

Poster

Presenting Author:

Karen A. Kroc

The CORE Center

2020 W. Harrison Street

Chicago, IL 60612

phone: 312-572-4709

fax:312-572-4719

email: kkroc@corecenter.org

Acceptance of rapid HIV testing and entry to care among persons attending a large, urban Emergency Department

Karen Kroc, BS¹, Sabrina R. Kendrick, MD^{1,2,3}, Eileen Couture, DO⁴, Shayle Miller, MD⁴, David Withum, DrPH⁵, Robert J Rydman, PhD³, Bernard Branson, MD⁵, and Robert A. Weinstein, MD^{1,2,3}.

¹The CORE Center, ²Department of Infectious Diseases, Cook County Hospital, ³Rush Medical College, ⁴Department of Emergency Medicine, Cook County Hospital, ⁵CDC

BACKGROUND

Cook County Hospital

Emergency Department (CCH-ED)

- Busiest emergency department in Chicago
- More than 120,000 patient visits per year
- Conventional HIV counseling and testing first offered in the CCH-ED January 2001
- Study period: June 2001 - February 2002
Rapid HIV testing offered in the CCH-ED

OBJECTIVES

- Determine if rapid HIV testing is feasible and acceptable in a busy urban hospital emergency department.
- Assess patient receipt of results
- Evaluate patient entry into care following a positive rapid HIV test

METHODS

Eligibility

- Age 18 - 60 years
- Ability to provide informed consent
- Study staff on site during patient visit

Rapid Test Device

- SUDS HIV-1 Test, Abbott/Murex
- Performed point-of-care
- Reactive SUDS tests repeated in duplicate
- All SUDS tests verified with EIA and WB

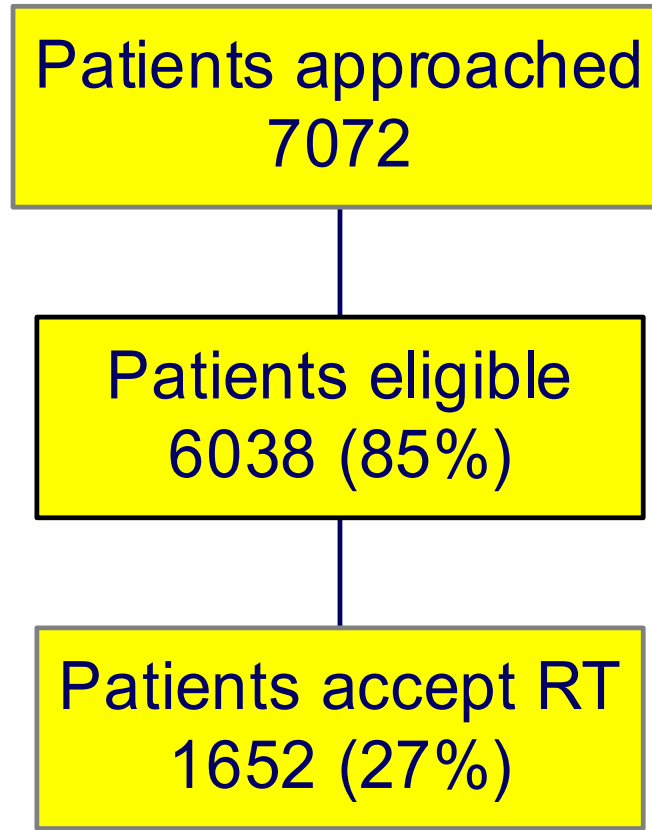
Three health educators responsible for:

- Pre-test counseling*
- Obtaining written informed consent
- Phlebotomy
- Rapid HIV testing
- Results and post-test counseling*

**pre and post test counseling based on
3/98 CDC recommendations*

Results - All patients tested

Rapid Test Acceptance



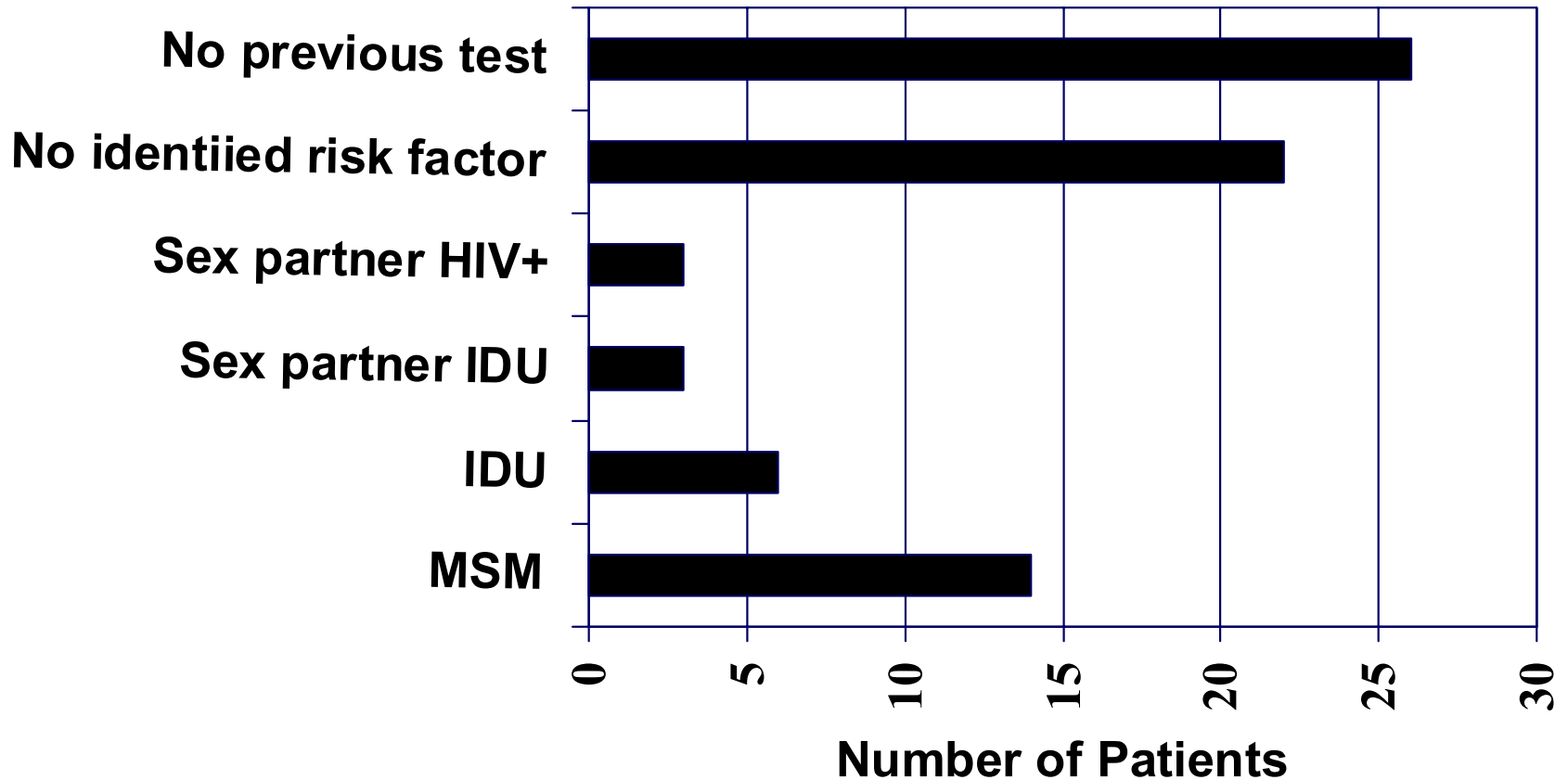
Results - All patients tested

Rapid Test Outcomes

# Patients rapid tested	1652
# Patients received results	1640 (99.3%)
# New HIV+ identified	46 (2.8%)
# HIV+ entered in care (median = 13 days)	36 (80%)* * 1 pt expired before appt.

Results - HIV+ patients n=46

Patient Characteristics



Results - HIV+ patients, n=46

Patient Demographics

Race	
African American	37 (80%)
Hispanic	7 (15%)
White	1 (2%)
Sex	
Male	38 (83%)
Female	8 (17%)
Median Age, years	39

Results - HIV+ patients

HIV Status

CD4 (n=37)

- median = 74 cells/mm³
- range = 3-1471 cells/mm³
- 76% CD4 < 350 cells/mm³

Viral Load (n=32)

- median = 65,574 copies/ml
- range = <50-750,000 copies/ml

CONCLUSIONS

- Rapid testing reaches many individuals who otherwise may not access HIV testing
- Point-of-care rapid HIV testing is feasible in the ED
- Performing phlebotomy early in the visit and testing in the ED contributes to timely results
- Rapid HIV testing
 - was well received
 - increases the number of people who learn their results
 - may improve entry into care