The Big Picture.

Every 9½ minutes, someone in the U.S. is infected with HIV. At least one in five people with HIV in the U.S. do not know they are infected. Most of those unaware of their infection visit the doctor for routine care but are not tested for HIV. Typically, health care providers test only patients who report a behavior that would increase their risk for getting HIV. The social stigma these behaviors can carry often lead patients not to tell the doctor about them.

For each patient not tested, another opportunity to detect, treat and reduce the transmission of HIV is lost. The Department of State Health Services (DSHS) and the Centers for Disease Control and Prevention (CDC) now recommend routine HIV testing when patients receive healthcare.

Why routine HIV testing?

Routine HIV testing is the first line of defense against HIV and AIDS. People who know they are infected with HIV can and do make choices to protect themselves and others. Routine testing can also help eliminate the stigma and fear associated with risk-based HIV testing. Routine testing means earlier diagnosis and treatment.

Late diagnosis of HIV is associated with poor health outcomes including early death. Yet, HIV/AIDS medications are highly effective when started early in the course of HIV infection, and are available at low cost to low income persons. Early treatment suppresses HIV and reduces the chance for further spreading HIV. Medical costs are also higher for people diagnosed with HIV after they are already sick.

Marks G, Crepaz N, Janssen RS. Estimating sexual transmission of HIV from persons aware and unaware that they are infected with the virus in the USA. AIDS 2006;20:1447–50.
People who do not know they have HIV cause more than half of the 4,200 new HIV infections in Texas each year. 1 out of 3 HIV-infected Texans are diagnosed with AIDS within one year of being diagnosed with HIV (late diagnosis). 65% of Hispanics in Texas get a late HIV diagnosis, compared to 54% of Whites and 46% of Blacks. Hospitals, community clinics and doctors’ offices account for more than half of all HIV diagnoses. Most people who test positive for HIV had previous health care visits but were not tested for HIV. More than 72,000 Texans are known to be living with HIV.

**Routine testing is costly effective.**

Routine HIV testing in health care settings is as cost effective as other routine screening for conditions and diseases such as breast or colon cancer, hypertension, and high cholesterol. Early diagnosis and treatment are much more cost effective than when HIV is diagnosed late in the course of the disease.

Screening tests for HIV are cost effective, inexpensive and highly accurate, but health insurance coverage is highly variable. HIV should be treated like any other laboratory test. Patients will need to know up front if they will have to pay for the test.

**Routine testing is a powerful public health tool.**

People who know they are infected with HIV make choices to protect themselves and others. Routine HIV testing can increase the number of people who know their HIV status. Routine testing in all health care settings reduces disease transmission, improves health outcomes, is cost effective and eliminates the stigma often associated with HIV testing. Routine HIV testing is good for public health.

For source information, please call (512) 533-3000 or send an e-mail to hivstd@dshs.state.tx.us.