

National HIV Testing Day 2007 Webinar for Bloggers

[Announcer] This podcast is presented by the Centers for Disease Control and Prevention. CDC – safer, healthier people.

[Kathryn Hambleton] Welcome to our first National HIV Testing Day webinar, sponsored by AIDS.gov. I'm Kathryn Hambleton with the U.S. Department of Health and Human Services. We are excited to have each of you on the webinar as we discuss HIV testing. The goals of this webinar are to:

- 1) Promote routine HIV testing in healthcare setting,
- 2) Link readers of blogs to places they can get an HIV in their community, and
- 3) Talk about June 27, National HIV Testing Day with the blogging community.

We are reaching out to bloggers because we recognize the power you have to reach a broad audience with HIV prevention, testing, and treatment messages. In this 26th year of the HIV epidemic we are committed to exploring new and emerging technologies. You are the leaders in the newest wave of communications technologies, and we are very excited to be working with you. Today, we will hear from Dr. John Agwunobi, the Assistant Secretary for Health with the U.S. Department of Health and Human Services, the principal medical adviser to the secretary; and Dr. Kevin Fenton, the leading voice on AIDS at the CDC. And, we also have two doctors familiar with HIV testing joining us: Dr. Eileen Couture in Oak Forest, Illinois and Dr. Jeremy Brown in Washington D.C. There will be two opportunities for our speakers to answer your questions. Please enter your questions into the question box on your screen and they will be sent to us. Dr. Agwunobi, thank you for joining us today. Before we talk about HIV testing, could you tell us your role here at HHS/AIDS is a priority in the U.S?

[Dr. John Agwunobi] Thank you, very much Kathryn. On behalf of the Department of Health and Human Services I'd like to welcome everyone to today's important discussion. As the Assistant Secretary for Health, I serve as the primary adviser to the Secretary on matters involving the nation's public health. As we prepare to recognize National HIV Testing Day on June 27th, we would like to better understand how HIV testing is a critical step in reducing HIV infections in the United States. More than 1 million Americans are estimated to be living with HIV. One quarter of those with HIV aren't aware of their infection. Those infected, may be unknowingly transmitting the virus to their partners. It is estimated that a majority of new infections are likely transmitted by individuals who are completely unaware of the infection they may possess. We have to change this! We need to decrease the number of new infections, ensure a HIV testing becomes a routine part of medical visits, and link individuals who are HIV infected to care. Studies show that once people learn they are HIV infected, most take steps to protect their partners. Testing is the essential first step in linking people with HIV to medical care. And ongoing support. To help them maintain safe behavior's and reduce transmission of disease.

[Kathryn Hambleton] Participants on today's call may have different levels of understanding of the HIV epidemic in the U.S.; it may seem obvious, but why are those numbers so alarming, Dr. Fenton?

[Dr. Kevin Fenton] Thank you. The reality is that HIV remains a major threat to the nation's health. In the United States, tens of thousands of new HIV infections occur every year. In particular, HIV exacts a devastating toll on African Americans who represent nearly half of all of those living with HIV. African Americans also accounted for nearly half of the new HIV diagnosis in 2005, despite the fact they only account for about 13 percent of the population in the 33 states that have routine HIV reporting. Both African American men and women have high HIV diagnoses rates that are much higher than those of other races and other ethnicities. Black men who have sex with men or MSM are especially hard hit. Nearly half were infected in a five-city study undertaken by the CDC. The Latino community is disproportionately affected by HIV in the United States. Hispanics represent 70 percent of those living with HIV, yet they accounted for nearly 20 percent of new HIV diagnosis. Yet they make up only 13 percent of the population. Now while race and ethnicity are not only factors in themselves which affect the spread of HIV, the realities of the lives of African Americans and Latinos may mean that they have greater vulnerabilities to HIV. Poverty, a drug use, stigma and high rates of sexually transmitted diseases may put these populations and communities at higher risk. Limited access to health care in general, and HIV testing and treatment in particular are challenges for these populations.

[Kathryn Hambleton] Last summer, Dr. Fenton, your agency, the CDC, issued revised recommendations for HIV testing. These recommendations were so important, Dr. Agwunobi, you often speak of their importance and the White House strongly supported this action. Can you explain to our participants the key elements of the recommendations?

[Dr. John Agwunobi] These are absolutely critical recommendations, as you said, and they are strongly supported by the highest levels of our government. These recommendations that the CDC developed in partnership with local, state and national public health leaders tell us a few key things; first, CDC now recommends that all Americans between the ages of 13 to 64, be tested for HIV as a routine part of their medical care. And that testing be done on an opt-out basis so that people who would be routinely tested, unless they explicitly declared that they did not want the test. Two, the CDC recommends people at high risk for HIV be tested at least once a year and more often if their risk factors indicate a need. High risk individuals are those who A) have shared injection drug needles or syringes, B) have had sex without a condom with a HIV positive partner. C) have had a sexually transmitted disease like Chlamydia or gonorrhea. D) had a blood transfusion or received a blood-clotting factor between 1978 and 1985, or E) have had sex with someone who has done any of those things I just mentioned. The third thing that is recommended, is that all pregnant women be tested for HIV. And that women in areas with high rates of HIV be retested in the third trimester.

[Kathryn Hambleton] Thank you. Dr. Fenton, what would you like bloggers to know about the recommendations?

[Dr. Kevin Fenton] Thank you very much Dr. Agwunobi for aligning the key elements of the recommendations. Last year CDC recommended that voluntary HIV testing become a standard part of medical care for every person aged 13 to 64 regardless of risk. Our goal was to ensure that everyone in the U.S. have life-saving information on whether they are infected with HIV or not. Our recommendation includes routine testing in emergency rooms, where many Americans with undiagnosed HIV go to receive their care. In those facilities, rapid HIV testing is a powerful tool for reaching people who do not often have access to medical care. The rapid tests provide preliminary results in as little as 20 minutes. Along with emergency departments, the tests can easily be used in settings where people at risk for HIV live, work or gather together. This includes community centers and outreach programs. These tests help to ensure that people who get tested will actually learn their results. National HIV Testing Day is a valuable opportunity to remind Americans to seek out HIV testing. Learn if their HIV positive, and take steps to protect their health. Organized annually by the National Association of People with AIDS or NAPWA, HIV testing day is supported by CDC. The theme of the campaign is "take the test, take control". It highlights the need for people at risk to learn if they are infected with HIV so they can stay healthy and protect their partners. Support for the campaign is part of CDC's efforts to expand HIV testing so people can learn if they are infected with HIV. Every year on June 27th, CDC and NAPWA partner with local communities to reach out to populations at highest risk.

[Kathryn Hambleton] Thank you. Our federal officials stated how important HIV testing is. We will now hear from two doctors, Dr. Eileen Couture from Oak Forest Hospital of Cook County Illinois and Dr. Jeremy Brown at George Washington University Medical Center in Washington D.C. who will share their experiences promoting HIV testing in their health-care settings. Dr. Brown, please describe were you work?

[Dr. Jeremy Brown] I work at an emergency department at the George Washington University Hospital just down the road from the White House. We are an academic Emergency center serving the citizens of Washington D.C. together with those who visit through our nation's capital and we see about 60,000 patients a year and we have instituted routine op-out HIV testing in the emergency department. This means that if you were to come to our emergency department with a sprained ankle and you are between the ages of 13 and 64 and not known to be previously HIV positive, as part of your care while we are taking care of your ankle, we would offer you a HIV test. The test is an old test as our colleagues have just described, it's a swab that goes across the mouth. It takes about ten seconds to do. Completely painless; its like brushing your teeth. And the results are back in 20 minutes. We have been able to test almost 4,000 patients since we started this program back in September of 2006. We found a significant number of patients who did not know they were HIV positive and link all of them to care it's been a wonderful program and has given patients an opportunity to learn their HIV infection or risk. Even for patients who are HIV-negative just learning they are HIV negative and talking about it to friends and family are a very important

thing. Patients like it, the physicians like it and it has been a wonderful step forward against the Battle of HIV in the United States.

[Kathryn Hambleton] Thank you, doctor. Why is HIV testing so important to your work?

[Dr. Jeremy Brown] We have taken this on board really because we believe that the populations that we serve are at high risk of HIV infection. We were only able to offer this high level of testing because of a very wonderful program by the D.C. Department of Health where they have provided us with the test kit free of charge so we can test our patients free of charge. The truth of the matters is that vast majority of patients who are HIV positive and don't know about it would very often not get tested were we not to offer the test to them. I'm not talking only of patients without health insurance. As many of you know, even with health insurance it is very difficult to get in to see a doctor. We provide care for many Americans is simply can't get in to see their doctor and come to the emergency department and that is an opportunity to reach out to them. This isn't the career work that the emergency department started. It is not something we were used to doing but something we believe in because we have seen how it does reach out to people and find people who are HIV positive. And since we are finding these people and informing them is of a significant step forward.

[Kathryn Hambleton] Thank you. Now let me ask Dr. Couture a question. Your emergency department tested over 600 people in the last year, would you tell us why HIV is so important?

[Dr. Eileen Couture] Thank you. Many people in this community generally don't seek regular health care. And do present to this emergency department which is located in southern Cook County. It is a suburb of Chicago. It is only a standby emergency department. Our volume is probably much less than Washington, our volume is only 30,000. We have incorporated HIV testing in our emergency department since 2002 and have had significant results on an annual basis we find anywhere between 20 and 30 patients who are positive. Unfortunately, they are in the later stages of the HIV disease, which is unfortunate. It certainly represents the population who is not getting access to health care, whether it is for signs and symptoms or general testing. Today, we have incorporated HIV testing into our emergency department. I have to tell you, it is considered a HIV emergency department in the community. People come in and request the test, we offer the test. The greatest thing is we can link them to care. Some have joined hands with some of our community partners and getting an appointment to follow-up has not been a problem. We will continue to support all efforts to continue to do HIV testing in our emergency department.

[Kathryn Hambleton] Thank you, Dr. Couture and Dr. Brown for your comments. Now, we will take questions from our bloggers. Dr. Fenton, can we begin to make testing more accessible to today's youth including high schools?

[Dr. Kevin Fenton] Thank you very much for that question. The objective really is to enable HIV testing to become far more available to Americans age 13 to 64 years, and

there are many innovative programs being implemented across the country. We work with a number of Community partners to enable us to really penetrate into communities including schools, and outreach centers, community centers to raise awareness about HIV and to ensure those young people who are at risk can avail themselves of HIV testing. This is indeed very important strategy of our community partners as well as our health care providers and insuring that younger individuals, whether in high-school Or University settings are able to access HIV testing.

[Kathryn Hambleton] Thank you. The next question is will there be a transcript of the webinar? The answer is yes, there will be a transcript available on AIDS.gov shortly after the webinar. And we will be able to send out an email directing you there. Next question is for Dr. Brown. How do you manage the additional time demands with limited staff?

[Dr. Jeremy Brown] This is a question that is one of the key problems of providing HIV testing. Anybody who comes to the emergency department knows the wait is long, and the concern is offering routine HIV testing will link send the patient stay in the emergency department. There are a number of ways we can approach it. The first is to simply have extra dedicated staff to do this. The problem with that, is it currently is very difficult for hospitals to be reimbursed for their work during HIV testing. So until there is a reimbursement method for those with health insurance it simply won't be possible to get the staff to do the testing. It's sort of a chicken and egg situation we can test more people quickly if we have the staff but we can only have the staff once the test is paid for. I would encourage the online community to really bring this up to their Congressmen and Senators and make sure they understand how this thing can work and needs to be reimbursed. If we were able to have the HIV test paid for we would be able to solve this problem. Specifically, and our emergency department, we have taken extra staff, staff that work under my supervision. Staff whose primary job in the emergency department is to do research, but we have felt since this is such an important program, we have basically redirected them from research into the clinical program which is not a research program at all. We have found that retraining these staff has been very easy, and they have met with remarkable success. We started the program not even a year ago and have screened about 3800 patients so far. Patients really enjoy the program. We currently are trying to look at our link of state. I see no evidence yet it has increased our lead of state, but I don't want to underestimate it. It is a real challenge for emergency departments would like to take this on board. We have to work together to find a way to make it happen and the best place to bring in new staff and find reimbursement mechanism is to provide for them.

[Kathryn Hambleton] Thank you, Doctor Brown. Thank you to our bloggers. Now, let's turn back to our speakers.

[Dr. John Agwunobi] Kathryn, before you ask your next question, I want to note that the First Lady earlier this week was talking about HIV testing in medical settings. She noted that Howard University Hospital has been able to routinize HIV testing. She emphasized how important it is for everyone to have a HIV test as part of their regular

medical exam. If you know that you are HIV positive, you can change your behavior so you don't infect your loved ones. If you know your HIV positive, you can seek treatment.

[Kathryn Hambleton] Thank you for that, Dr. Agwunobi. Dr. Fenton, we want our bloggers to link their readers to locations where they can get a HIV test. How did they do that?

[Dr. Kevin Fenton] It's very simple process. There's a web site, hivtest.org, which is one of our most important tools. Visitors to hivtest.org can find a HIV testing site close to their ZIP code and it is very easy to use..

[Kathryn Hambleton] Do you have a graphic image, a logo that bloggers can use to link to hivtest.org?

[Dr. Kevin Fenton] Yes, we have a variety of web tools available to bloggers, on our newly developed hivtest.org web site.

[Kathryn Hambleton] The CDC has a website to answer basic questions about HIV testing. Can you tell us more about that?

[Dr. Kevin Fenton] Yes. CDC has just launched the redesigned hivtest.org website. The website has new features including updated sections on what you need to know about HIV, did you know, and frequently asked questions, different sections on that website. The web site also contains simplified HIV testing location search including the option of a mapping locations from the search results page. And also, the Web site contains easily accessible National HIV Testing Day campaign information. A Spanish version of the website is also available.

[Kathryn Hambleton] Why do people avoid being tested for HIV? The stigma still associated with HIV 26 years into the epidemic is real and has an impact on HIV prevention efforts. Can you talk about this issue?

[Dr. Kevin Fenton] Yes, for people with limited economic resources concerns about their health may not be as high on their list of priorities compared to having other basic needs met. They often have to deal with a multitude of competing priorities every day. Getting information about HIV/AIDS and information about access to prevention services and testing may not be a pressing priority. Stigma surrounding HIV/AIDS also can affect health seeking behavior such as HIV testing as well as a person's willingness to disclose if they are infected with HIV to their partners, family members, friends and colleagues.

[Kathryn Hambleton] Dr. Agwunobi, you are the director of the Florida Department of health. In that role, how did you address the issue of stigma?

[Dr. John Agwunobi] To add to what Dr. Fenton has said, we often use HIV Testing Day events to open up conversations about HIV/AIDS and HIV testing. We need to

increase the public to talk about HIV and AIDS and testing. Stigma related to HIV/AIDS appears to be more severe than that associated with other life-threatening conditions. This has been the case from the very beginning. It can also extend beyond the disease itself to providers and even volunteers involved in the care of people living with HIV disease.

[Kathryn Hambleton] Next week is the 15th annual National HIV Testing Day June 27th. The observance was createdby the National Association of People with AIDS. In order to encourage HIV testing and early diagnosis. Dr. Agwunobi, why is the National HIV Testing Day so important?

[Dr. John Agwunobi] Since we do not have a vaccine or cure HIV today, we need to encourage HIV testing as the best way to stop the spread of the epidemic. As I mentioned, National HIV testing Day gives us an opportunity to encourage everyone who is at risk for HIV infection to take the test and to take control of their lives and their health. For example, the National Association of people with AIDS is working with numerous community leaders and many civic and public health leaders including more than 20 mayors and two governors to take the test publicly.

[Kathryn Hambleton] Thank you. Now, we will again respond to questions from the bloggers participating today. Dr. Fenton, this question is for you. How to manage privacy concerns?

[Dr. Kevin Fenton] That is a very good question. Privacy concerns are extremely important to us at CDC as we move forward with routinizing HIV testing and the recommendations make it quite clear that all governmental guidelines and recommendations on maintaining privacy should be maintained as we move forward with routinizing HIV testing. What CDC is aiming to do with the recommendations is to ensure that the process for HIV testing is minimized and streamlined in health-care settings. But CDC underscores and emphasizes the importance of ensuring that all privacy concerns are taken into consideration and that this testing is done with the patient's consent. Finally that all patients should be informed about HIV testing being done in health care settings. So thank you for that question. It is a concern for us and CDC is actively working with providers across the country to ensure that all guidelines related to privacy are taken into consideration.

[Kathryn Hambleton] And Dr. Fenton, this is the next question from one of our bloggers. I work in the south and with parents and kids in faith settings. How do I break the stigma with those who want to talk about sex?

[Dr. Kevin Fenton] Thank you for that question. It is a very good question. Faith communities and faith leaders play a very important role in our fight against HIV, particularly in the south and particularly with African American communities who as you've heard today bear a disproportionate burden of the disease. Faith communities have a number of contributions to our fights against HIV and these include providing information to their flock or members on a HIV infection to promote HIV testing to

members of their church, to providing treatment and care for access to treatment and care for those living with HIV. CDC believes that true and authentic conversations on HIV from faith leaders and from a faith community's needs to be a part of our HIV prevention efforts and there it is vitally important that all members of the community, including the faith community will it stand up to the plate as far as a HIV prevention is concerned.

[Kathryn Hambleton] Thank you. Dr. Agwunobi, this next question is for you. How do we work in rural communities?

[Dr. John Agwunobi] Well, I think it's critically important that as we reach out to the health-provider community that we recognized that in rural communities, these providers are usually quite stretch and far flung. It is important that we address their unique issues by reaching out to their leaders and to local and public health officials, to involve a broad swath of the rural communities. The single-family Doctor working out of the basement of his home in a rural community might be the only source of care that an individual sees for numbers of years. It's important that we not think that the HIV/AIDS epidemic is only restricted to the cities. We are beginning to see it in all aspects of our lives in every community across our nation. And so I urge all of us to take the extra steps that it takes in order to include rural health providers in our efforts to expand HIV testing.

[Kathryn Hambleton] Thank you. Dr. Fenton, this one is for you. What types of HIV tests are available?

[Dr. Kevin Fenton] There are a number of HIV tests on the market presently. As we mentioned at the beginning of this conversation, one of the exciting developments in technologies we have for HIV testing is rapid HIV test and currently there are a number of products on the market. We have rapid test which can be done on serum or blood and rapid test which can be done using oral fluid. These tests are fantastic in being able to provide accurate diagnoses on HIV status within 20 to 40 minutes. But if individuals choose not to have a rapid HIV test, they can also be tested using traditional methods for HIV testing and these are of course available in a number of settings and sites across the country.

[Kathryn Hambleton] Thank you. I believe – Ok, Dr. Fenton, I have another question for you. Should testing be done in concert with discussions of safer sex practices?

[Dr. Kevin Fenton]Absolutely. And I can't underscore the importance of keeping the discussions about safer sex practices with HIV testing. The reality is HIV testing provides an opportunity for honest and open dialogue between the provider and the patient about risk. It provides an opportunity to talk about sexual health as well. So, whether an individual tests HIV positive or HIV negative, it really is important that that conversation about protecting one's self or one's partners is part of that experience as well, and that is why CDC encourages counseling -- prevention counseling to be done especially for those individuals who are at high risk of acquiring HIV infection or for

those individuals who test HIV positive. And especially at treatment centers for example, and STD clinics, we recommend that prevention counseling, talking about sexual health, talking about opportunities for limiting access or acquisition of HIV is done for all individuals.

[Kathryn Hambleton] And, Dr. Fenton, are there over the counter HIV tests?

[Dr. Kevin Fenton] This is increasingly being available and there are a number of over the counter tests that are on the market and tests available via the Internet, etc. But CDC recommends that if individuals are interested in having a HIV test, this is best done in concert with their provider. That way, they have an opportunity to talk with their provider, to question them about the HIV testing process. The implications of a HIV positive diagnosis, as well as offering and receiving advice on safe sex practice. We do encourage individuals or persons to really do the HIV testing with their providers.

[Kathryn Hambleton] Okay. Do we have time for any additional questions? Dr. Fenton, how do you reach individuals whose sexual behavior is a barrier to getting a test?

[Dr. Kevin Fenton] That is a great question. One of the duties about the new recommendations from CDC is that we are recommending HIV testing irrespective of risk behavior. In other words, all individuals who are seen in medical care settings should be offered a HIV test. This really avoids the very complicated and often difficult conversations that need to be had around risk behavior or the individuals who are having a HIV test. Many settings, CDC has documented that patients may be uncomfortable talking about the details of their sexual practices and in other settings, providers may be uncomfortable with asking patients about their sexual history are taking a detailed sexual inventory. The recommendations really move for with routinizing HIV testing by making that offer of HIV testing routine to all individuals perspective of risk.

[Kathryn Hambleton] Thank you. And thank you to our bloggers for your excellent questions. Dr. Agwunobi and Dr. Fenton, we have time for closing comments from each of you. Dr. Agwunobi, you first.

[Dr. John Agwunobi] Thank you. National HIV testing day is a day to think about getting an HIV test. We really need those who write about health issues and those who reach audiences at risk for HIV to publicize the observance. Because we know that taking a HIV test gives people a sense that they can use that information to make good decisions about their lives and their health. I'll just repeat something that my colleague, Kevin just mentioned. It's important for everyone to recognize this is not necessarily just about those at high risk. It's about everyone from ages 13 through 64. We encourage you to write about HIV testing and we encourage all of those out there to tell their audiences about the importance of routine HIV tests. We also encourage each of you to take a HIV test. Then, you can write about it and tell your audience what it was like, how easy it was, how quick it was, and how important it is for everybody to be tested. Every time a public figure takes a HIV test, it punches another hole in the wall of the stigma

and shame that keeps people from protecting themselves and their loved ones. Thank you for your willingness to engage with us on this issue and for the service you will be providing for your readers by encouraging them to take the tests and to take control and share information about HIV test.org. Thanks to the AIDS.gov website and team for cohosting this with the CDC.

[Kathryn Hambleton] Dr. Fenton, your final thoughts?

[Dr. Kevin Fenton] I would also like to thank all of you including our partners in the community and especially the National Association of People with AIDS. Together we can really work to improve the health of our communities.

[Kathryn Hambleton] Thank you both for your comments. For those of the bloggers who have additional questions, we will follow up with you following the webinar. Well, that concludes our webinar for National HIV Testing Day. Thank all of you for participating today, we hope you learned useful information and will start conversations about getting tested and National HIV Testing Day. For additional information, please visit AIDS.gov. A copy of today's webinar transcript and graphics will be posted there soon. Have A Great Day!

[Announcer] To access the most accurate and relevant health information that affects you, your family and your community, please visit www.cdc.gov.