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Reaching high-risk patient populations through emergency department opt-out HIV testing: A retrospective chart review

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Background

Urban emergency departments (EDs) serve high-risk populations that face challenges in regards to chronic diseases like Human Immunodeficiency Virus infection (HIV), including the following:
- Limited access to care, and reliance on ED services for primary care.1,2
- High prevalence of HIV seropositivity (3.5% to 11.8%) and unawareness of HIV infection (4.0% of those HIV positive).1,3
- Frequent engagement in HIV risk behaviors (37.6% to 89.0%).

Specific Aims and Hypotheses

This study aimed to identify socioeconomic (SE), sexual, and other risk factors (RFs), among patients diagnosed with HIV infection through an emergency department based opt-out HIV screening program, and to examine trends in intravenous drug use (IVDU) as a RF.

H1: Unsafe sexual practices are the most commonly reported RF.
H2: Homelessness:
H3: Employment:
H4: Illicit Drug Use:
H5: Socioeconomic Risk Factors:

Results (n=134)

Methods

- Retrospective chart review
- Setting: Urban academic level 1 trauma center and affiliated urban community ED
- Sample: All patients newly diagnosed with HIV infection through the ED opt-out HIV screening program from October 2009 to June 2017
- Data were collected from electronic medical records (EMR) and forms completed by screening program personnel for mandatory reporting to the Philadelphia Department of Public Health
- Exclusions: Patient records indicated a prior diagnosis of HIV infection; Confirmatory testing not performed or results negative for HIV infection
- Analysis was performed using chi-square and logistic regression

Limitations

- EDs switched EMR software in 2017, limiting access to some older data. However, necessary data was accessible in mandatory reporting forms.
- ED HIV testing prior to 2014 did not include antigen detection, preventing acute phase diagnosis. Chronic vs. acute analysis therefore excluded pre-2014 patients.
- One ED’s proximity to a district historically associated with a large homosexual population may account for the high prevalence of males who have sex with males.
References


