

## Screening for HIV: U.S. Preventive Services Task Force Recommendations

*Summaries for Patients* are a service provided by *Annals* to help patients better understand the complicated and often mystifying language of modern medicine.

The full reports are titled "Screening for HIV: Recommendation Statement," "Prenatal Screening for HIV: A Review of the Evidence for the U.S. Preventive Services Task Force," and "Screening for HIV: A Review of the Evidence for the U.S. Preventive Services Task Force." They are in the 5 July 2005 issue of *Annals of Internal Medicine* (volume 143, pages 32-37, 38-54, and 55-73). The first report was written by the U.S. Preventive Services Task Force; the second and third reports were written by R. Chou, A.K. Smits, L.H. Huffman, R. Fu, and P.T. Korthuis.

### Who developed these guidelines?

The U.S. Preventive Services Task Force (USPSTF) is a group of health experts that reviews published research and makes recommendations about preventive health care.

### What is the problem and what is known about it so far?

HIV is the cause of AIDS, an illness that interferes with the body's ability to fight infection and some types of cancer. Treatments containing multiple drugs have improved outcomes for HIV-infected patients. HIV passes from person to person through contact with blood or other body fluids that contain the virus. People can have HIV infection for years before becoming sick.

Testing for HIV infection involves a blood test. *Screening* means testing people who feel well for infection rather than waiting until symptoms develop. The USPSTF wanted to update its 1996 recommendations after considering new information about HIV infection and treatment.

### How did the USPSTF develop these recommendations?

The USPSTF reviewed published research to evaluate the benefits and harms of HIV screening.

### What did the authors find?

Research shows that people in the following categories have a higher risk for HIV infection than the general population: those with past or present intravenous drug abuse; those who received a blood transfusion from 1978 to 1985; men and women who have had unprotected sex with multiple partners; men who have had sex with men after 1975; men and women who have exchanged sex for money or drugs (or who have sex partners who have done so); men or women whose past or present sex partners were HIV-infected, bisexual, or intravenous drug users; and men or women with other sexually transmitted diseases. Research also shows that people who request HIV testing despite reporting none of these risk factors also are at increased risk for HIV infection, probably because they have risk factors that they were not willing to report.

The authors found that the blood tests used to diagnose HIV infection are highly accurate. People can benefit from early diagnosis of HIV infection because they can get treatments to prevent the infections that complicate HIV and can be monitored so that they start HIV treatments as soon as indicated. In pregnant women, early identification of HIV infection allows treatment to prevent the spread of infection from mother to infant. The potential harms of screening for HIV include increased anxiety, the social stigma of HIV infection, and effects on close relationships.

### What does the USPSTF suggest that patients and doctors do?

Doctors should ask patients if they have any of the risk factors listed earlier, and patients should tell their doctors if they have a risk factor. Doctors should recommend HIV testing for all adolescents and adults with a risk factor for HIV. Patients with no risk factors should discuss testing with their doctors and should understand the potential harms of testing and the lack of information about the benefits of testing people with no risk factors.

Doctors should screen all pregnant women for HIV infection regardless of whether they have risk factors. Pregnant women should expect testing as part of good pregnancy care.

### What are the cautions related to these recommendations?

As new studies become available, the USPSTF may modify these recommendations.

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