Background

- In South Africa, Emergency Departments (ED) provide care to large volumes of trauma patients and young men.
- ED have been shown to successfully implement HIV testing and identify large volumes of patients with undiagnosed HIV infection.
- The ED does not routinely provide linkage to care (LTC) support and often refers patients to return to their local ARV clinic.
- HIV testing is the first step of the care cascade, and it is unclear what proportion of ED patients can successfully link to care.
- Furthermore, given that ED provide care to patients from a large catchment area (over 150 miles), it is unclear where they link to care.

Methods

- This is a prospective cohort study across four EDs in the Eastern Cape province of South Africa.
- All patients attending one of four EDs during the 6-week study period aged ≥18 years, clinically stable and able to consent were eligible for enrollment.
- Trained HIV counselors systematically approached ED patients and offered point of care HIV counseling and HIV testing.
- All HIV+ patients were further consented to participate in a follow up study to ascertain their linkage to care (LTC) status via: 1) Telephone follow-up and/or 2) Tracking in the National Health Laboratory System (NHLS) database.

Outcome Measures

The primary outcome measure was to identify what proportion of HIV positive (new and known) were able to successfully LTC.

Results

- Over the study period 5900 patients were enrolled, of which 486 (8.2%) accepted testing, of which 1172 (24.2%) were HIV positive.
- Of these 949 consented to participate in a follow-up study, 633 (66.7%) had a known diagnosis of HIV and 316 (33.3%) had a new diagnosis of HIV.
- Of those in the follow up study, we were able to trace 145 (45.9%) of the 316 patients with a new diagnosis of HIV in NHLS, and only 73 (23%) of them via telephonic follow up.
- Among the newly diagnosed patients, 61.7% had evidence of LTC in the NHLS database, and 38.4% confirmed via phone (28/73).
- Patients traveled from long distances to the ED especially in Mthatha (mean range 66.2-179.7 miles).

Summary & Conclusions

- The HIV prevalence in the Emergency Department was 24.5%.
- A third of patients in this study (33.3%) had a new diagnosis of HIV.
- However, only a third of these patients were able to link to care.
- The catchment area across sites varied greatly.
- Patients that traveled from far distances seem less likely to LTC.