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Laboratory and risk factors in HIV infection

Early diagnosis of HIV infection: an achievable objective

M. Vera¹, M. Villa¹, M. Chamón¹, M. Grau¹, I. Calzas¹, R. Pérez¹, J. Ballesteros¹, J. Pérez¹, C. Rodríguez¹, J. Del Romero¹

¹Centro Sanitario Sandoval, Instituto de Investigación Sanitaria San Carlos (IdISSC), Madrid, Spain

Objectives: Late diagnosis of HIV infection is associated with higher morbidity, mortality and risk of sexual transmission as well as with a worse response to antiretroviral treatment. According to the Spanish Register of New HIV Diagnoses (SINIVIH), 28.3% of persons diagnosed in 2012 presented advanced disease. A similar percentage (29.7%) was found in the Madrid regional HIV register for the 2007-2011 period. The aim of this study was to determine the immunological status of HIV diagnosed patients between January 2007 and December 2012 in a reference STD clinic in Madrid.

Methods: CD4+ lymphocyte count was determined by flow cytometry at the time of diagnosis in all new HIV diagnosed patients by means of microparticle enzyme immunoassay and Western blot. All patients were given a structured epidemiological questionnaire to identify risk behaviours and to establish personalized preventive counseling. A descriptive analyse was performed by sex, age, origin and category of transmission. Rates of early (CD4+ T-lymphocyte ≥ 350) and late (CD4+ T-lymphocyte < 350 cells/mL) diagnosis and advanced disease (CD4+ T-lymphocyte < 200 cells/mL) by sex, age and previous HIV serology (self-reported or documented) were calculated.

Results: Between 2007 and 2012, HIV infection was diagnosed in 1629 patients (1519 men, 83 women and 27 transexuals). According to the country of origin, 42.7% were foreigners. The mean age was 33 years, and 91.5% were men who have sex with men. A total of 79% of patients reported at least a previous negative HIV serology. In 1440 of these patients, determination of CD4+ T-lymphocyte count (Table 1) was done immediately. Overall, the rate of early diagnosis was 79%, whereas the rate of advanced disease was 6%. In women, these percentages were 69% and 23%, respectively.

Table 1. Immunological status of HIV diagnosed patients by year

CD4+ T-lymphocytes	<200 cells/ml	201-350 cells/ml	351-500 cells/ml	>500 cells/ml
2007 (N=191)	5%	14%	23%	58%
2008 (N= 236)	6%	14%	25%	55%
2009 (N=224)	6%	17%	23%	54%
2010 (N=311)	6%	14%	27%	53%
2011 (N=238)	8%	18%	23%	51%
2012 (N=240)	6%	15%	21%	58%
TOTAL (N=1440)	6%	15%	24%	55%

Conclusions: The rates of late diagnosis and advanced disease in our clinic were much lower than those identified for Spain. STD clinics which are easily and free accessible and have no administrative barriers, are healthcare facilities that promote early diagnosis of HIV, specially among more vulnerable populations.