

Summary

HIV prevalence is increasing, with 100,000 people now living with HIV in the UK. It is a long term condition, with patients potentially on treatment for over 40 years. The cost of HIV care for the NHS in 2013 reached £750m (£1bn with social care included). HIV care faces two related challenges: first to diagnose people as early as possible in the course of their infection, second to ensure the care of those diagnosed and living long term with HIV is integrated across boundaries and co-morbidities to deliver the best outcomes for health and wealth.

Previous research includes: 1) a pragmatic cluster randomised trial in primary care showing that a training programme, implemented with established behaviour change methods, increases early identification of HIV, and 2) a non-systematic survey of models of shared care for HIV.

The following questions remain to be addressed, and are being studied in this project:

1. Outside a trial context, how cost-effective is the programme in promoting early identification of HIV?
2. Which models of shared care exist and will be effective in the new commissioning framework?
3. How cost-effective are models in improving outcomes for those with long term HIV with co-morbidities?

The project is a Phase IV implementation study using interrupted time series design with cost effectiveness analysis, across 146 east London general practices, in parallel with a systematic review and a pilot study. The results of this project will benefit patients by determining:

- 1) the real-life impact of rolling out HIV testing in general practice
- 2) the most promising models of caring for HIV in general practice.

Principal investigator: Professor Chris Griffiths, Queen Mary University of London

Start date and duration: January 2014, three years

Partners and collaborators involved: Newham Clinical Commissioning Group; London Borough of Hackney; London Borough of Waltham Forest; London Borough of Tower Hamlets.