



TITLE:

EmERGE Project - Community responses on variability in the frequency of patient visits to HIV clinics in the EU

AUTHORS:

F. Greenhalgh, B. West, A.I. Von Lingen, M. Dutarte, J. Whetham, On behalf of the EmERGE Consortium

AUTHOR AFFILIATIONS:

European AIDS Treatment Group (EATG), Brussels, Belgium, Brighton and Sussex University Hospitals NHS Trust, Brighton, United Kingdom

BACKGROUND:

EATG, an EmERGE project partner, conducted a survey in July 2019 on the frequency and purpose of HIV clinic visits amongst people living with HIV (PLHIV) and HIV clinic staff in the EU, and access to telemedicine services. The purpose was to map patient visits to HIV clinics to analyse the diversity of practices at EU level where telemedicine solutions currently exist.

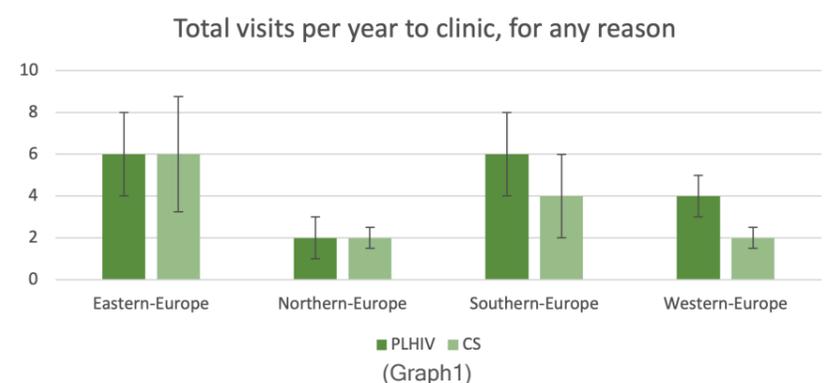
MATERIALS/METHOD:

Online surveys for PLHIV and clinical staff containing 10 questions were published in 16 European languages and disseminated widely by EATG community networks and EACS. Eligibility criteria were: PLHIV respondents were defined as stable on ARV therapy (undetectable viral load for at least 6 months); and clinical staff were defined as those treating PLHIV stable on ARV therapy. The data were collected and processed anonymously.

RESULTS:

Responses were received from 407 PLHIV from 26 countries and 153 clinical responses from 22 countries.

- In total, 63.3% of PLHIV attended their clinic to give blood samples twice yearly, which was confirmed by 80.8% of clinical staff. PLHIV reported a statistically significant higher number of clinic visits than were reported by clinical staff.
- Of visits for any reason (including giving blood, receiving results, collecting ARVs, social support, psychological support, sexologist, nutritionist, support groups) 49.1% of PLHIV reported up to 4 visits, 36.8%: 4-8 visits; and 14.1%: more than 8 visits (some countries indicating up to 20 visits).
- Clinical staff reported significantly lower counts of clinic visits for any reason than PLHIV (median of 3 visits for clinical staff and 5 visits for PLHIV).
- Regionally, PLHIV from Northern/Western Europe reported a median of 2 visits and 4 visits respectively, whereas PLHIV from Eastern/Southern Europe reported a significantly higher median of 6 visits per year for any reason (Graph1).



CONCLUSIONS:

Across the EU, the frequency of visits to give blood samples for PLHIV is more aligned than the frequency of total number of visits per year for other reasons, where responses were highly diverse. The data for overall visits suggests clinical staff may have a different understanding of amounts of total clinic visits than PLHIV have in reality. Data collected in the pre-COVID-19 era provides context to understanding service delivery before service restrictions began. Effects of current changes in service delivery due to COVID-19 on frequency, reasons of visits and regional variations should be explored through further research.

PROJECT LEADER AND PARTNERS:



Brighton And Sussex University Hospitals NHS Trust - United Kingdom



European Aids Treatment Group (EATG) - Germany



University Of Brighton - United Kingdom



Institute of Tropical Medicine Antwerp - Belgium



Fundacio Privada Clinic Per A La Recerca Biomedica - Spain



University Of Sussex - United Kingdom



Centro Hospitalar De Lisboa Central, Epe - Portugal



Klinika Za Infektivne Bolesti "Dr. Fran Mihaljevic" - Croatia



NPMS-HHC- CIC - United Kingdom



Universidad Politecnica De Madrid - Spain



EmERGE mHealth Ltd - United Kingdom



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