HIV Screening Among U.S. Physicians - Results from a National Survey

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BACKGROUND

- In 2006, the CDC recommended routine HIV screening for all patients ages 13-64 years in the U.S.

- Effective evaluation of the implementation of these recommendations requires measures of baseline HIV screening among providers

- Using a national sample of U.S. physicians, we examined the frequency and correlates of HIV screening among a sample of U.S. physicians in 2000

METHODS

- Surveys mailed to a random sample of 7,300 U.S. physicians who:
  - Specialized in Obstetrics/Gynecology, internal medicine, family/general practice, emergency medicine, or pediatrics
  - Spent at least 50% of their time in direct patient care
  - Cared for patients between the ages of 13 and 60 years old

- Physicians were asked, "Which asymptomatic patients do you screen for HIV?" with Yes/No responses for males, non-pregnant females and pregnant females

- We defined HIV screening as physicians reporting HIV screening for either male or non-pregnant female patients

RESULTS

- 4,133 physicians returned a completed survey for an adjusted completion rate of (70.2%)

- 138 (3.3%) did not answer questions regarding HIV screening and were excluded from analysis

- Among the 3,995 physicians who responded to the questions regarding HIV screening, 1,133 (28.4%) reported offering HIV testing to their asymptomatic cases

- Female, non-White, and physicians practicing in large cities or public clinics were more likely to report HIV screening (Figure)

- Emergency Medicine and Pediatric specialists were less likely to report HIV screening (Figure)

- Important factors associated with HIV screening varied by region of physician practice (Table)

Figure. Proportion of U.S. Physicians Surveyed who Reported HIV Screening Asymptomatic Male or Non-Pregnant Female Patients
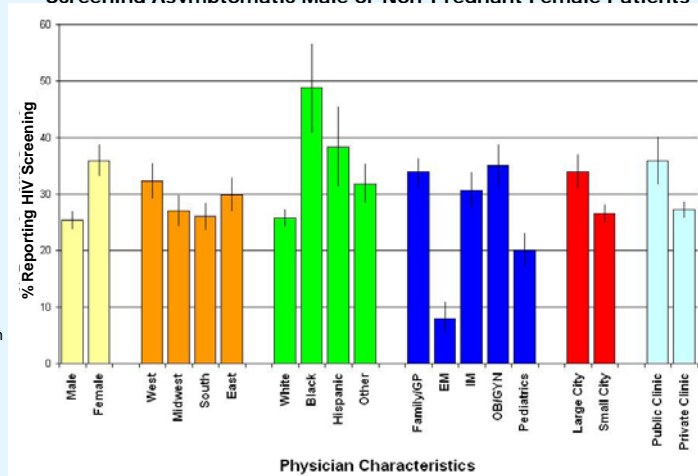
CONCLUSIONS

- In 2000, only approximately a quarter of U.S. physicians reported screening asymptomatic patients for HIV

- HIV screening rates varied substantially by practice setting and physician characteristics

- Given higher screening rates in larger cities and public clinics, U.S. providers may be offering screening based on perceived local prevalence of HIV and risks of the populations they serve

- HIV screening in Emergency Departments remains a missed opportunity for intervention

- We could not evaluate what screening approach (i.e., routine or risk-based screening) was used among providers who reported screening, although risk-based likely predominated

- These data represent baseline levels of HIV screening for which to evaluate the uptake of 2006 CDC recommendations for universal HIV screening

Table. Multivariate Odds Ratios for HIV Screening Asymptomatic Male or Non-Pregnant Female Patients Among U.S. Physicians, Stratified by Practice Region

Physician Characteristic	U.S. OR (95% CI)	West OR (95% CI)	Midwest OR (95%CI)	South OR (95%CI)	East OR (95%CI)
Sex					
Male	1.0	1.0	1.0		1.0
Female	1.66 (1.39-2.00)	1.61 (1.10-2.37)	2.27 (1.58-3.26)		2.19 (1.45-3.31)
Race					
White	1.0	1.0	1.0	1.0	1.0
Black	2.21 (1.50-3.28)	2.06 (0.78-5.47)	4.73 (1.82-12.33)	1.58 (0.88-2.85)	3.46 (1.41-8.49)
Hispanic	1.50 (1.04-2.17)	2.20 (1.02-4.77)	1.05 (0.40-2.71)	1.88 (1.10-3.22)	1.36 (0.49-3.80)
Other	1.06 (0.84-1.34)	1.35 (0.88-2.08)	0.68 (0.40-1.15)	1.11 (0.71-1.75)	1.33 (0.81-2.16)
Specialty					
Family/General Practice	1.0	1.0	1.0	1.0	1.0
Emergency Med	0.18 (0.12-0.28)	0.11 (0.04-0.32)	0.27 (0.13-0.54)	0.20 (0.09-0.41)	0.16 (0.05-0.47)
Internal Med	0.68 (0.55-0.86)	0.52 (0.33-0.83)	0.77 (0.49-1.23)	0.85 (0.58-1.26)	0.81 (0.48-1.36)
OB/GYN	1.01 (0.79-1.30)	0.97 (0.59-1.58)	1.54 (0.93-2.54)	0.90 (0.58-1.40)	1.06 (0.59-1.90)
Pediatrics	0.44 (0.34-0.50)	0.41 (0.25-0.70)	0.43 (0.25-0.75)	0.45 (0.28-0.74)	0.59 (0.33-1.07)
Population density					
Small City	1.0		1.0		
Large City	1.37 (1.13-1.67)		2.10 (1.36-3.23)		
Clinic type					
Public Clinic	1.0			1.0	
Private Clinic	0.63 (0.49-0.80)			0.52 (0.35-0.76)	