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European HIV-Hepatitis Testing Week 2017 highlights the need for increased awareness for HIV and hepatitis testing

The need to increase testing for HIV and viral hepatitis continues to be an issue in Europe. People remain unaware of their status and too many are diagnosed late leading to higher mortality rates, greater risk of onward transmission and increased financial costs. For European HIV-Hepatitis Testing Week 2017 (17-24 November), organisations and institutions across Europe are uniting for one week to focus on the need to increase awareness for testing for HIV and hepatitis and stress the importance of knowing your status.

This year more than 600 organisations and institutions from 47 countries in the WHO European Region are uniting during the last week of November for one shared goal: to promote early diagnosis of HIV and hepatitis and linkage to care. The shared aim is to increase awareness of the benefits of HIV and hepatitis testing so that more people are aware of their status, increase timely linkage to treatment and care and increase knowledge on how to prevent transmission. The call to action for the European Testing Week campaign is – ‘TEST. TREAT. PREVENT’.

An important area of focus is to support safe and voluntary testing for key and most affected populations of HIV and hepatitis. Recent data from ECDC (2016) show that testing coverage and uptake among populations most at-risk remain very low due to existing barriers that key and most affected populations face when seeking or accessing HIV and/or hepatitis testing and treatment. Programmes must work to challenge non-rights based testing practices and prioritise key and most affected populations in testing campaigns to ensure that no one is left behind.

“We must ensure that population groups most affected by HIV and hepatitis are being reached and work with them to break down the barriers to HIV and hepatitis testing,” says Cary James, co-chair of the European HIV-Hepatitis Testing Week Working Group.
During European HIV-Hepatitis Testing Week, hundreds of participating organisations unite and make extra efforts to ensure that their messages are being heard and that the service need is being met. Participants reach out to their community by extending service hours and carrying out outreach testing in various settings to make services more accessible.

**Important to test all year - not just in November**

The message to ‘get tested’ should be promoted in health care settings, community centres and outreach efforts all year round. The more people that are aware of their status, the closer we can get to reaching the first 90 in the '90-90-90’ global goals. European HIV-Hepatitis Testing Week drives the momentum for organisations to focus on testing and creates a yearly reminder for people to get tested. However, it is important to highlight that **testing is important all year round**. “European HIV-Hepatitis Testing Week serves as a platform for European countries to stand together for the same cause. But HIV and hepatitis testing awareness is something that we should all work to promote every day of the year.” says Valerie Delpech co-chair of European HIV-Hepatitis Testing Week Working Group.

The European HIV-Hepatitis Testing Week is being held for the fifth time this year and has year after year proven to be successful in uniting organisations (519 organisations in 47 countries in 2016) all across Europe in carrying out innovative activities to reach people with undiagnosed HIV and/or viral hepatitis. It is the third time that hepatitis is included emphasizing the importance of testing for more than one condition, as hepatitis B and C are common among people at risk of and living with HIV.

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Notes to editor

**Those who ought to be getting tested**

Testing week focuses on populations that are at higher risk of HIV and viral hepatitis B & C. These groups include, but are not limited to: gay men and other men who have sex with men (MSM), migrants (including persons originating from a high prevalence country) and mobile populations, sex workers, trans people, prisoners and people who inject drugs.

**The situation in Europe**
The unacceptable reality is that an estimated 25% of the 1.2 million people living with HIV in Europe are unaware that they are HIV positive; and nearly 50% of those who are positive are diagnosed late, delaying access to treatment. Hepatitis B and C affect around 28 million people and are both widely underestimated and underreported. Due to the lack of symptoms these infectious diseases are often referred to as the silent epidemic.

This indicates that many people are not being tested prior to symptoms emerging. This could be because there are barriers to requesting a test, barriers to offering a test or barriers to the implementation of existing European testing guidelines, despite the benefits of early diagnosis being well-documented.

When people are diagnosed late with HIV and/or hepatitis B & C, they are more likely to suffer health complications and more likely to pass the virus to others, as they will not have had access to treatment. In contrast, the majority of those who are diagnosed early (soon after infection) and are prescribed antiretroviral treatment in a timely manner can live healthy lives and also become completely virus-free if infected with hepatitis C. The benefits of regular testing amongst populations at higher risk are widespread. It leads to early diagnosis and access to treatment, which in turn has a positive impact on the individual’s prognosis and reduces onward transmission.

Late presenters are people who are not diagnosed with HIV until their immune system is already severely compromised (the number of white CD4 blood cells is so low that the immune system no longer works properly). This has severe consequences for the individual as it leads to late presentation for care and is also more costly and harmful to society.

HIV/AIDS specialists have known that patients presenting with a range of diseases such as tuberculosis, repeated incidences of pneumonia, infection with cytomegalovirus or other ‘AIDS Defining Events,’ should be offered an HIV test. However, this is not always done and the HIV in Europe Initiative and European HIV-Hepatitis Testing Week will keep urging European health authorities to investigate the extent of patients who present with these diseases are actually offered an HIV test. Provider-initiated testing is needed to improve and increase testing uptake. The concept of indicator-condition-guided HIV testing is an approach by which healthcare practitioners can be encouraged to test more patients based on indicator conditions rather than risk behaviour or group.

About HIV in Europe

HIV in Europe is a pan-European initiative initiated in Brussels in 2007. The initiative provides a European platform for exchange and activities to improve early diagnosis and earlier care of HIV across Europe. The initiative is directed by an independent group of experts with representation from civil society, policy makers, health professionals and European public health institutions.

HIV in Europe is not an organisation, but an initiative formed to inform processes, share knowledge and improve the evidence base around important issues of earlier testing and care. It is unique in its collaboration between stakeholders at a clinical, advocacy and public health level.