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BACKGROUND

- The current vertical HIV transmission (VT) rate is <0.3% among diagnosed women living with HIV (WLHIV) in the UK; this rate excludes a few children whose status remains unknown for various reasons
- British HIV Association (BHIVA) 2012-2018 guidelines** state that **all HIV-exposed infants** should be tested at age ≤48 hours, 6 and 12 weeks with **antibody testing for seroreversion at age 18-24months** ('18-24Ab'). Even if earlier PCR tests are negative, the 18-24Ab remains important as postnatal transmission may occur (NB: 2020 guidelines recommend AB at 22-24months) www.bhiva.org/pregnancy-guidelines
- We describe current paediatric management and the follow-up status of HIV-exposed infants in the UK

METHODS

- The **Integrated Screening Outcomes Surveillance Service (ISOSS)** conducts surveillance on behalf of the **NHS Infectious Diseases in Pregnancy Screening Programme**
- ISOSS conducts UK population-level surveillance of all pregnancies in WLWH, their children, plus any children diagnosed <16years
- All HIV-exposed children are followed-up until 18-24 months to determine infection status.** Reports are triangulated with laboratory reports from PHE. We report the follow-up status of 6547 HIV-exposed children born 2012-2018, reported by December 2019

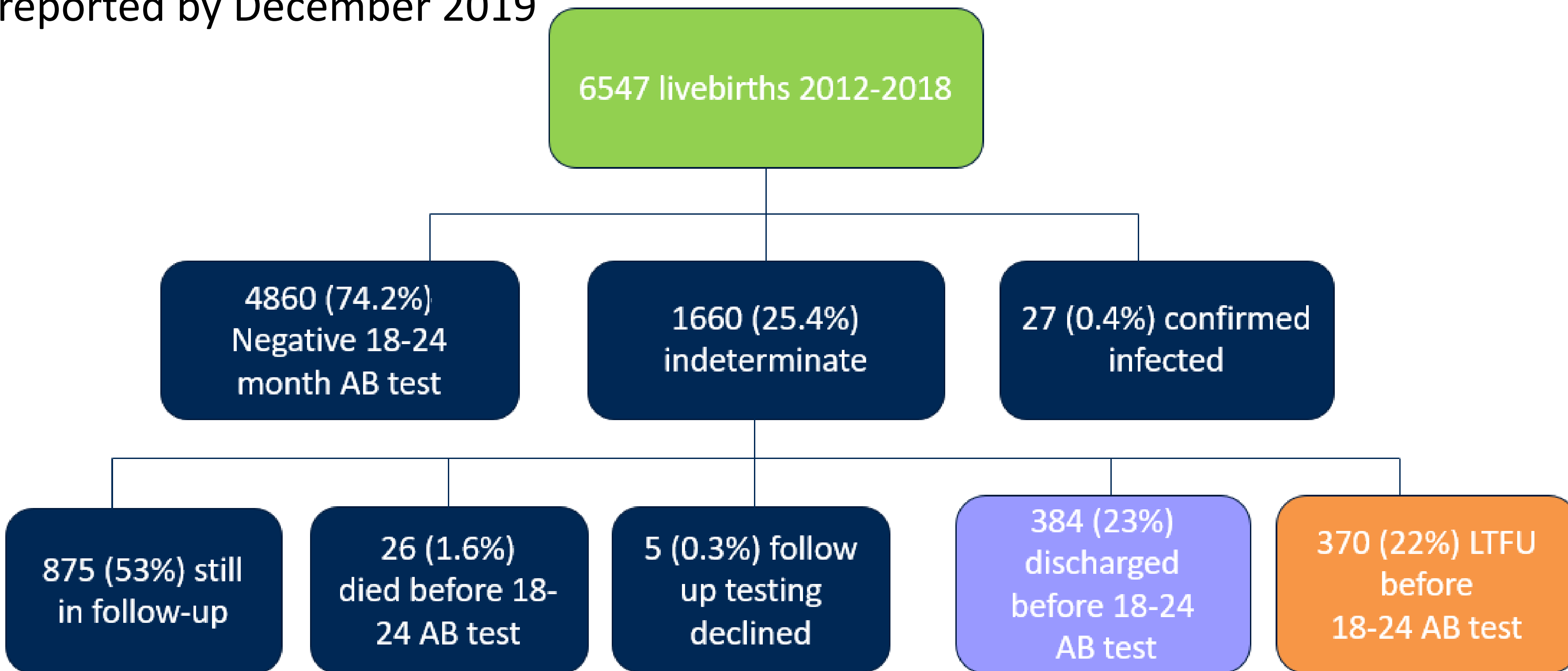


Figure 1: HIV-exposed infants born 2012-2018 in the UK

RESULTS

Overall, 4860 (74%) children were confirmed uninfected based on a negative 18-24Ab; 861 (13%) are indeterminate and in follow-up; 27 (0.4%) were confirmed infected. 370 (5.7%) infants were lost-to-follow-up (LTFU) before 18-24Ab established (Figure 1).

Infants lost to follow-up before 18-24mth AB test

Of the 370 infants LTFU with unknown infection status:

- 67/370 had only a birth PCR test:** 16/67 were reported as 'gone abroad'
- 303/370 had 6 or 12 week PCR test:** 43/303 were reported as 'gone abroad'

No change over time: 50-80 infants LTFU per year

Table 1: Regional distribution of infants LTFU <'18-24Ab'

Region	No. of infants (%)
Midlands & East of England	101 (28%)
London	138 (37%)
North	58 (16%)
South	46 (12%)
Wales/Scotland/Northern Ireland	27 (7%)

Infants discharged before 18-24 month AB test

384/6547 (6%) HIV-exposed infants were **discharged under 18 months of age.**
- 313/384 (82%) of these were discharged with a **negative antibody >18mths**

71/384 (18%) infants were **discharged based on negative PCRs only:**

- 11/71 discharged at under 12 months of age
- 40/71 discharged between 12-18 months of age
- 20/71 discharged without antibody testing

Increasing number of infants are being discharged per year with negative AB test <18 months of age

- 2012-2015: 30-50 infants/year
- 2016-2017: 60-70 infants/year

Table 2: Infants discharged based on negative AB <18-24mth

Region	No. of infants (%)
Midlands & East of England	74 (23%)
London	89 (28%)
North	50 (16%)
South	62 (20%)
Wales/Scotland/Northern Ireland	20 (6%)

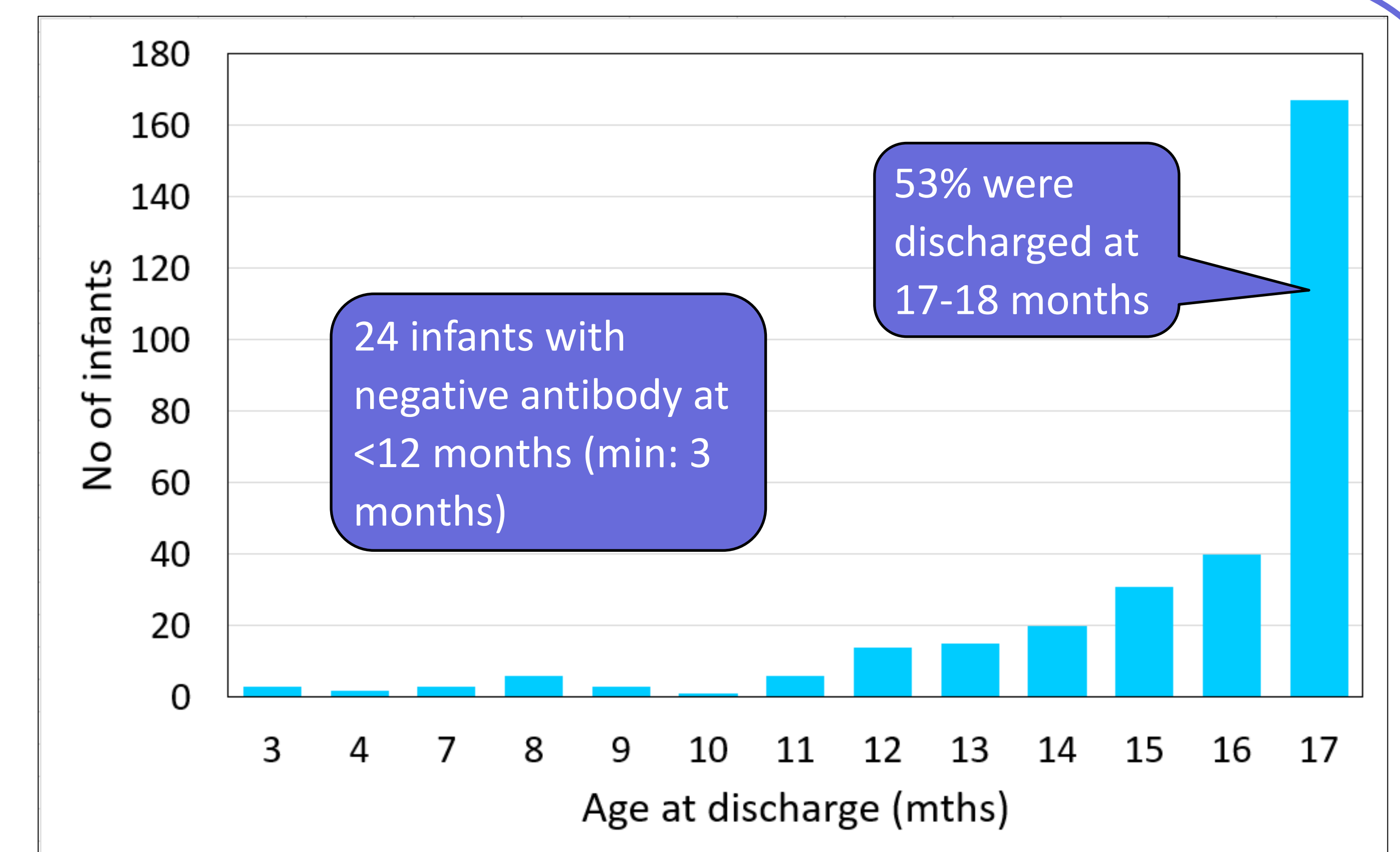


Figure 2: Infants discharged before 18-24 month AB test (n=384)

CONCLUSIONS

- Despite **well-established guidelines and pathways** for HIV-exposed infants follow-up there remains variation in practice and **deviation from BHIVA guidelines**
- Findings shown have been highlighted through **ISOSS paediatric network** and also **fed back to BHIVA and guidelines now updated**
- ISOSS** is uniquely placed to **monitor outcomes and practice** across units and regions, including the **impact of COVID-19 on clinic scheduling and attendance**
- Further work is required to investigate possibility of **inequalities and/or barriers to care in the lost to follow up group**
- Vigilance is required regarding **potential postnatal transmission**, especially in the era of supported breastfeeding in the UK. Full report to be published 2021

FUNDING AND GOVERNANCE

ISOSS is funded by Public Health Infectious Diseases in Pregnancy Screening Programme. Patient data is collected under legal permissions granted to PHE under Regulation 3 of the Health Service (Control of Patient Information) Regulations 2002

ACKNOWLEDGEMENTS

Thanks to all of the Syphilis CERP members, respondents who report to ISOSS and to the rest of the ISOSS team.

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