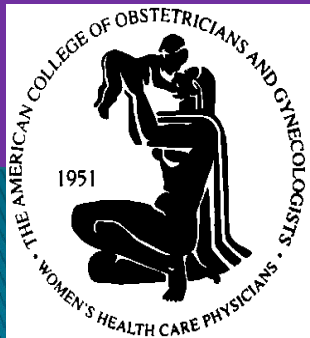


Providing Physician Support, Education, Special Tools and Resources to Achieve Increased Rates of HIV Testing for Non- pregnant Women

ACOG–American College of Obstetricians and Gynecologists
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ACOG

- ▶ American College of Obstetricians and Gynecologists
- ▶ Non-profit 501 (c) 3 charitable, educational organization
- ▶ Medical Specialty Society
- ▶ Women's Health Care Physicians
- ▶ 52,000 members
- ▶ 95% of board-certified obstetricians and gynecologists (ob-gyns)
- ▶ Conduct 85% of deliveries in U.S.
- ▶ Primary care providers-15% of all physician office visits for women 15 years and older
- ▶ Receives CDC Cooperative Agreement to fund professional and patient educational activities on perinatal and routine HIV screening (#U65PS000813-01: "National Organizations Working to Eliminate Perinatal HIV Transmission and to Implement CDC Revised Recommendations for HIV Testing of Adults Adolescents, and Pregnant Women in Health - Care Settings")

ACOG Issues New HIV Clinical Guidelines Supporting CDC's New Recommendations on Routine HIV Screening


Membership survey finds that 98% of ACOG Fellows are aware of ACOG guidelines, 96% used those guidelines over previous 5 years, and 61 % reported that an ACOG publication or guideline changed their practice within the last 2 years.

Readership survey of Obstetrics & Gynecology, the leading peer-reviewed obstetrics journal, finds that ACOG Clinical guidelines are highest read articles in each issue.


ACOG issues 2 professional guidelines supporting CDC's routine HIV screening recommendations and clinical guidance and interventions to increase routine HIV screening in women of color, given their significantly higher rates of HIV.

ACOG develops laminated physician script reference card to help ob-gyns discussion of routine HIV testing and to prompt ob-gyns to discuss this with all of their non-pregnant patients, including sexually active adolescents, as a routine part of practice in well women's health care.

Routine HIV Screening New Guidelines From ACOG



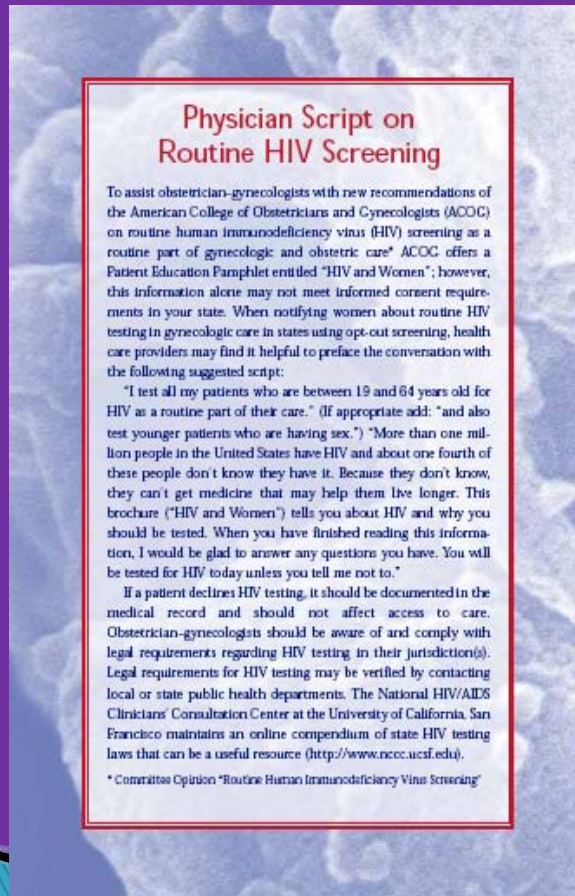
Routine HIV Screening
New Guidelines From ACOG



The American College of
Obstetricians and Gynecologists
Women's Health Care Physicians

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Physician Script on Routine HIV Screening



A laminated
information card on
Routine HIV
Screening

ACOG Patient Education



HIV and Women Pamphlet
(English)

ACOG Patient Education



HIV and Women Pamphlet
(Spanish)

Committee Opinion 411

- ▶ Routine Human Immunodeficiency Virus Screening (August 2008)

Committee Opinion 414

- ▶ Human Immunodeficiency Virus and Acquired Immunodeficiency Syndrome and Women of Color (August 2008)

Committee Opinion 389

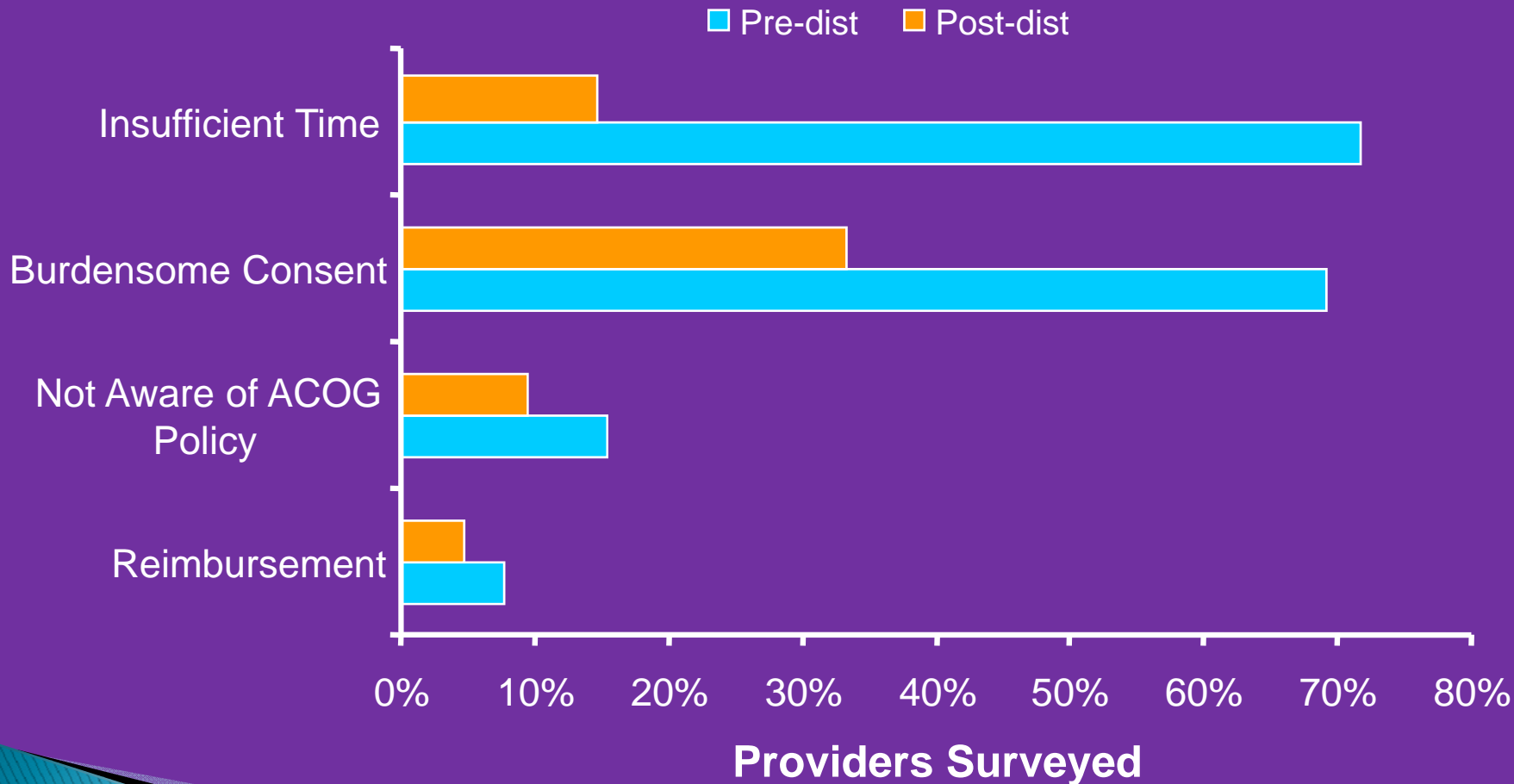
- ▶ Human Immunodeficiency Virus (December 2007)

National Distribution and Promotion of Professional and Patient Resources on Routine HIV Screening

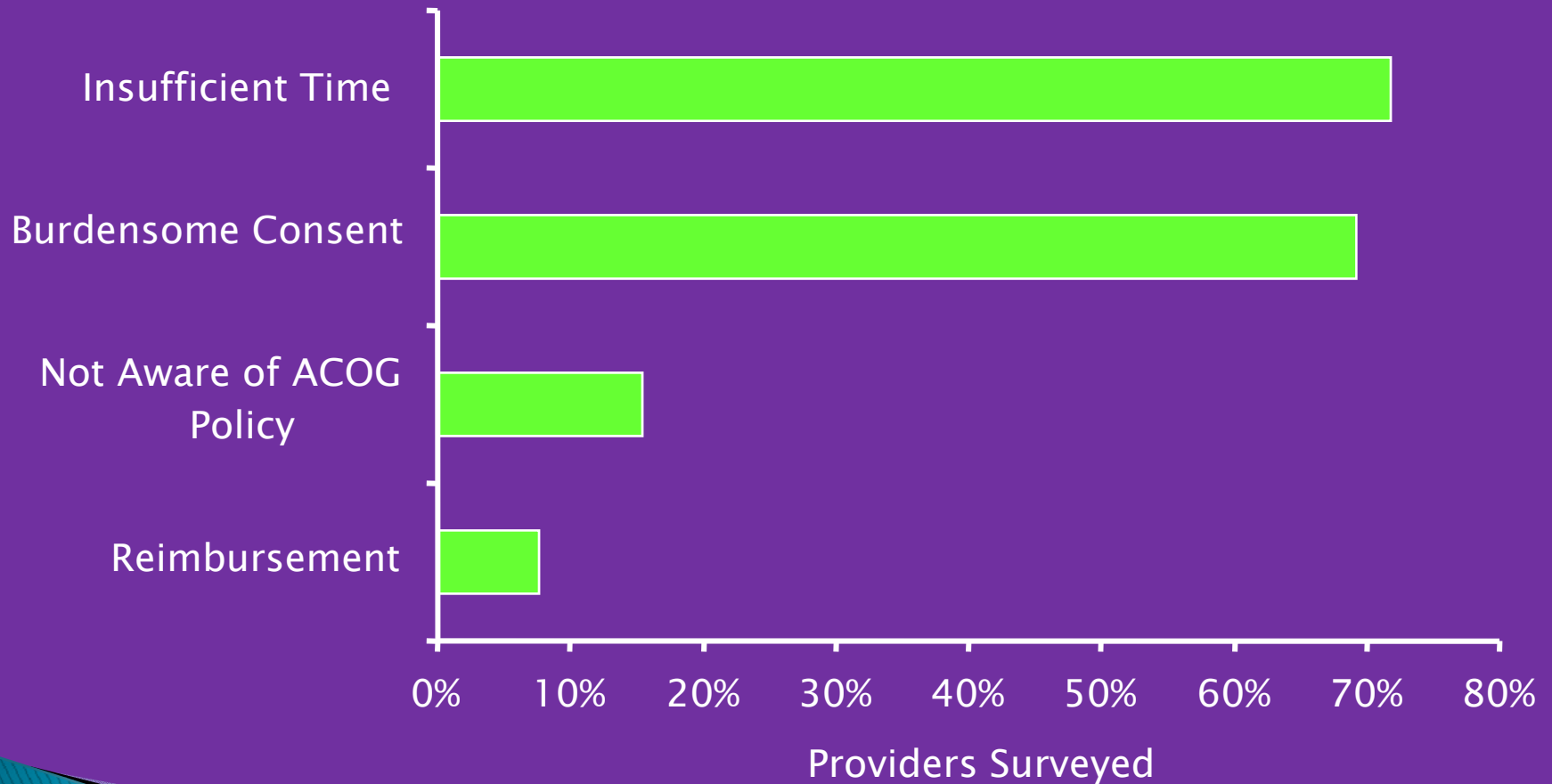
- ▶ To increase ob-gyns' awareness of CDC's and ACOG's new clinical recommendations on routine HIV screening for non-pregnant women and targeted adolescents, "Blue Folder" is broadly distributed based on efficacy of "Purple Folder"
- ▶ "Blue Folder" distributed nationally to:
 - ▶ -33,000 ob-gyns in active practice
 - ▶ -ACOG leadership
 - ▶ -National and state public health leadership
 - ▶ -Residency Programs
 - ▶ -HIV Experts
 - ▶ -Other medical specialty societies
 - ▶ -Hospital emergency departments
 - ▶ -State Health, MCH, and HIV/AIDS directors
 - ▶ -Postgraduate Course Directors
 - ▶ -Leadership of hospital and managed care professional organizations
- ▶ "Blue Folder" promoted on websites, mass media, medical society meetings, postgraduate courses, and ACOG's newsletter and e-mailings to all 52,000 members

Provider Barriers to Testing All Pregnant Women Decreased After Broad Distribution of ACOG

“Purple Folder” (2001)



Providers Reported Barriers to Testing All Pregnant Women (2000)



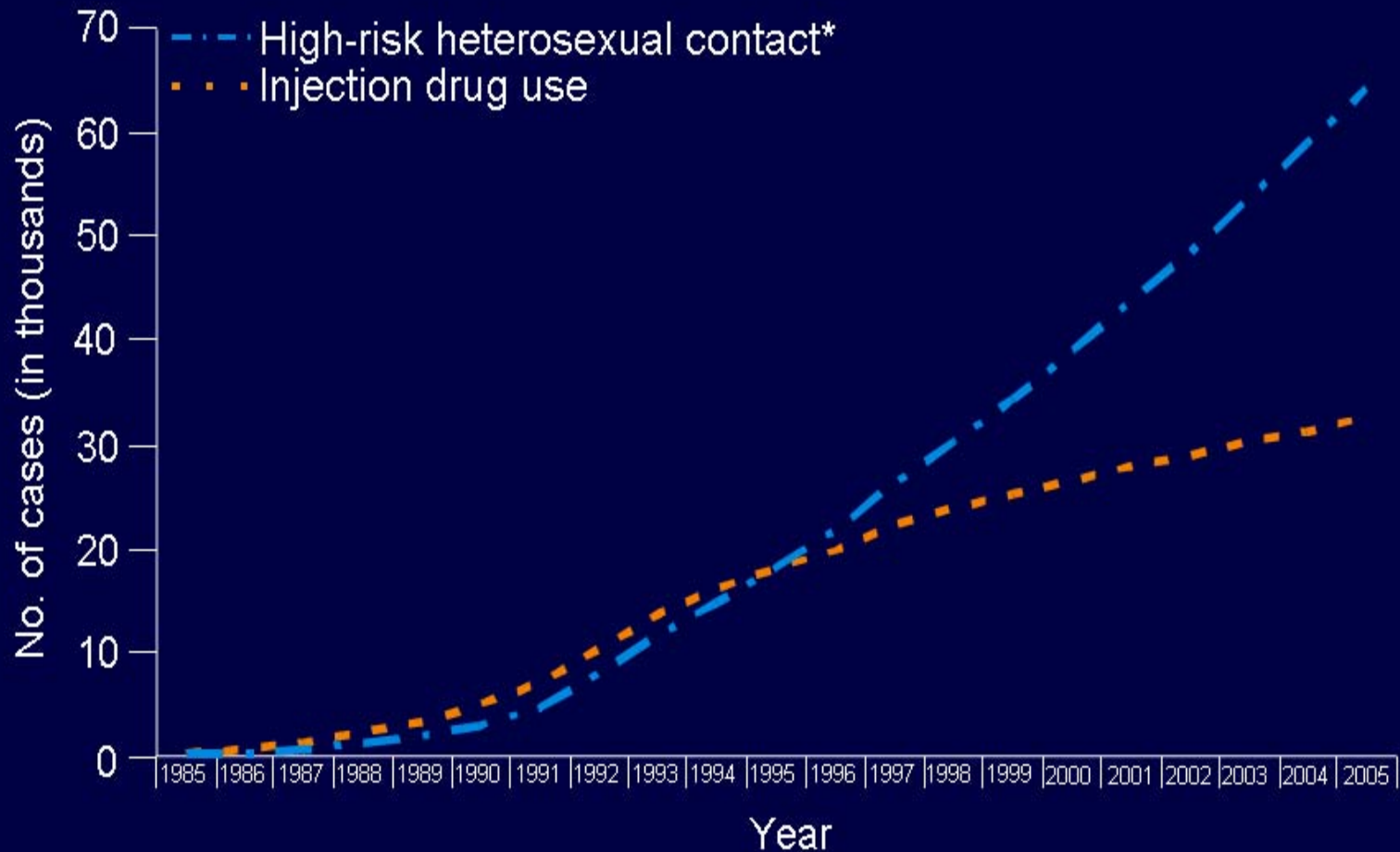
ACOG Convened HIV Expert Work Group

- ▶ Includes ob-gyns specializing in infectious disease, obstetrics, gynecology, and family planning
- ▶ Advise ACOG Clinical Practice Committees and ACOG's CDC project staff on activities to further routinization of HIV testing in women's ongoing health care
- ▶ Review ACOG's professional and patient materials on HIV testing for accuracy, relevancy, appropriateness and utility
- ▶ Review surveys and evaluation of ACOG's project activities and results submitted for publication to:
 - ▶ 1.) further enhance ob-gyns' and other health care providers incorporating routine HIV testing into adult care and
 - ▶ 2.) to increase ob-gyns 'and other providers awareness of effective activities to implement CDC's routine HIV testing guidelines

Numerous Challenges Meeting The Reproductive Health Needs of Women with HIV

- ▶ ACOG is developing a web-based postgraduate continuing education module on family planning, pre- and inter-conception care of HIV-positive women with CME credits
- ▶ Include clinical case vignettes and a provider-patient interview with an HIV-positive women of reproductive age
- ▶ Challenges:
 - ▶ – Women frequently diagnosed late in course of HIV
 - ▶ – Reproductive health care often not a priority for providers or patients
 - ▶ – Gynecologic problems are common
 - ▶ – Effective contraceptive methods are under utilized in HIV settings
 - ▶ – More HIV positive women are choosing to conceive
- ▶ Provide links to other postgraduate continuing education and provider resources
- ▶ Pre- and post- questionnaire to evaluate participants' increased knowledge and skills after using the web-based tool and if it will result in changes in gynecologic and reproductive health practices of HIV-positive women

Female Adults and Adolescents Living with AIDS by Transmission Category, 1985–2005—United States and Dependent Areas



Note. Data have been adjusted for reporting delays and cases without risk factor information were proportionally redistributed.

* Heterosexual contact with a person known to have, or to be at high risk for, HIV infection.



Patient Perceptions of Ob-Gyn's Practice Related to HIV Testing

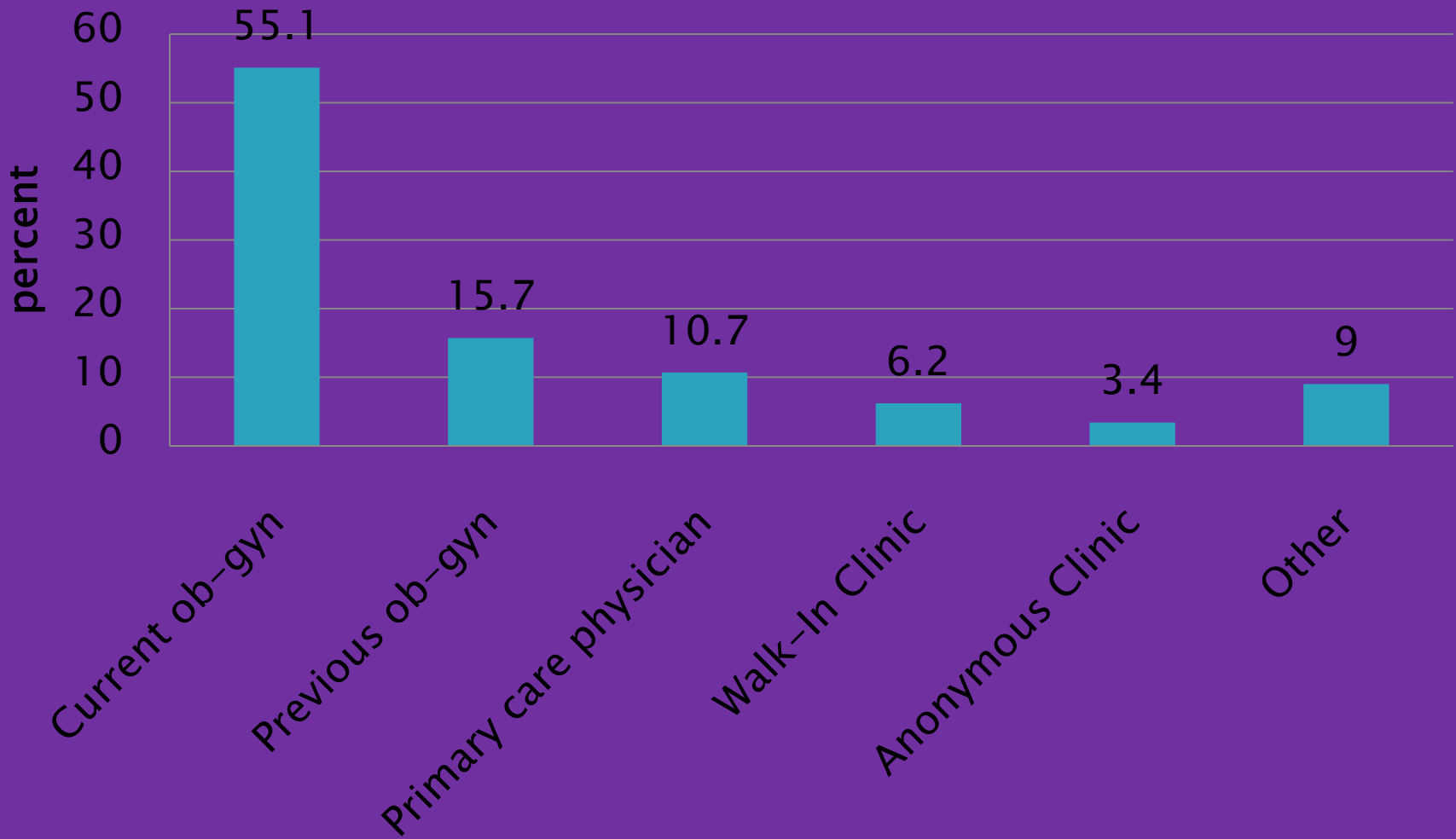
- ▶ -ACOG conducted survey to determine percentage of ob-gyns' patients who have been tested for HIV, patient attitudes about HIV testing and patients' knowledge of their risk status, and to determine primary reasons patients decline an HIV test
- ▶ - 2/3 respondents reported having been tested for HIV but did not recall that their ob-gyn had recommended testing
- ▶ -Primary reason for patients declining HIV test was perceived low risk

▶ Comparison of patient (N=827) and obstetrician–gynecologist (N=64) response

Factor	<u>Patient response</u>		Physician response
	Non-pregnant – (%)	Pregnant (%)	
Physician has recommended HIV testing	22	39	100/98/60
Physician ever asked about the number of sexual partners a patient has had.	53	39	84
Physician ever asked about patients' injection drug use	46	52	64
Acknowledge unprotected sex with multiple partners	49	45	–
Have been tested for HIV	57	82	–
Ever declined HIV testing recommended by obstetrician–gynecologist	7	7	–

- ▶ a Please note that percentages for non-pregnant patients may not match percentages reported in the text for all respondents, which include both pregnant and non-pregnant respondents
- ▶ b Data reported in ref. (11)
- ▶ c Strongly or moderately recommend for non-pregnant patients who report having had unprotected sex with multiple partners
- ▶ d Strongly or moderately recommend for all pregnant patients
- ▶ e Strongly or moderately recommend for non-pregnant patients who are sexually active with no previous HIV testing

Location of most recent HIV test by patient report (N=534)



Evaluation of Efficacy of Educational Resources Dissemination and Impact on Providers' Knowledge, Attitude and Practice

- ▶ ACOG conducted survey to determine ob-gyns ' characteristics, testing and knowledge practices regarding HIV screening
- ▶ 66% of respondents who see pregnant and non-pregnant patients considered 1-5% of their non-pregnant patients to be at high risk for HIV
- ▶ 74% reported that they provide pretest counseling before HIV testing
- ▶ 85% reported that they provide post test counseling after HIV testing
- ▶ Majority of ob-gyns' surveyed would strongly recommend HIV testing for non-pregnant patients with risk factors and over 1/3 would strongly recommend HIV testing for sexually active patients and those planning a pregnancy

Percentage of Obstetrician–Gynecologists Who Report That They Would Strongly Recommend HIV Testing to a Pregnant in Each Case

	Pregnant Patients	Non-pregnant Patients
Current injection drug user	99.3	97.9
Past injection drug user	98.7	92.8
Reports unprotected sex with multiple partners	96.4	85.9
History of blood transfusion between 1978 and 1985	91.9	77.6
Currently being treated for STI	85.4	72.5
Any history of blood transfusion	76.4	47.4
Patient tested for HIV within past 6 months with negative results	45.8	15.1
No specific risk other than pregnancy identified	56.2	–
Planning a pregnancy	–	35.0
Sexually active with no previous HIV testing	–	34.2

HIV, human immunodeficiency virus; STI, sexually transmitted infection.