

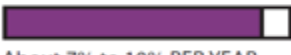


## Testing for HIV/TB Coinfection

### BACKGROUND

Human immunodeficiency virus (HIV) infection is the most important known risk factor for progression from latent tuberculosis infection (LTBI) to TB disease. Individuals who test positive for LTBI and HIV infection, and remain untreated for both conditions, have a 7 to 10 percent chance **per year** of progressing from LTBI to TB disease. As illustrated below, that is significantly higher than the lifetime risk of progression of about 10% for persons with untreated LTBI and no other risk factors.

**Risk of Developing TB Disease**

Risk Factor	Risk of Developing TB	Description
TB infection and no risk factors	 About 10% over a lifetime	For people with TB infection, <b>no risk factors</b> , and no treatment, the risk is about 5% in the first 2 years after infection and about 10% over a lifetime.
TB infection and diabetes	 About 30% over a lifetime	For people with TB infection and <b>diabetes</b> , and with no treatment, the risk is three times as high, or about 30% over a lifetime.
TB infection and HIV infection	 About 7% to 10% PER YEAR	For people with TB infection and <b>untreated HIV infection</b> and with no LTBI treatment, the risk is about 7% to 10% PER YEAR, a very high risk over a lifetime.

Visual: CDC Core Curriculum on Tuberculosis, Chap. 2, Figure 2.5

In individuals who have TB disease and are HIV positive, each condition makes the other worse. The Centers for Disease Control and Prevention (CDC) considers a diagnosis of TB disease for someone who is HIV positive as evidence that he or she now has advanced to the third stage of HIV infection known as acquired immunodeficiency syndrome (AIDS)<sup>1</sup>.

Today, of the people with TB disease who know their HIV status, about 5% are living with HIV.

### THIRD PARTY GUIDELINES

In 2006, the CDC issued new recommendations for HIV testing<sup>2</sup> designed to increase the early diagnosis of HIV infection by recommending that HIV screening be a routine part of medical care. The recommendations included the following:

<sup>1</sup> Source <https://www.cdc.gov/hiv/library/factsheets/coinfections/index.html#HIV-and-TB>

<sup>2</sup> Source <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>

- In all health-care settings, screening for HIV infection should be performed routinely for all patients aged 13--64 years.
- All patients initiating treatment for TB should be screened routinely for HIV infection.
- HIV screening should be voluntary and undertaken only with the patient's knowledge and understanding that HIV testing is planned.
- Patients should be informed orally or in writing that HIV testing will be performed unless they decline (opt-out screening).

Concerning HIV testing in TB clinics, the CDC recommends the following:

- All patients in TB clinics should be tested for HIV, including patients with TB disease or LTBI; persons suspected of having TB because they exhibit the signs and symptoms of TB; and persons identified as contacts to a case of infectious TB disease<sup>3</sup>.
- All people newly diagnosed with HIV infection should be tested for TB as soon as possible, even if they have no signs or symptoms of TB disease. People living with HIV and at ongoing risk for TB exposure should be tested annually. The risk for exposure to TB is the same for everyone – being in contact with someone who has an infectious case of TB disease<sup>4</sup>.

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## PENNSYLVANIA STATE LAW

The state laws governing issues of HIV testing, consent, confidentiality, and counseling are:

- The Confidentiality of HIV-Related Information Act of Nov. 29, 1990, P.L. 585, No. 148, as amended by
- The Confidentiality of HIV-Related Information Act – Legislative Intent, Consent to HIV-Related Tests and Counseling Act of Jul. 7, 2011, P.L. 274, No. 59

The full text of Act 148 as amended by Act 59 can be found at

<https://www.legis.state.pa.us/cfdocs/legis/li/uconsCheck.cfm?yr=1990&sessInd=0&act=148>.

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## OFFERING THE HIV TEST

Consistent with the CDC's 2006 guidelines and the Act 59 Amendment, health care providers in Pennsylvania are expected to provide routine, opt-out HIV testing to their patients.

*How* the provider offers the test makes a significant difference in patient acceptance. Here are some tips for framing the message:

- Normalize it! Introduce the HIV test as you would any other blood test.
- Emphasize that the HIV test is considered routine for everyone and is not being recommended due to a perceived risk or suspicion of disease.

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<sup>3</sup> <https://www.cdc.gov/tb/publications/factsheets/testing/HIVscreening.pdf>

<sup>4</sup> <https://www.cdc.gov/hiv/library/factsheets/hiv-and-tb.html>

- Explain to patients diagnosed with or being treated for TB that it's especially important to know their HIV status since it can affect their prognosis and treatment plan.

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## HIV TESTING PROCEDURES

### County and Municipal Health Departments

County and municipal health departments (CMHDs) must comply with the provisions for HIV testing specified in the current contracts with the Pennsylvania HIV and Tuberculosis programs.

CMHDs and state health centers are advised to follow applicable laws, regulations and local procedures concerning HIV testing.

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## TRAUMA-INFORMED CARE

Despite significant advances in HIV treatment, a positive HIV test result remains a life-altering diagnosis for most patients. Also, many individuals have endured one or more forms of trauma, including a history of – or being witness to – physical or sexual abuse; being part of a minority or marginalized group; social stigma; food and housing instability; addiction; depression or other mental health issues.

Health care providers are encouraged to follow the principles of trauma-informed care (as described in the following chart) when informing patients that they are HIV positive or have progressed to AIDS.



*Chart by the Institute on Trauma and Trauma-Informed Care (2015)*

Downloaded on December 28, 2018 from <http://socialwork.buffalo.edu/social-research/institutes-centers/institute-on-trauma-and-trauma-informed-care/what-is-trauma-informed-care.html>