



INFANT TESTING: LATEST AND ACCESS

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SA HIV Clinicians Society Conference



**NATIONAL INSTITUTE FOR
COMMUNICABLE DISEASES**

Division of the National Health Laboratory Service



CONTENT

Infant testing: LATEST

Birth

10-week

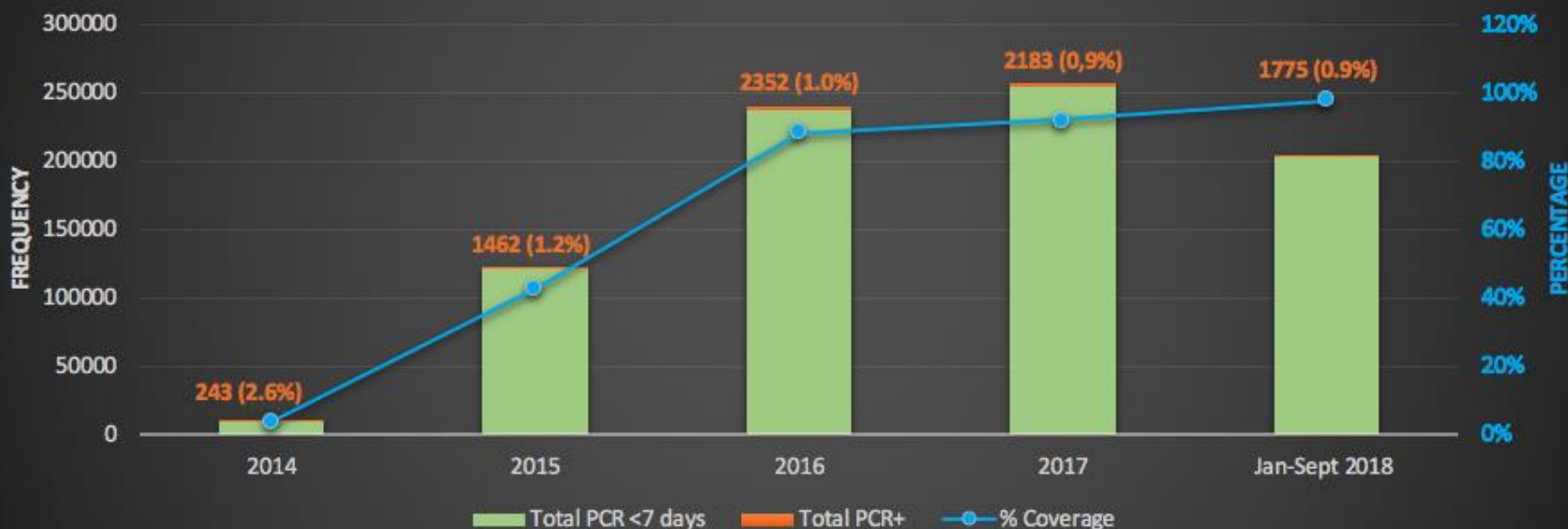
18 month

Infant testing: ACCESS

Results for Action reports

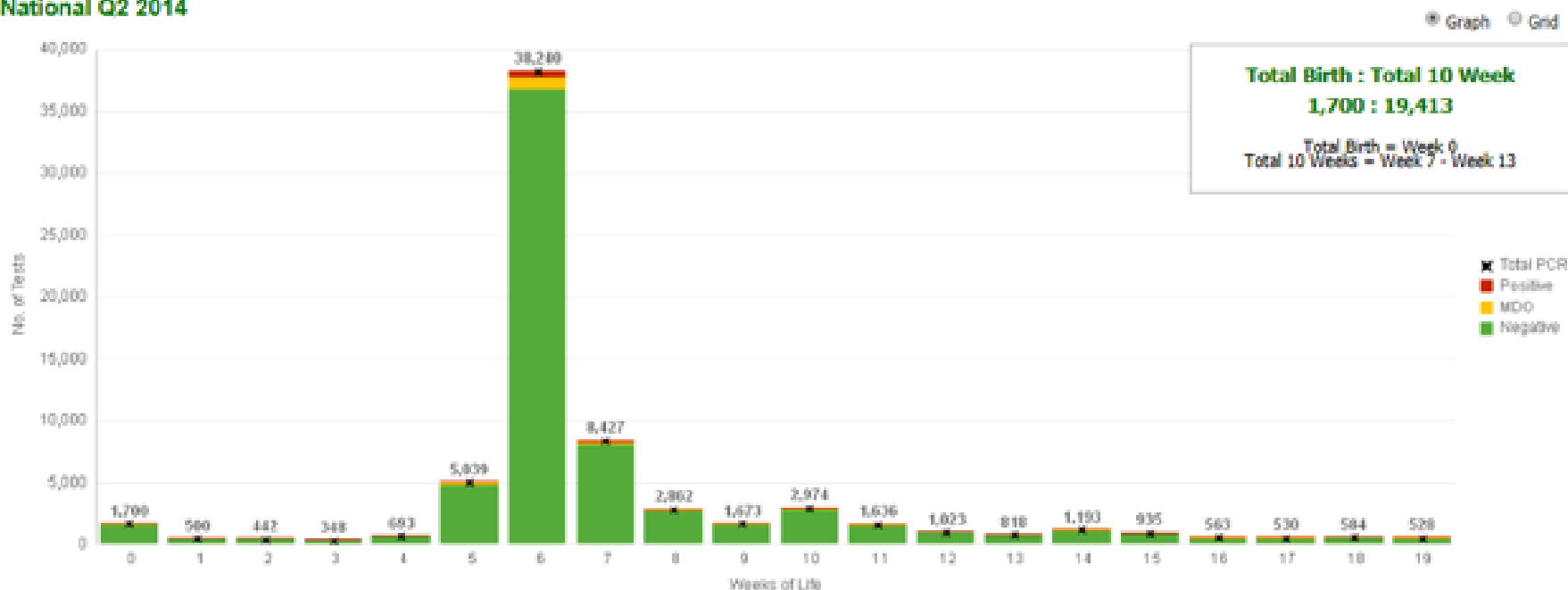
Birth testing of HIV-exposed neonates (<7days)

Birth HIV PCR Testing in RSA, 2014-2018



HIV PCR TESTING IN THE FIRST 20 WEEKS OF LIFE 2014

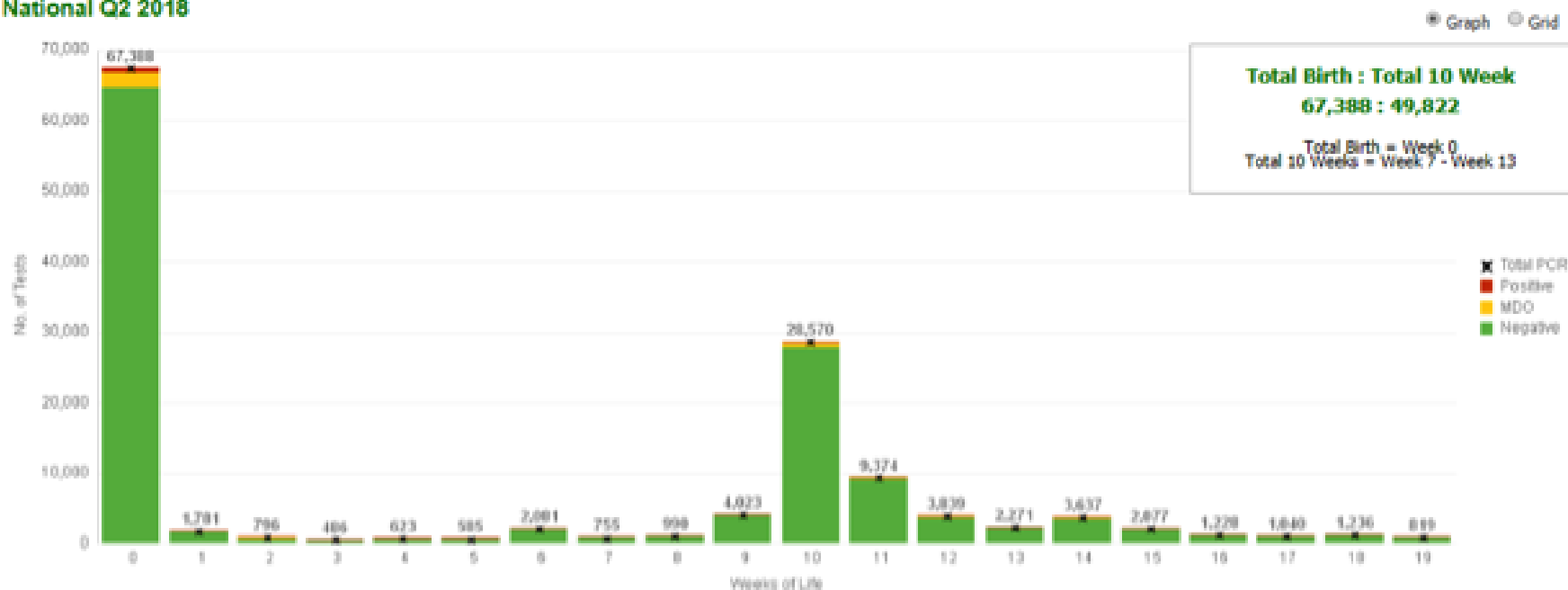
National Q2 2014



HIV PCR TESTING IN THE FIRST 20 WEEKS OF LIFE 2018

Return Rate = 74%

National Q2 2018





18 MONTH HIV TESTING

In guidelines since 2004

Poorly implemented despite co-inciding with EPI visit
(Testing post cessation of breastfeeding – poor)

Postnatal transmission = majority postnatal

Poor linkage to care + 18-mo testing coverage =

UNDIAGNOSED HIV-INFECTED CHILDREN



DIAGNOSTIC DIFFICULTIES

Indeterminate HIV PCR results

First **HIV PCR positive** and cART initiated
confirmatory HIV PCR negative
or VL undetectable

Contributed to by **maternal** ARVs (*in utero* & breastfeeding)
and **infant** prophylaxis

Dolutegravir – faster VL lowering ????

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HIV

TB

SASCM

NICD

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HIV PCR Results for Action Report

RPT01002

Why?

- Rapid **follow-up of all HIV PCR results** for linkage to care, repeat testing or 10-week PCR test reminder

What?

- **Excel** spreadsheet with 5 worksheets
- Zipped & **password**-protected to maintain confidentiality

Where?

- From **NHLS** Lab data - Data **Warehouse** – **Email** inbox

How?

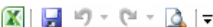
- **Online** application via Self Service Portal

When?

- Every **Monday**

HIV PCR Results for Action Report

A	B	C	D
1	Strictly Confidential	 NATIONAL INSTITUTE FOR COMMUNICABLE DISEASES Division of the National Health Laboratory Service	
2	Terms & Conditions for using this e-Report		
3			
4	1. The Recipient agrees to keep the Results secure and confidential at all times. Confidentiality includes, but is not limited to the properties, characteristics, content and composition of the Results. All information relating to the nature and processes of the Results in whatever form must also be treated as confidential. The identity and particulars of the Patient must be protected and kept confidential at all times. Any publications of the Results to third parties must not divulge any details of the Patient unless consent has been obtained for such use from the Patient. Third Parties mean a party other than any health practitioner involved in the treatment of the patient.		
5	2. The Recipient shall use its reasonable endeavours to minimise the risk of unauthorised disclosure or use of the Results or identity and particulars of the Patient and undertakes to take proper care and all reasonable measures to protect the confidentiality of the Patient's information using a standard of care which is no less than that standard of care which it applies for the protection of its own Confidential Information.		
6	3. The Recipient shall indemnify and hold NHLS and/or all of its directors, officers, employees and representatives harmless from and against any claim, demand, cause of action, liability, loss or expense arising:		
	3.1. by reason of Recipient's actual or asserted failure to comply with any law, ordinance, regulation, rule or order in disclosing the Results or identity and particulars of the Patient to any third party. This includes, but not limited to, fines or penalties by government authorities;		
7	3.2. from injury to or from damage to or loss of property of the Patient arising directly or indirectly out of this unauthorized disclosure of the Results or identity and particulars of the Patient to third parties.		
8	4. The Recipient's indemnity obligation shall include the duty to reimburse any attorney's fees and expenses incurred by NHLS for legal action to enforce or defend the Recipient's indemnity obligations.		
9	NHLS shall not be responsible for any misrepresentation and/or misinterpretation that may arise from use of this information and/or data.		
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	Non-compliance may lead to legal action.		
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Cover Page / HIV PCR Results for Action / HIV PCR Negative Results / Previous HIV PCR Tests			



T1																		
	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S
1	District	Sub District	Facility	Ward	Folder No	Patient Surname	Patient Name	Patient DOB	Patient Address	Patient Tel No	Patient Age	Taken Date	Reviewed Date	Episode No	CDW Identifier	RTHB No	HIV PCR Result	Total No. of Previous HIV PCR Tests
3	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Ward 36	GT*****	*****	*****	dd-mmm-yyyy			X months X days	13-MAR-2017	14-MAR-2017	HG*****	XXXXXXXXXX		Positive	
4	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Dermatology Clinic	GT*****	*****	*****	dd-mmm-yyyy			X months X days	17-MAR-2017	19-MAR-2017	HG*****	-1		Positive	
5	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Dermatology Clinic	GT*****	*****	*****	dd-mmm-yyyy			X months X days	17-MAR-2017	19-MAR-2017	HG*****	-1		Positive	
6	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Labour Ward Nursery	GT*****	*****	*****	dd-mmm-yyyy			X months X days	09-MAR-2017	12-MAR-2017	HG*****	XXXXXXXXXX		Positive	
7	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Harriet Shezi Clinic	GT*****	*****	*****	dd-mmm-yyyy			X months X days	16-MAR-2017	17-MAR-2017	HG*****	XXXXXXXXXX		Positive	
8	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Ward 18	GT*****	*****	*****	dd-mmm-yyyy			X months X days	15-MAR-2017	17-MAR-2017	HG*****	XXXXXXXXXX		Positive	
9	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Coronary Care Unit	GT*****	*****	*****	dd-mmm-yyyy			X months X days	10-MAR-2017	13-MAR-2017	HG*****	XXXXXXXXXX		Positive	
10	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Ward 31	GT*****	*****	*****	dd-mmm-yyyy			X months X days	13-MAR-2017	14-MAR-2017	HG*****	XXXXXXXXXX		Positive	
11	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Ward 59	GT*****	*****	*****	dd-mmm-yyyy			X months X days	18-MAR-2017	19-MAR-2017	HG*****	-1		Positive	
12	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Unknown	GT*****	*****	*****	dd-mmm-yyyy	NS		X months X days	13-MAR-2017	15-MAR-2017	HG*****	XXXXXXXXXX		Positive	
13	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Ward 66	GT*****	*****	*****	dd-mmm-yyyy			X months X days	06-MAR-2017	14-MAR-2017	HG*****	XXXXXXXXXX		Positive	
14	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Ward 66	GT*****	*****	*****	dd-mmm-yyyy			X months X days	15-MAR-2017	17-MAR-2017	HG*****	XXXXXXXXXX		Positive	1
15	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Ward 36	GT*****	*****	*****	dd-mmm-yyyy			X months X days	13-MAR-2017	15-MAR-2017	HG*****	XXXXXXXXXX		Indeterminate	
	City of Johannesburg Metro	Johannesburg D	Chris Hani Baragwanath Hosp	Harriet Shezi Clinic	GT*****	*****	*****	dd-mmm-yyyy			X months X days	14-MAR-2017	16-MAR-2017	HG*****	XXXXXXXXXX		Indeterminate	



Province	District	Sub District	Facility	Ward	Folder No	Patient Surname	Patient Name	Patient DOB	Sex	Patient Address	Patient Tel No
KwaZulu-Natal	uMgungundlovu	The Msunduzi	East Boom CHC	Ward Not Stated	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	F		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Edendale Hospital	Haart Clinic	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	F		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Edendale Hospital	7f Paediatric Ward	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	F		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Esigodini Clinic	Not Applicable	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	M		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Masons Clinic	Not Applicable	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	U		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Willowfountain Clinic	Not Applicable	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	M		
KwaZulu-Natal	uMgungundlovu	uMngeni	Mpophomeni Clinic	Ward Not Stated	UNKNOWN	xxxxxx	xxxxxx	DD- MMM-YY	M		
KwaZulu-Natal	uMgungundlovu	Impendle	Gomane Clinic	Not Applicable	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	F		
KwaZulu-Natal	uMgungundlovu	Richmond	Ndalen Clinic	Not Applicable	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	U		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Doris Goodwin Hospital	Parkhome Clinic	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	M		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Edendale Hospital	3f Obstetrics & Gynaecology Ward	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	M		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Edendale Hospital	D5 Ward	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	F		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Edendale Hospital	3n Icu	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	F		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Edendale Hospital	Paediatric Opd	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	M		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Edendale Hospital	Paediatric Opd	UNKNOWN	xxxxxx	xxxxxx	DD- MMM-YY	M		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Edendale Hospital	7f Paediatric Ward	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	F		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Edendale Hospital	3c Obstetrics & Gynaecology Ward	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	M		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Grey's Hospital	Neonatal Icu	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	U		
KwaZulu-Natal	uMgungundlovu	The Msunduzi	Scottsville Clinic	Ward Not Stated	xxxxxx	xxxxxx	xxxxxx	DD- MMM-YY	U		



Patient Age	Taken Date	Reviewed Date	Episode No	CDW Identifier	RTHB No	HIV PCR Result	Total No. of Previous HIV PCR Tests
1 year 1 month 12 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Positive	
5 months 27 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Positive	4
21 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Positive	
2 months 23 days	DD-MMM-YY	16-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Positive	
1 year 2 months 16 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Positive	1
9 months 13 days	DD-MMM-YY	18-OCT-2016	xxxxxxxxxx	-1		Positive	
1 year 2 months 7 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Positive	2
1 year 3 days	DD-MMM-YY	20-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Indeterminate	
1 day	DD-MMM-YY	19-OCT-2016	xxxxxxxxxx	-1		Indeterminate	
37 years 11 months 25 days	DD-MMM-YY	20-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Info does not match - dbs	
Unknown	DD-MMM-YY	20-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Info does not match - dbs	
1 day	DD-MMM-YY	19-OCT-2016	xxxxxxxxxx	-1		Specimen insufficient	
3 days	DD-MMM-YY	20-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Info does not match - dbs	
7 months 4 days	DD-MMM-YY	18-OCT-2016	xxxxxxxxxx	-1		Require separate specimen	
1 year 8 months 10 days	DD-MMM-YY	19-OCT-2016	xxxxxxxxxx	-1		Require stool specimen	
10 months 16 days	DD-MMM-YY	20-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Info does not match - dbs	2
1 day	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Specimen insufficient	
1 day	DD-MMM-YY	20-OCT-2016	xxxxxxxxxx	-1		Require separate specimen	
2 months 19 days	DD-MMM-YY	18-OCT-2016	xxxxxxxxxx	-1		Unsuit: dbs card compromised	



Patient Age	Taken Date	Reviewed Date	Episode No	CDW Identifier	RTHB No	HIV PCR Result	Total No. of Previous HIV PCR Tests
4 months 10 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	1
2 months 9 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
7 months 6 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	1
4 months 8 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
7 months 2 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
2 months 17 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
1 year 1 month 7 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	1
9 months 19 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	1
3 months 8 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
2 months 16 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
8 months 14 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
1 month 24 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	1
4 months 18 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
7 months 10 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	1
2 months 12 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
1 month 13 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
6 months 10 days	DD-MMM-YY	14-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	
5 months 16 days	DD-MMM-YY	15-OCT-2016	xxxxxxxxxx	xxxxxxxxxx		Negative	



RESULTS FOR ACTION (RfA) REPORTS

1. HIV **PCR** results
2. HIV **VL** and **CD4** results
3. HIV **ELISA** results

Weekly or daily



HIV@nicd.ac.za

ACKNOWLEDGEMENTS

Paediatric HIV Surveillance Team

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meticulously tracing & caring

Funders

