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SAN JUAN BAUTISTA

Use of POC tests in Latin America. Where are we using it? The Peruvian Experience

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PERÚ

Ministerio de Salud

Dirección General de Intervenciones Estratégicas en Salud Pública

VIH/SIDA en el Perú

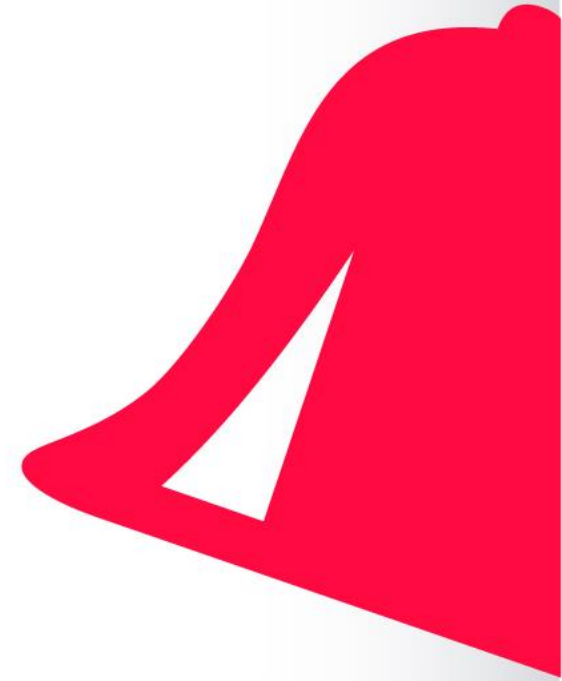
- Casos acumulados de VIH a Octubre 2017: 109,263 casos de VIH* y casos SIDA 40,551
- Número de personas viviendo con VIH/SIDA en 2016 : 70,000 personas **
- Epidemia **concentrada** en HSH (prevalencia 12.4%*) vs. población general (prevalencia 0.23%*)
- La transmisión es predominantemente sexual (97%)
- Relación hombre/mujer: 4/1
- Lima y Callao concentran el 70% de los casos.



- Fuente: Centro Nacional de Epidemiología, Prevención y Control de Enfermedades - CDC
- ** Fuente : Estimaciones Spectrum/EPP

In this peruvian HIV scenary, where?

- Research: We!!
- Program implementation: They!!
- Migrants study: us!!



Laboratory Evaluation of a Dual Rapid Immunodiagnostic Test for HIV and Syphilis Infection

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Journal of
Clinical Microbiology



New dual tests for HIV and syphilis have been developed. Our study aimed to evaluate a rapid immunodiagnostic test for HIV and syphilis. Our evaluation shows that this test should be considered for implementation to increase screening coverage in resource-limited settings.

Laboratory Evaluation of a Dual-Path Platform Assay for Rapid Point-of-Care HIV and Syphilis Testing

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ORIGINAL STUDY

We assessed the laboratory performance of the Chembio dual-path platform HIV-syphilis rapid immunodiagnostic test and compared it to a reference test.

Field Evaluation of a Dual Rapid Immunodiagnostic Test for HIV and Syphilis Infection in Peru

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Carlos F. Caceres, MD, MPH, PhD, † and Jeffrey D. Klausner, MD, MPH §

Background: Integrated prevention for HIV and syphilis is warranted because both syphilis and HIV infections have evidence-based, scalable interventions.

screening strategy for syphilis and HIV infection, as is recommended by the World Health Organization as part of a comprehensive dual elimination initiative. This strategy should be implemented to reduce the burden of these infections in resource-limited settings.

Research: validation and testing

	HIV		SYPHILIS	
	Laboratory	Field	Laboratory	Field
S	100.0 (95.1 – 100.0)	93.8 (69.8 – 99.8)	94.6 (88.5 – 98.0)	81.0 (58.1 – 94.6)
E	91.9 (85.7 – 96.1)	100.0 (97.7 – 100.0)	92.8 (84.9 – 97.3)	100.0 (97.6 – 100)

Research: Scaling up

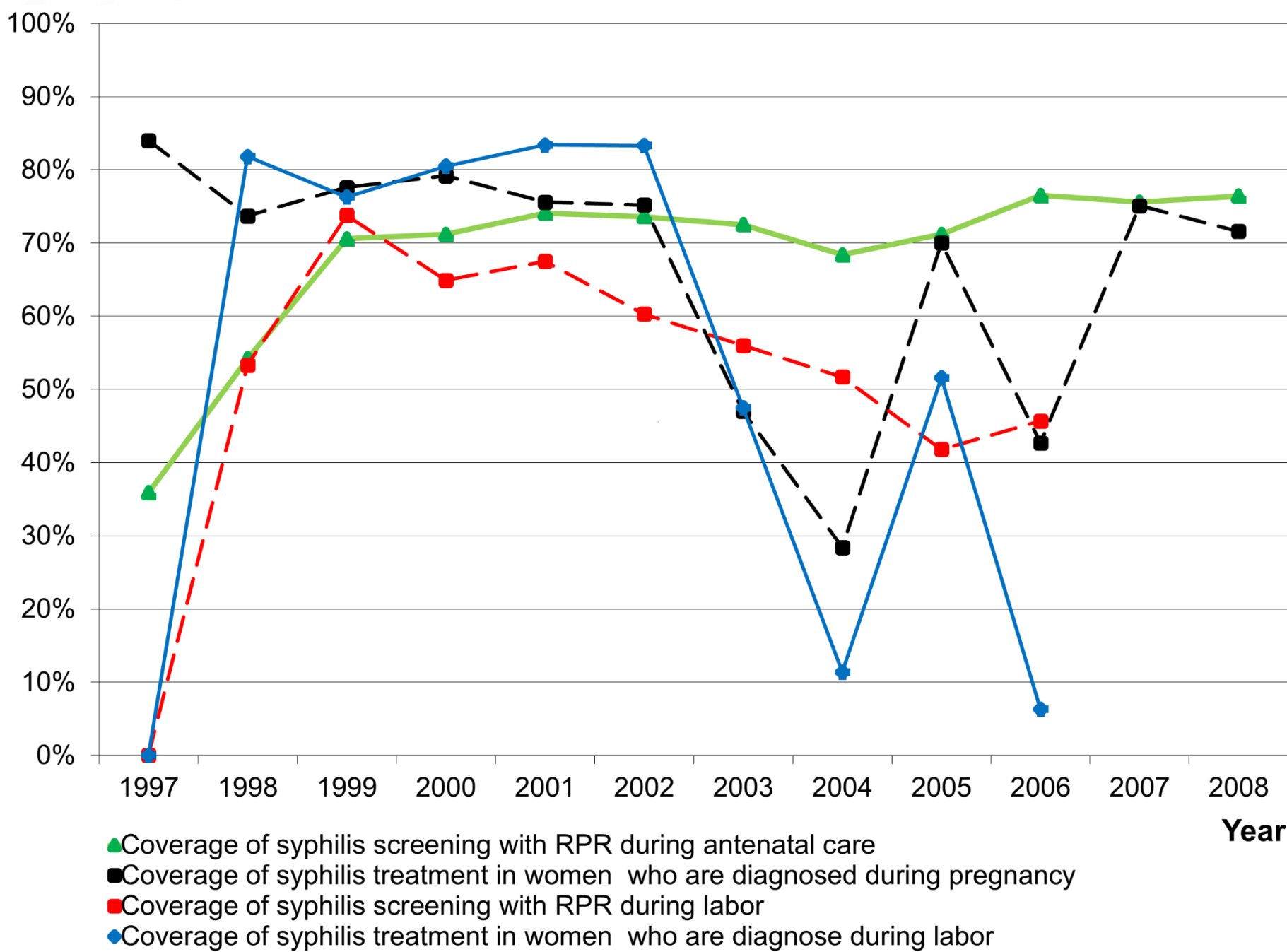
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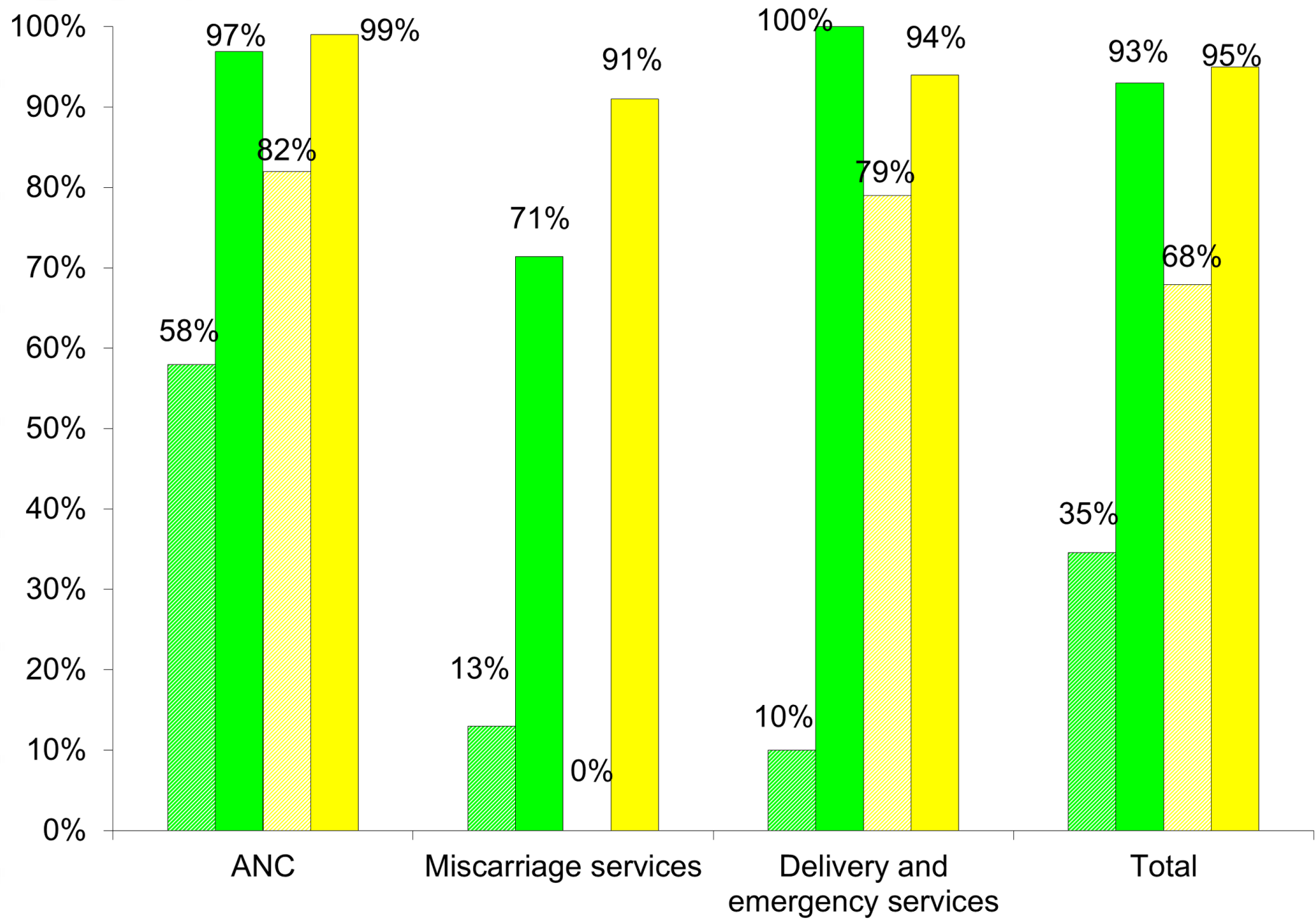
 PLOS ONE

Rapid Syphilis Tests as Catalysts for Health Systems Strengthening: A Case Study from Peru

Patricia J. García^{1,2*}, César P. Cárcamo¹, Marina Chiappe¹, Maria Valderrama¹, Sayda La Rosa¹, King K. Holmes², David C. W. Mabey³, Rosanna W. Peeling³

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■ Callao RPR-2009
 ■ Callao POCT-2010
 ■ INMP RPR-2009
 ■ INMP POCT-2010

Self-testing

Original research article

HIV self-testing in Peru: questionable availability, high acceptability but potential low linkage to care among men who have sex with men and transgender women

**Maria Jose Bustamante¹, Kelika A Konda^{1,2},
Dvora Joseph Davey³, Segundo R León¹, Gino M Calvo^{1,4},
Javier Salvatierra⁵, Brandon Brown⁶, Carlos F Caceres¹ and
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 SAGE

Willingness and preferences of transgender women and men who have sex with men to use an oral HIV self-test kit in Lima, Peru

	Transgender women (n = 45)	Men who have sex with men (n = 147)	P-value
Willingness to use the HIV self-test if free of charge			
Reported willingness to use the HIV self-test	43 (95%)	115 (78%)	P = 0.28
If willing to use, number of tests per year, median (IQR)	4 (IQR 4 - 5)	4 (IQR 4 - 4)	P = 0.43
Preference on clinic vs. self-testing			
Always/almost always in a clinic	1 (2%)	33 (25%)	P = 0.002
Neutral	25 (58%)	58 (44%)	
Always/almost always HIV self-test	17 (40%)	29 (22%)	
Likelihood of confirmation test or medical treatment			
Unlikely do a confirmatory test	0 (0%)	7 (5%)	P = 0.009
Neutral	16 (37%)	20 (15%)	
Likely do a confirmatory test	27 (63%)	94 (71%)	
Acceptability of getting an HIV self-test delivered			
Somewhat/very comfortable	41 (95%)	94 (71%)	P = 0.03
Neutral	1 (2%)	19 (14%)	
Somewhat/very uncomfortable	1 (2%)	5 (4%)	
Preferences for receiving an HIV self-test			
My house	27 (63%)	34 (26%)	P < 0.01
Friend's house	13 (30%)	61 (46%)	
Community center	1 (2%)	21 (16%)	
Other	1 (2%)	2 (2%)	

Program implementation

CONCISE COMMUNICATION

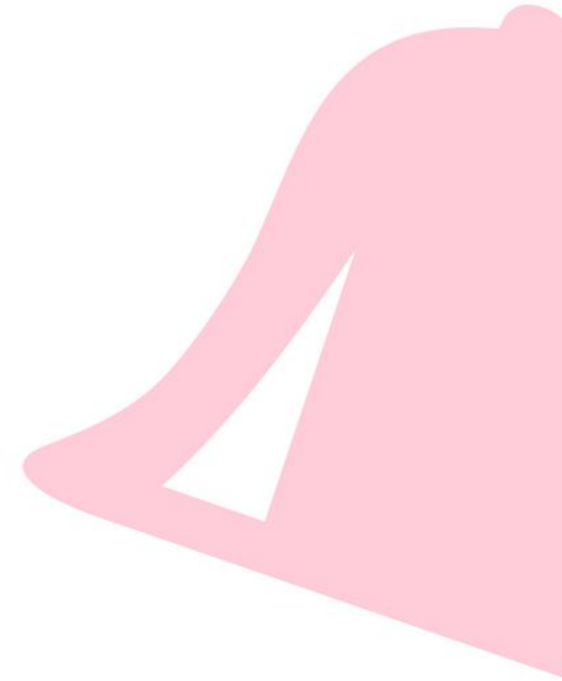
Determinants and prevalence of HIV infection in pregnant Peruvian women

Jorge O. Alarcon^a, Kay M. Johnson^{b,c,d}, Barry Courtois^c,
Carlos Rodriguez^e, Jorge Sanchez^f, Douglas M. Watts^g,
King K. Holmes^{b,c}

Objectives: To determine age-specific seroprevalence, risk factors, and risk markers for heterosexually-acquired HIV infection among pregnant women.

Design: Cross-sectional study of 12 436 consecutive pregnant women in Lima, Peru in 1996–1997.

Program implementation: perinatal testing



Program implementation: Migrants vs. Locals

- The *HIV and STI prevalence and associated behaviors among migrants and hosts in Lima* (SexFLOW Study)
- Sample size 600 (450 migrants + 150 hosts)
- RDS method for sampling/recruiting
- Rapid testing for HIV and Syphilis

In summary

- HIV is a concentrated epidemic in Peru, most prevalent amongs MSM and Trans
- Syphilis an important comorbidity of HIV
- Dual tests perform different in the lab/field
- Scalability is doable, perinatal testing is an opportunity
- Rapid testing on migrants. Results son....