

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statement on screening for Human Immunodeficiency Virus (HIV). It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from November 20, 2018 to December 26, 2018. The Task Force welcomes your comments.

## Screening for Human Immunodeficiency Virus

The Task Force issued a **draft recommendation statement** on *Screening for Human Immunodeficiency Virus (HIV)*. The Task Force recommends screening for HIV for all

people ages 15 to 65 and all pregnant women. Younger adolescents and older adults at increased risk for HIV should also be screened.

### What is human immunodeficiency virus (HIV)?

HIV is a virus that attacks cells that help the body fight infection. This makes a person vulnerable to other infections and diseases. HIV is spread mainly through having sex without a condom or sharing drug needles with someone who has HIV. Less commonly, a woman with HIV can transmit the virus to her baby.

### Facts about Human Immunodeficiency Virus

More than 1.1 million people in the U.S. are living with HIV today and 1 in 7 do not know they have it. After an initial flu-like illness, HIV usually does not cause any symptoms for several years.

People can reduce their chance of getting HIV by avoiding certain behaviors, such as having sex without condoms or injecting illicit drugs.

For people who already have HIV, it is important that they begin treatment with antiretroviral therapy (ART), a combination of medicines that reduce the amount of virus in the blood and the body. Starting ART early, before symptoms appear, reduces the chance of developing acquired immunodeficiency syndrome (AIDS, the final stage of HIV infection), having AIDS-related complications, or dying of AIDS. It also reduces the chance that a person with HIV will pass the virus to someone else. Treating pregnant women dramatically reduces the chances that the virus will be passed to the baby.

Today, people with HIV can live healthier and longer lives. There is no cure for HIV, but it can be managed.

### Facts about Screening for Human Immunodeficiency Virus

Before testing, it is important that clinicians inform their patients that they are recommending an HIV test and discuss what a positive or negative result may mean.

The Task Force recommends using HIV tests that are approved by the Food and Drug Administration (FDA). There are two types of HIV tests. One test involves taking a blood sample. The newest type of blood test looks for two types of elements that can identify an infection with HIV: antigens and antibodies. The second test, called a rapid test, is taken either from a finger prick or a mouth swab. As the name implies, the test provides results quickly - within 30 minutes or less. If this test is positive, then the full blood test is done to confirm the results. Both of these tests are very accurate.

## Potential Benefits and Harms of Screening for Human Immunodeficiency Virus

The Task Force looked at evidence on the potential benefits and harms of screening for HIV infection.

The Task Force found strong evidence that screening for HIV in people ages 15 to 65 and pregnant women has many benefits. Screening is also beneficial for people younger than 15 and older than 65 who are at increased risk. Screening informs people who may not otherwise have signs and symptoms if they have the infection. People with HIV who start treatment early have a better chance of staying healthy. Treatment can also reduce their chances of passing the infection to other people.

The Task Force found that the potential harms of screening for HIV are small. False-positive results, a result showing that a person is infected when they are not, are rare. ART is associated with short-term harms, including side effects, but many of these may go away over time. For people who experience side effects, a different combination of ART medicines can be used.

Long-term use of some ART medicines may increase the risk of heart disease and other health problems, but the Task Force found that this risk is small.

The Task Force did not find enough evidence to recommend how often people should be screened and refers to the Centers for Disease Control and Prevention for its screening guidelines.

## The Draft Recommendations on Screening for Human Immunodeficiency Virus: What Do They Mean?

Here are the Task Force's draft recommendations on screening for HIV. They are based on the quality and strength of the evidence about the potential benefits and harms of screening for this purpose. They are also based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force issues a **Grade A**, it recommends screening because it has more potential benefits than harms.

Before you send comments to the Task Force, you may want to read the [draft recommendation statement](#). The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An [evidence document](#) provides more detail about the scientific studies the Task Force reviewed.

- 1 The USPSTF recommends that clinicians *screen* for HIV infection in adolescents and adults ages 15 to 65 years. Younger adolescents and older adults who are *at increased risk* should also be screened. **(A Recommendation)**
- 2 The USPSTF recommends that clinicians screen all pregnant women for HIV, including those who *present in labor or at delivery* whose HIV status is unknown. **(A Recommendation)**

## Notes

- 1 *screen*  
A test to see whether a person who does not have any signs or symptoms of the disease is infected with HIV.  
  
*at increased risk*  
People at increased risk for HIV include:
  - Men who have sex with men
  - People who inject drugs
  - People who have anal sex without a condom
  - People who have sex with partners whose HIV status is unknown and do not always use condoms
  - People who exchange sex for drugs or money
  - People who have sexually transmitted infections
  - People who have sexual partners who are HIV positive or at high risk for HIV
- 2 *present in labor or at delivery*  
Coming to the hospital or clinic while in labor or about to give birth.

## What is the U.S. Preventive Services Task Force?

The Task Force is an independent, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a **draft recommendation statement**. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the [Task Force Web site](#).

USPSTF Recommendation Grades	
Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

## Click Here to Learn More about HIV

-  **HIV Basics**  
(HIV.gov)
-  **Learn About HIV**  
(Centers for Disease Control and Prevention)
-  **Get Tested for HIV**  
(Centers for Disease Control and Prevention)
-  **HIV Testing**  
(National Institutes of Health)

## Click Here to Comment on the Draft Recommendation



The Task Force welcomes comments on this draft recommendation.



Comments must be received between November 20, 2018 and December 26, 2018.



All comments will be considered for use in writing final recommendations.