HIV self-testing kit (licensed in April 2015)
- Finger-prick 2nd generation blood test (2.5µl)
- Detects HIV-1 and HIV-2
- Result read in 15 minutes
- 99.7% sensitive
- 99.9% specific
- Reactive result needs confirmatory blood testing



Methods (1)

- Service users were asked to log onto a secure page on the website to inform us of their result.
- Text reminders were sent at days 7 and 10.
- Those who reported a reactive result was called for support or advice and to ensure access to care for confirmatory testing.
- An online satisfaction survey was sent to everyone who gave consent to be contacted.

Results

- The pilot ran from 24th June - 5th Aug 2016.
- 4,975 kits were ordered.
- 3,021 people (62%) informed us of their result.
- 4,865 (97.8%) orders were from men and 4,820 (99%) identified as MSM.
- 3,780 (76%) tests were ordered from people of white British ethnicity
- 168 (3.4%) identified as Black African.
- 4,458 (91.4%) of kits were ordered from urban settings.

Test orders

Order source	Orders	Results (%)	Mean age	Reactive results
Grindr	1697 (34.1%)	1057 (62.2%)	32	12
Facebook	1685 (33.9%)	1009 (59.9%)	32	8
Organic	1216 (24.4%)	677 (55.7%)	28	4
THT website	358 (7.2%)	218 (60.1%)	31	4
Other	19 (0.4%)	12 (63.2%)	35	0

- 85% accessed the service via their mobile
- 10% via desktop
- 4% via tablets

Results reporting

Results reported by number of days after order



Results: risk assessment

- 19% had never had an HIV test before
- 37% had last tested >1 year ago.
- 81% reported 2 or more partners in the last year.
- 68% reported condomless anal sex in the previous 3 months with 28% reporting this with 2 or more partners.
- 47% reported “sometimes” having sex under influence of drink or drugs and 14% said this occurred “most of the time” or “always”

Reported test results

Gender / sexuality	Orders	Results reported (%)	Reactive results
Men who have sex with men (MSM)	4820	2896 (60.1)	28
Heterosexual women	82	43 (52.4%)	0
Heterosexual men	45	19 (42.2%)	0
Trans women	12	6 (50%)	0
Trans men	6	0	0
Women who have sex with women (WSW)	6	4 (66.7%)	0
Bisexual women	4	2 (50%)	0

Reactive results

- 28 people (0.92%) reported a reactive result.
- 3 (10.7%) people already knew they were HIV positive
- One result was confirmed as a false positive.
- Of the remaining 24 all were MSM.
- Contact was made with 22 (92%) all of whom had accessed confirmatory testing and HIV services.

User Satisfaction Survey

N = 602 (12.1%)

Reported their result	524 (87%)	
Why did you choose an HIV self-test?	I wanted an immediate result	379 (64.0%)
	Clinic opening times are inconvenient	219 (36.9%)
	I did not want an STI test in person	210 (35.5%)
I would use the service again	585 (98.0%)	
I would recommend to a friend I expected to test negative	582 (97.3%)	
I would recommend to a friend I expected to test positive	435 (72.7%)	
I would be willing to pay for the service	340 (56.9%)	

Summary

- We have demonstrated both the feasibility and acceptability of HIV self-testing in a large scale pilot
- We successfully targeted a group of high risk MSM who were not testing regularly (or at all)
- HIV self testing offers an efficient and potentially cost effective addition to existing HIV testing strategies
- We need to better understand self-testing in non-MSM and which models of delivery are most cost-effective

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www.hivst.org