

IDENTIFYING GAPS IN HIV TESTING IN HIGH-RISK GAY MEN

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Background and definitions

Frequent HIV testing can reduce rates of undiagnosed HIV

Study population:

- High-risk HIV-negative gay and bisexual men (GBM)
- Attending sexual health clinic twice 2014-2015
- At least one HIV test in 2015

Infrequent testing:

- <3 HIV tests in 2015

High-risk:

- >5 male partners in the previous 3 months, or;
- STI diagnosis in previous 2 years



Population attributable fraction (PAF)

PAF an epidemiological method which takes into account;

- The strength of the association between a risk-factor and infrequent HIV testing, as well as;
- The prevalence of the risk factor in the population (how many people have the risk-factor)

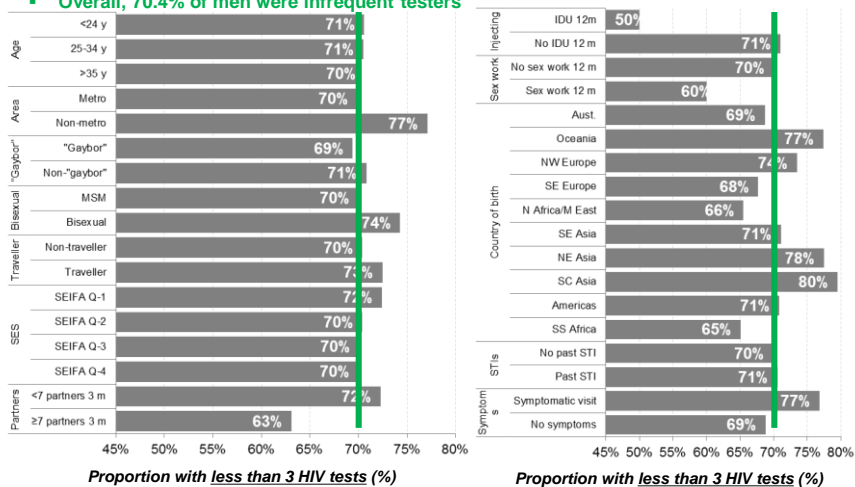
Risk factors are usually behavioural (modifiable). We include socio-demographic factors also.

How much infrequent testing in high-risk gay and bisexual men could be reduced if initiatives focused on specific subgroups.



Infrequent HIV testing by subgroup

▪ Overall, 70.4% of men were infrequent testers



SES= Socioeconomic status; SEIFA Quartile= Australian Bureau of Statistics (ABS), Socio-Economic Indexes for Areas. "Gaybor" = 10% or more same sex households in suburb

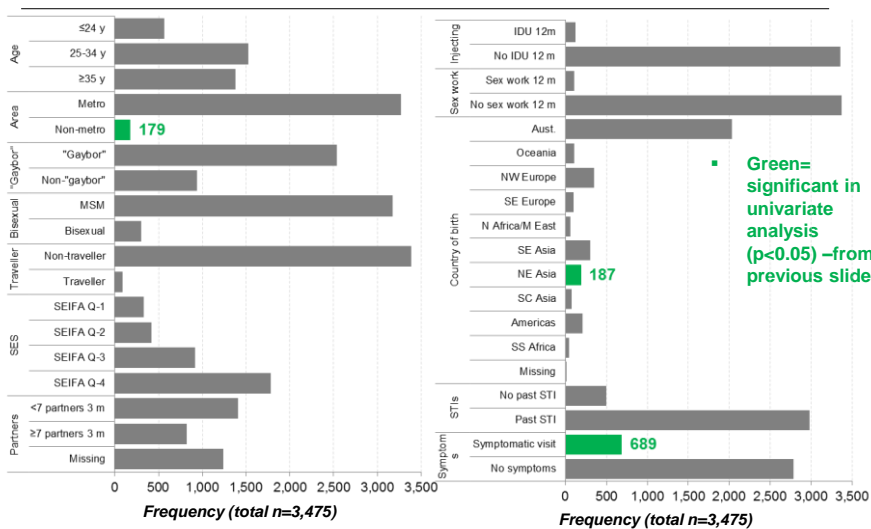
Factors associated with infrequent HIV testing

▪ NB: Only statistically significant factors ($p < 0.05$) are shown

	Factor	OR (95% CI)	P-value
Area of residence ¹	Urban (ref)	1	
	Regional/remote	1.53 (1.10 - 2.16)	<0.05
Country of birth ²	All other countries of birth (ref)	1	
	North-East Asia	1.48 (1.04 - 2.10)	<0.05
Symptomatic presentation ³	No (ref)	1	
	Symptoms	1.50 (1.23 - 1.82)	$p < 0.01$

1. Australian Bureau of Statistics (ABS), Australian Standard Geographic Classification Remoteness Structure 2. ABS, Standard Australian Classification of Countries, 3. Symptomatic presentation at first visit in 2015 derived from attendance reason

Prevalence of subgroups (n=3,475)



SES= Socioeconomic status; SEIFA Quartile= Australian Bureau of Statistics (ABS), Socio-Economic Indexes for Areas. "Gaybor" = 10% or more same sex households in suburb

Population attributable fraction (PAF)

Variable	Unadjusted PAF	95% CI
Symptomatic presentation	9%	(8%, 10%)
Born in North-East Asia	3%	(2%, 3%)
Residing regional or remote area	2%	(2%, 2%)

How much infrequent testing in high-risk gay and bisexual men could be reduced if initiatives focused on specific subgroups.

1. Symptomatic presentation at first visit in 2015 derived from attendance reason; 2. Australian Bureau of Statistics (ABS), Standard Australian Classification of Countries, 3. ABS, Australian Standard Geographic Classification Remoteness Structure

Conclusions

- Some subgroups of men are more likely to test infrequently
- Important to focus initiatives in these men to address inequity
- However as the size of the subgroups are small, broader initiatives also needed
- Data reflect men attending clinics (before PrEP)
- Population of men in the community may be larger
- Findings have greatest relevance for clinical services



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