



Increase of integrated testing for HIV, HCV, and syphilis in community-based testing services: COBATEST network, 2014-2024

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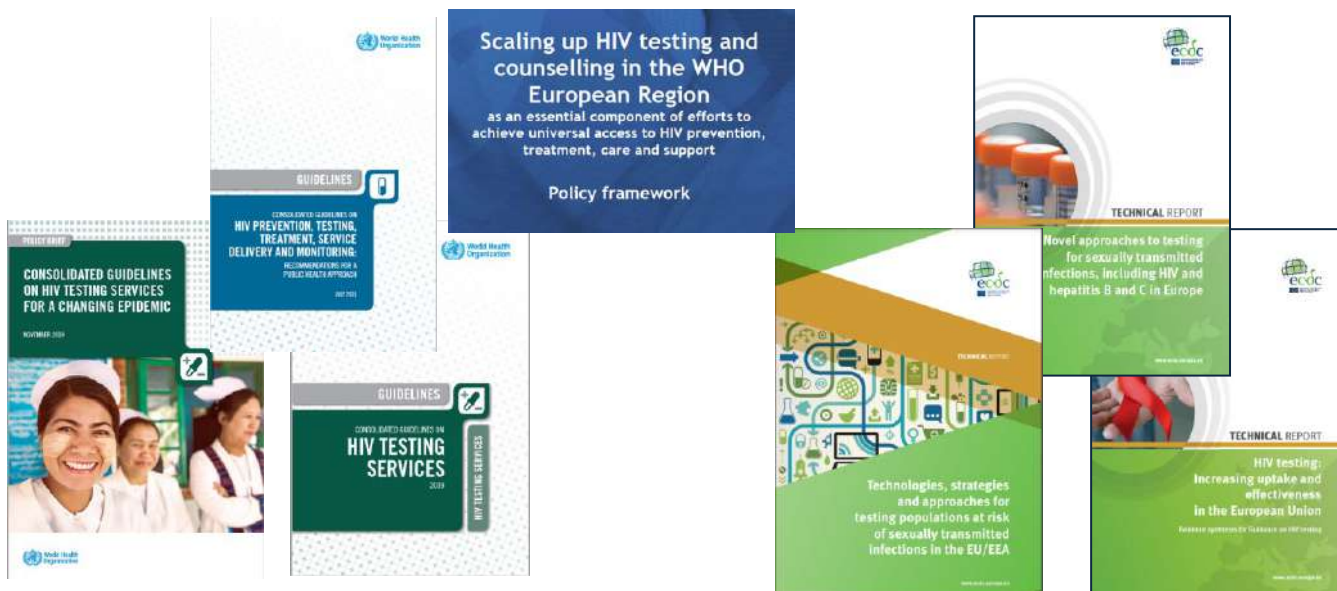
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Introduction

Strategies for HIV testing outside the formal health-care services

- Recommendation to increase HIV tests offer, through new approaches and strategies, including tests in the community setting
- Effectiveness of screening strategies in the community setting



Introduction

Integrated testing

Why test for multiple infections at once?

- HIV/STIs/VH share common modes of transmission and determinants
- Overlap of populations affected
- High co-infection rates between HIV, syphilis, and viral hepatitis.
- Improves efficiency and client experience.
- Reduces stigma by normalizing testing.

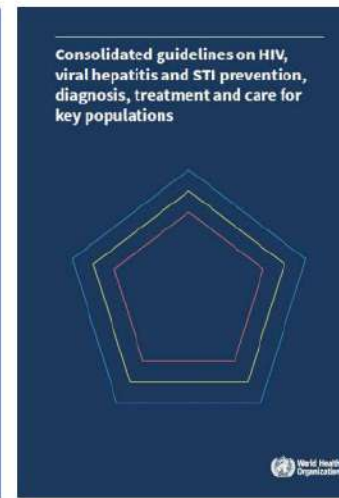
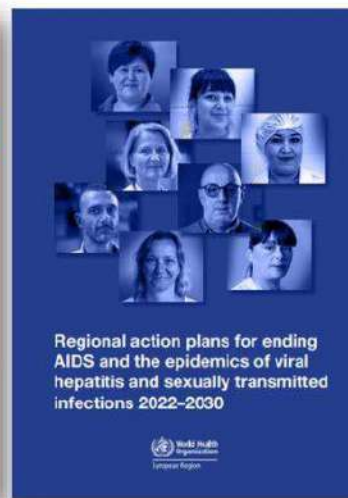
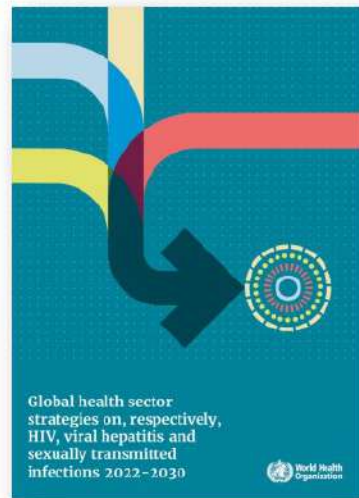
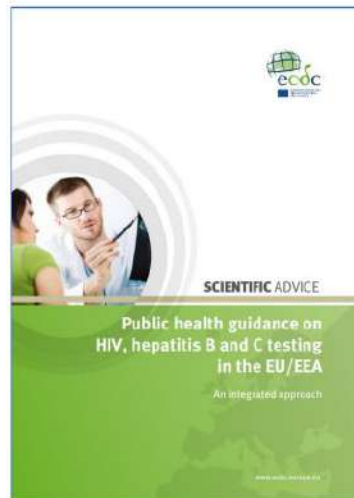


Integrated testing should be the standard in community settings

Introduction

Integrated testing

- WHO and ECDC advocate for integrated testing for HIV/VH/STIs to improve coverage, reduce missed diagnoses, and accelerate linkage to care.
- According to risk criteria
- Integrated testing for HIV, VH, and STIs allows for synergy in times of limited resources



Objective



Objective

- Evaluate the evolution of integrated testing for more than one infection in community-based voluntary counselling and testing (CBVCT) services that are members of the COBATEST Network from 2014 to 2024.

Methods

Data reported by:

- 103 CBVCT centers from 17 European countries
- members of COBATEST Network
- Who used the online data collection tool in any year from 2014 to 2024

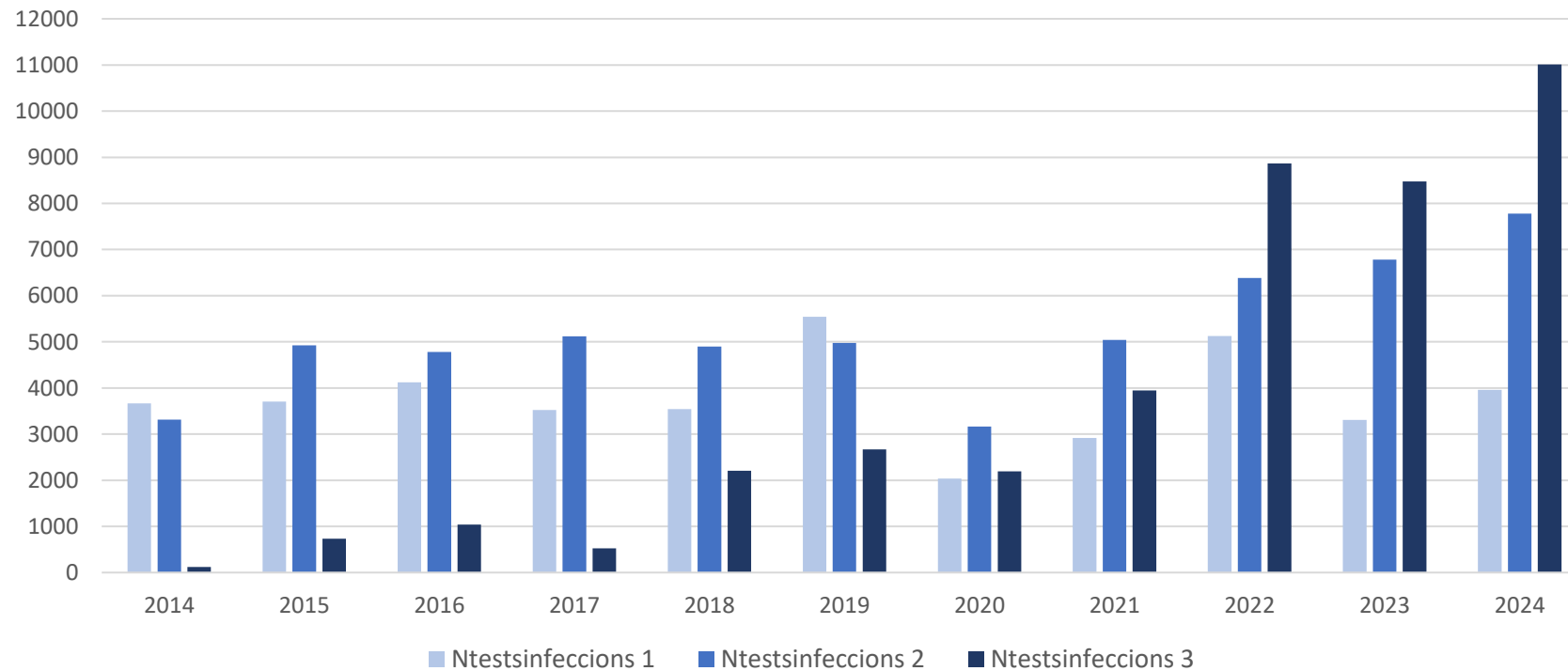
Descriptive analysis:

- Evolution of the performance of more than one test for different infections during each testing visit/session
- Prevalence of coinfections
- Combination of performed tests and reactive results per testing session (Venn diagrams)



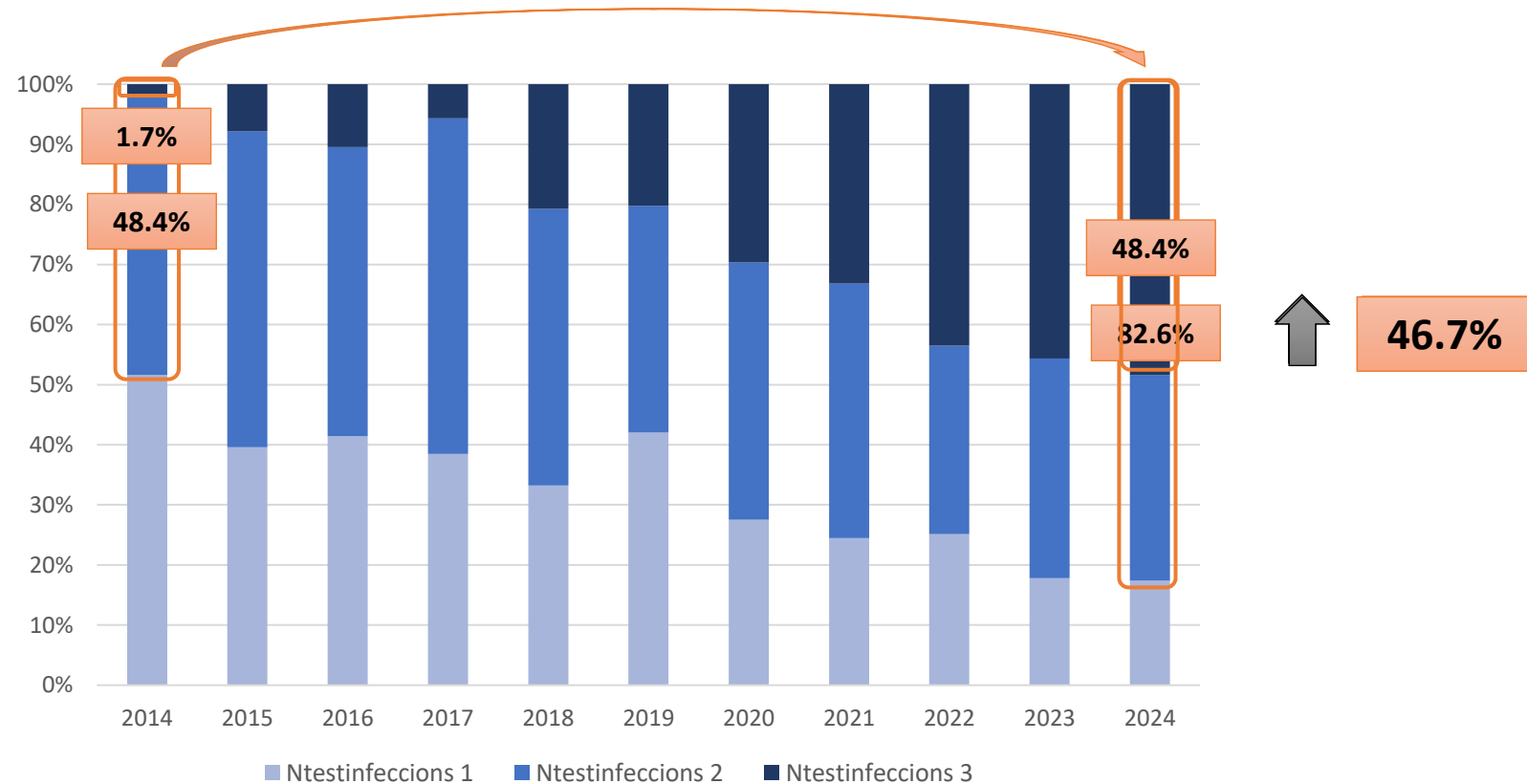
Results

Evolution of number of different tests performed per testing visit



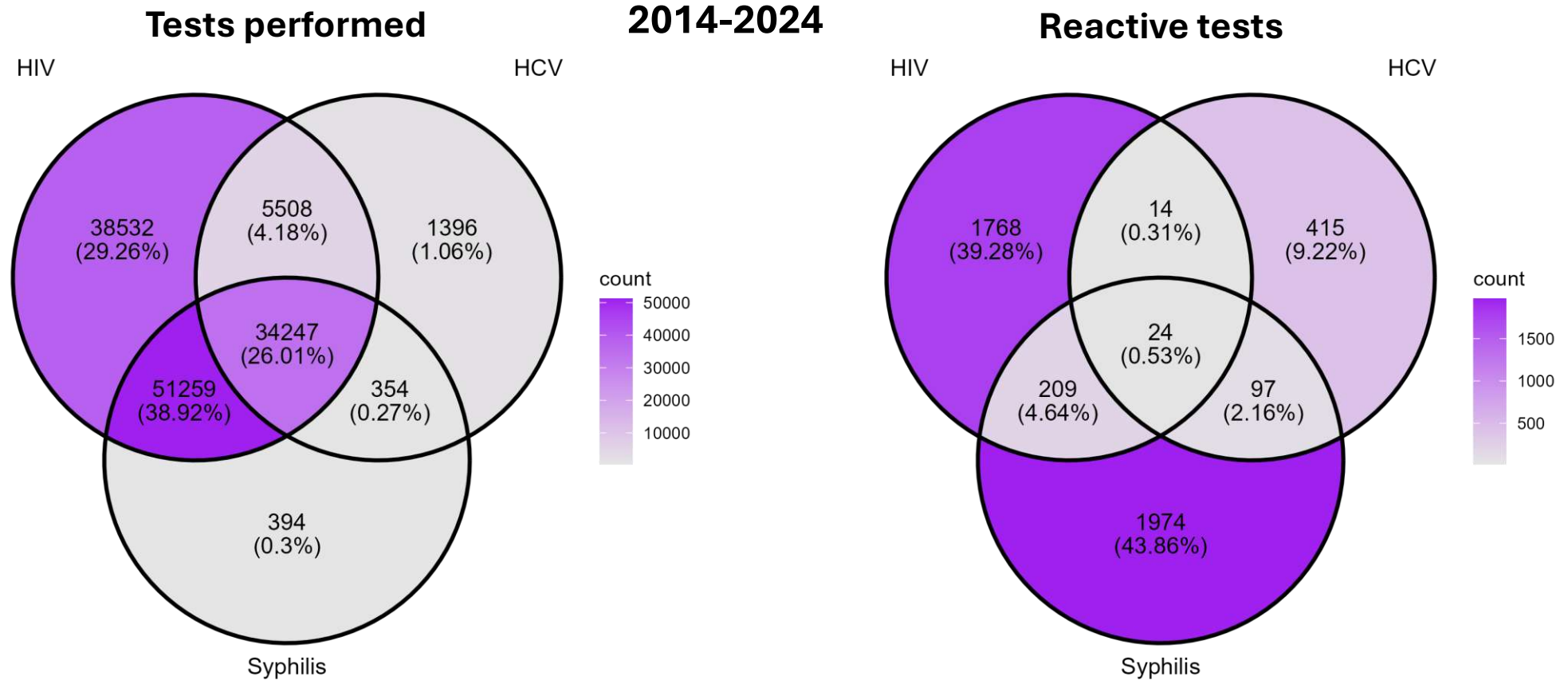
Results

Evolution of number of test performed per testing visit



Results

Combination of performed tests and reactive results per testing session



Results

Co-infection prevalence

2014-2024

Co-infections (Prevalence of reactive results in a single visit/testing session)

- **HIV-Syphilis:** 1.85%
- **HIV-HCV:** 0.00%
- **HCV-Syphilis:** 0.56%
- **HIV-HCV-Syphilis:** 0.19%

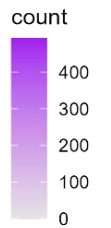
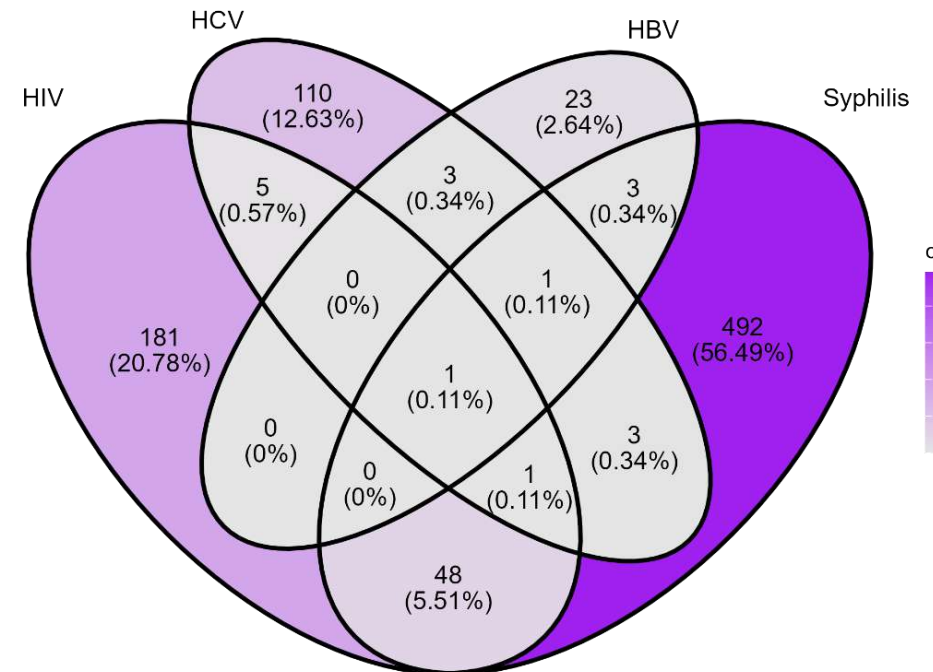
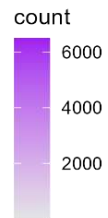
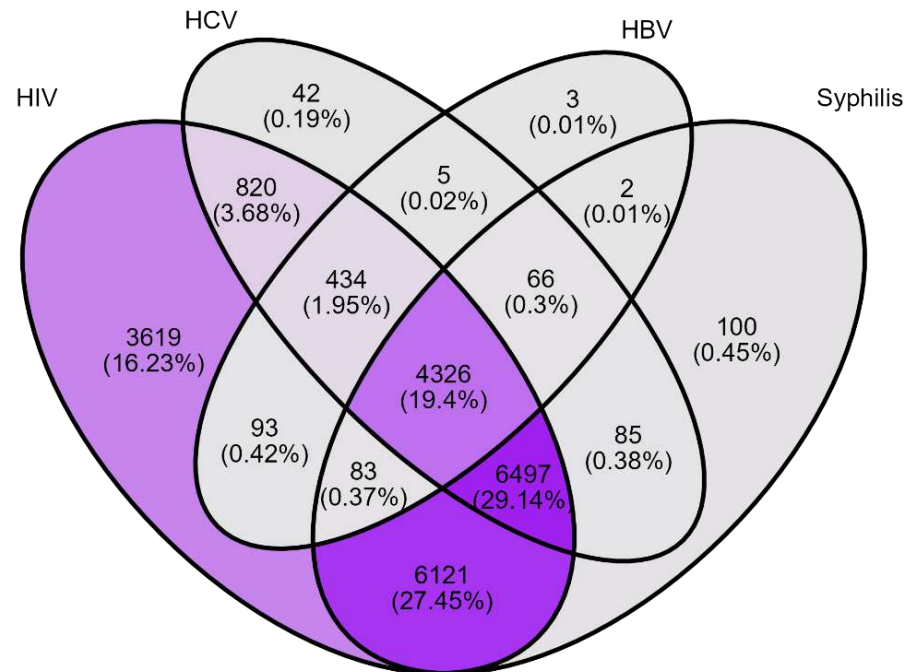
Results

Combination of tests performed and reactive results per testing session

Tests performed

2024

Reactive tests



Conclusions

- Following international recommendations, CBVCT services are increasingly conducting integrated testing, primarily for HIV and syphilis, and in recent years, they have also been incorporating HCV.
- It is also important to include testing for other infections, such as HBV, chlamydia, and gonorrhea.
- COBATEST Network has adapted its data collection tool to include these additional tests.



**It's important to reinforce integrated testing strategies
The provision of integrated testing should be based on risk criteria.**

Thank you!



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People illustrations by Storyset