

Partner Counseling and Referral Services in North Carolina, USA—Lessons from an U.S. Experience

JoAnn Kuruc, MSN, RN

University of North Carolina at Chapel Hill, NC USA

Acute HIV Program

UNC

Cynthia Gay
Joseph Eron
Mike Cohen
Peter Leone
David Margolis
Steve Beagle
Monica Jimenez

NC STAT Program

NC Dept. of Health and Human Services

Victoria Mobley
Jacqueline Clymore
Evelyn Foust
Rhonda Ashby
Myra Brinson (NC State Laboratory of Public Health)
John Barnhart & Wallace Lambert (Surveillance)
Erika Samoff
NC Disease Intervention Specialist (DIS)

Screening and Tracing Active Transmission STAT Program

- ▶ Initiated in 2002
- ▶ Screened for Acute HIV (AHI) – tested all HIV Ab negative tests for HIV RNA
- ▶ Implemented expedited partner services and partner notification
 - ❑ Interview new AHI case within 72 hours of assignment
 - ❑ Most clients have not been post-test counseled
 - ❑ Partner notification narrowed to partners within past eight (8) weeks
 - ❑ Highest priority
 - ❑ DIS are to offer transportation to the first ID appointment
 - ❑ Re-interview advised

Pilcher CD, et al. NEJM 2005

Pilcher CD, et al. JAMA 2002

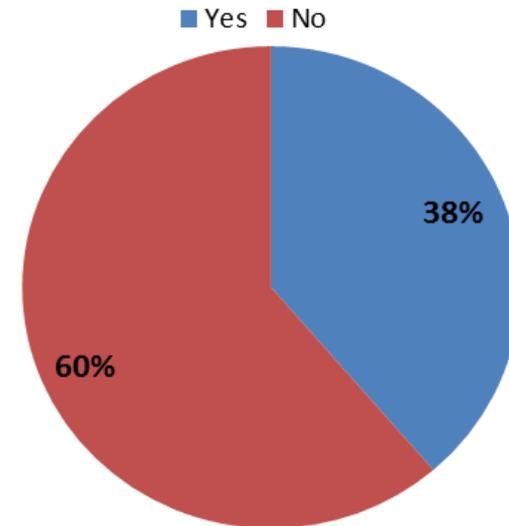
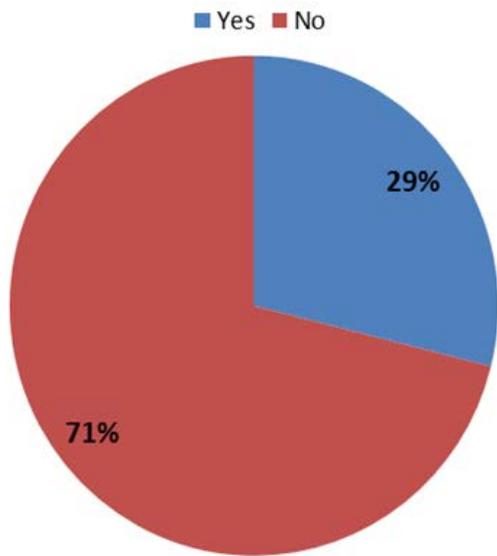
Kuruc JD, et al. JAIDS 2016

2013 – 2015 Partner Services Outcomes



Percentage of acute cases that were names as a partner by PCRS in the past year

Percentage of Acute HIV Infections with Sexually Transmitted Diseases Co-infection



McCoy, SI, et al SexTranmDis 2009
Cope, AB, et al SexTranmDis 2014

Hurt CB, et al, J Acquired Imm Def 2012

PCRS data for 2015

- ▶ There were 83 cases identified
- ▶ 212 partners initiated (2.6 per AHI case)
- ▶ 61 were previous positive (29%)
- ▶ 88 partners tested (42% tested) 66 negative (75%)
 - 5 were acute infections (6%)
 - 17 new established infections (19%)
- ▶ 30 were diagnosed with STD at diagnosis (34%) 9 GC and 10 syphilis (63% of STD/23% of AHI)
 - 8 Chlamydia (27%/10%)
 - 3 dual Syphilis and GC (10%/4%)

Demographic a of persons diagnosed with acute HIV infection, by testing facility for 2015

<i>Characteristic</i>	2015 State Lab AHI		2015 Community AHI	
	n or median	% or IQR	n or median	% or IQR
<i>Age at diagnosis</i>				
≤25 years	21	48%	20	51%
>25 years	23	52%	19	49%
Median age (years)	26	23, 31	25	21,34
<i>Race</i>				
White, non-Hispanic	11	25%	13	33%
Black, non-Hispanic	30	70%	25	64%
Hispanic/Other	3	5%	1	3%
<i>Gender</i>				
Male	37	84%	34	87%
Female	6	14%	5	13%
<i>HIV Risk</i>				
MSM only	34	77%	4	10%
Bisexual	4	9%	10	26%
Heterosexual	6	14%	25	64%

Lessons Learned

- ▶ DIS Interviews - effective for accurate risk assessments
- ▶ AHI predictive of the epidemic in NC
- ▶ Contact Tracing
 - Effective for named partners
 - Internet hook up – restrictive access to these forums make partner identification and/or notification challenging and at times impossible
- ▶ Contact testing
 - Notification by AHI person effective for follow up testing
 - Failure to name partner to DIS disrupts process and does not permit completion of partner notification process
- ▶ HIV notification must be done in person only