# Update on COVID-19/HIV service disruptions, December 2021



Global HIV, Hepatitis and STI Programmes



WHO Pulse Survey/WHO HHS Department COVID-19
 Survey

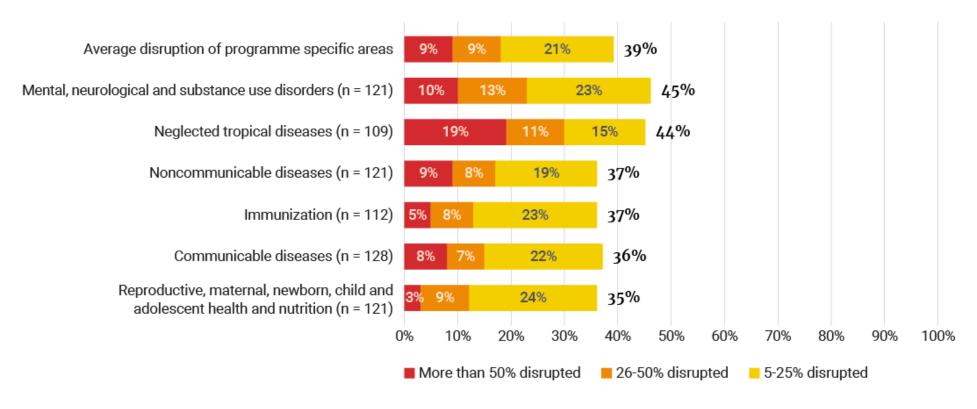
2. UNAIDS/WHO/UNICEF HIV Service Tracking Database

3. WHO HHS Department Assessment of HIV Testing Services and ART Services Disruptions in the context of COVID-19

4. WHO Global Clinical Platform for COVID-19



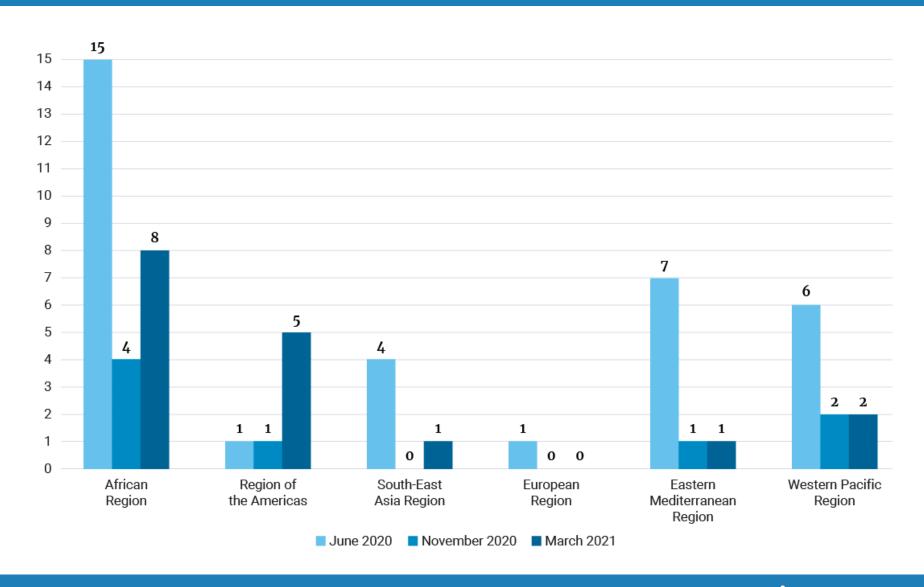
# Percentages of countries reporting disruptions across tracer service areas, January - March 2021



Denominator excludes "Not applicable" or "Do not know" responses.

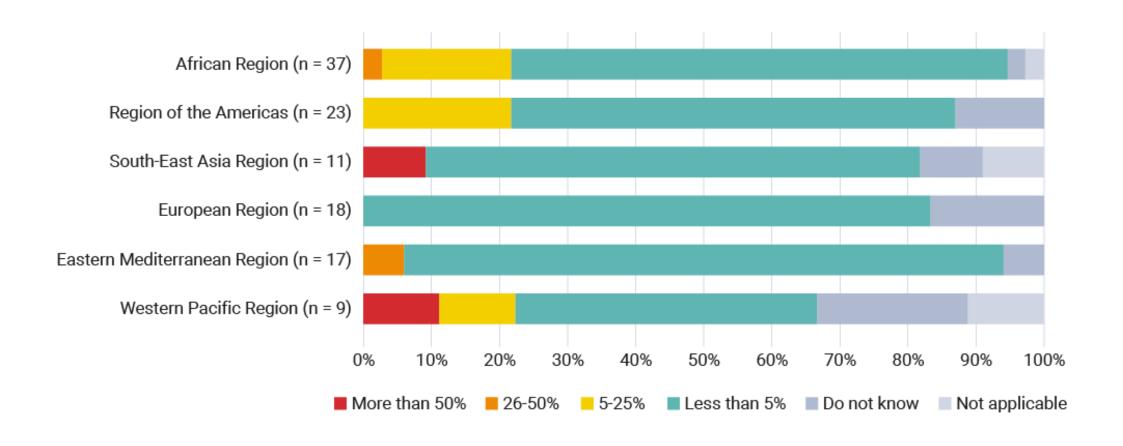


## Number of countries reporting disruption in antiretroviral therapy services in June 2020, November 2020 and March 2021



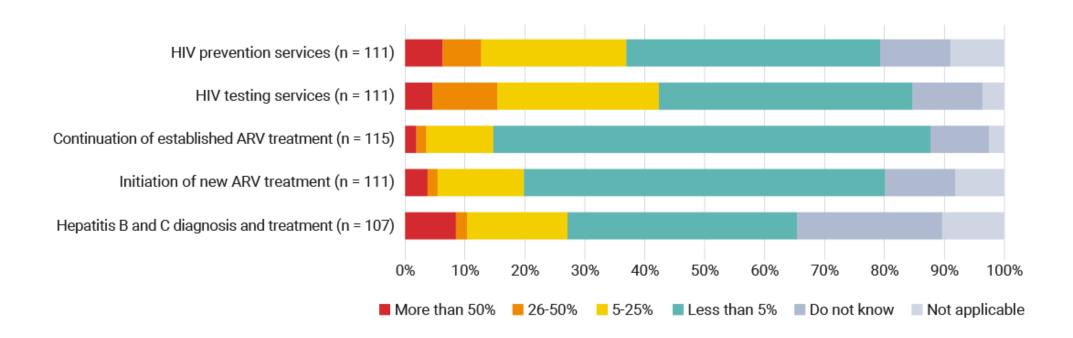


#### Disruption in antiretroviral therapy services caused by COVID-19 by WHO region, March 2021





## Disruption in other services for HIV and viral hepatitis, March 2021



PULSE survey results only: in case of exclusion of "Not applicable" or "Do not know" responses in the denominator, the percentages of countries reporting disruptions (i.e. ≥5%) are as follows: HIV testing services (49%), HIV prevention services (46%), Hepatitis B and C diagnosis and treatment (43%), Initiation of new ARV treatment (25%) and Continuation of established ARV treatment (17%).

For more information on the PULSE survey: https://www.who.int/publications/i/item/WHO-2019-nCoV-EHS-continuity-survey-2021.1.



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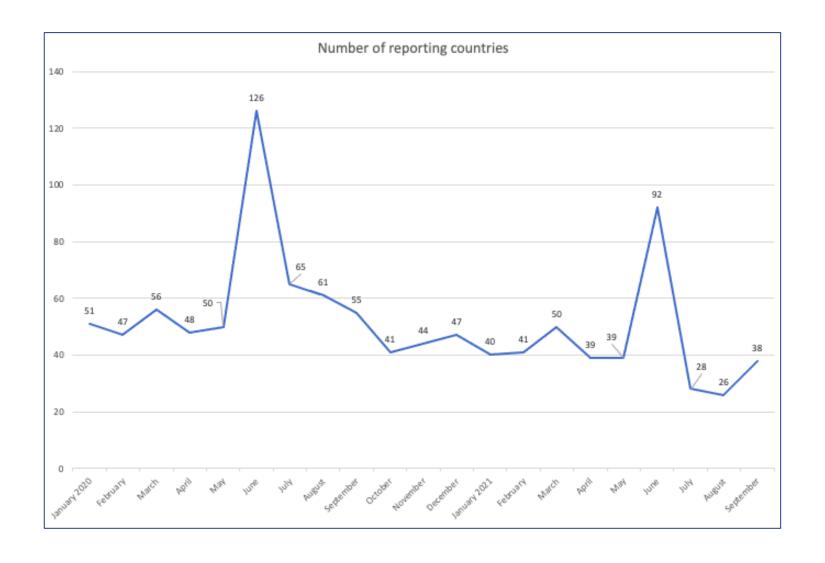
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## Number of countries providing data on disruption to any HIV services, by month, January 2020-November 2021

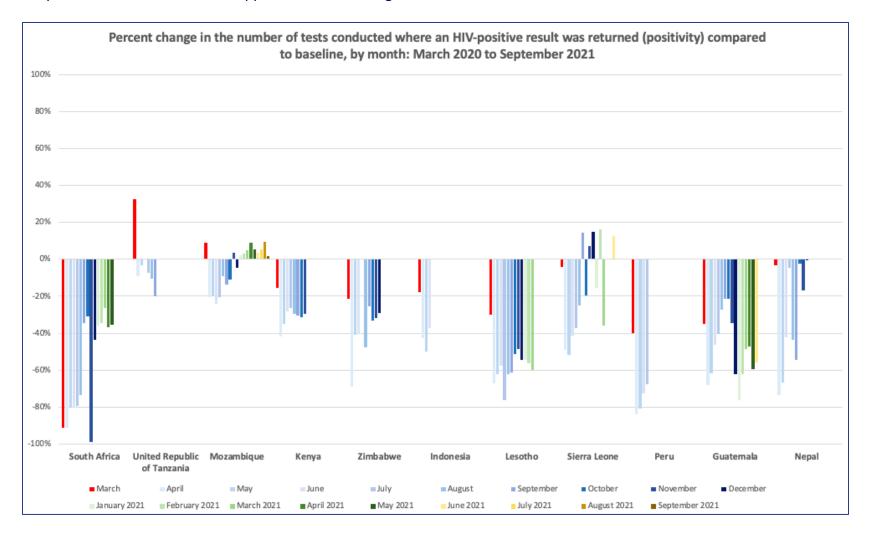




## Disruption in HIV testing services

#### HIV testing and results returned:

- Of 11 countries with available data, all experienced a reduction in the number of tests conducted where an HIV-positive result was returned (positivity).
- In Mozambique and Sierra Leone services appear to be recovering.

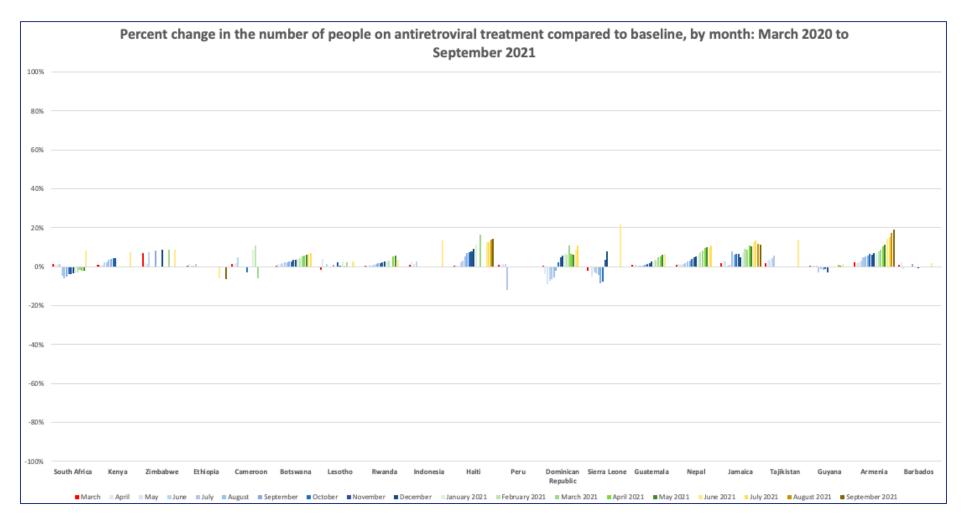




## Disruption in HIV treatment services

#### Antiretroviral treatment disruptions:

- Eight out of 22 countries had at least one month where treatment numbers were the same or dipped below the baseline months of January/February.
- Peru and Guatemala were the only countries that showed a 10% or greater decline in treatment compared with January/February.

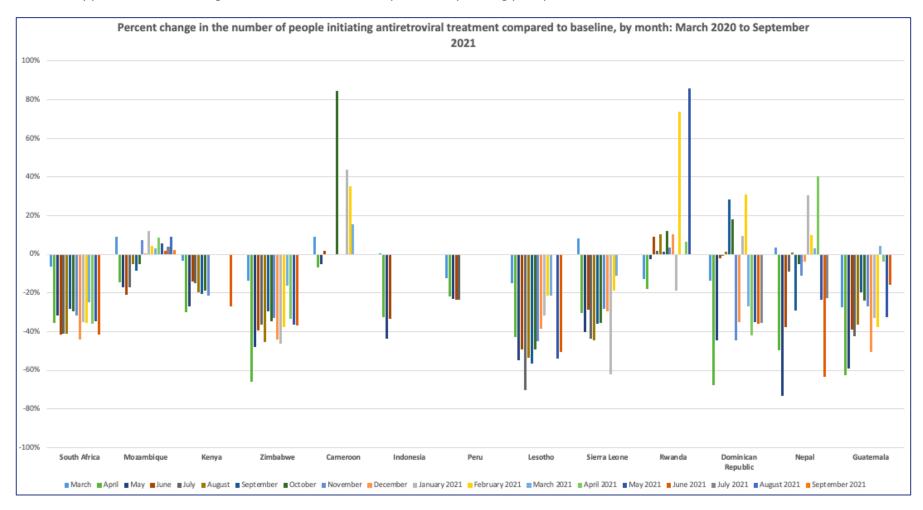


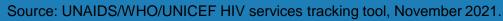


#### Disruption in HIV treatment services

#### Antiretroviral treatment initiation disruptions:

- Among the 13 countries reporting numbers of people newly initiating treatment, and meeting the inclusion criteria for analysis, all but Cameroon reported at least one month with 10% or greater decline in numbers newly initiating compared to the baseline months of January/February.
- New initiations appear to be resuming in Rwanda and Mozambique and expanding past pre-COVID Jan/Feb levels.

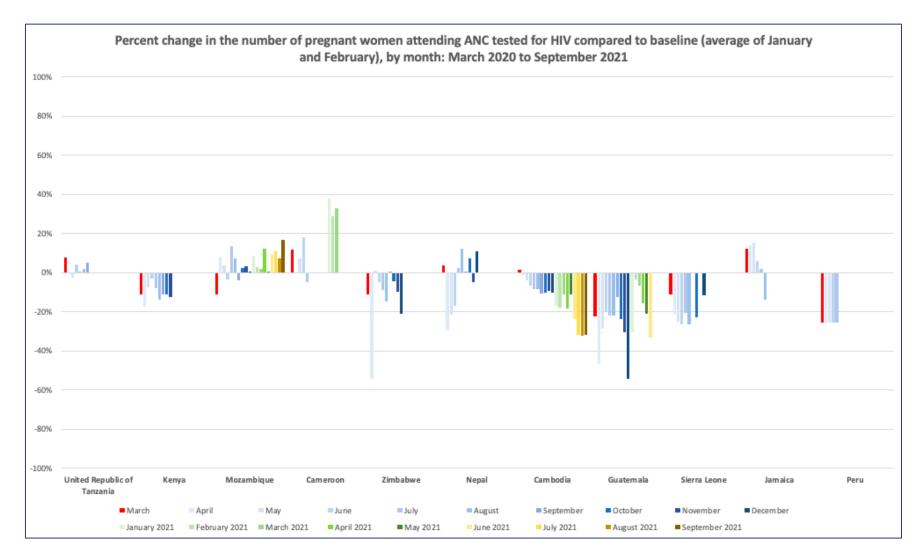






## **Disruption in PMTCT services**

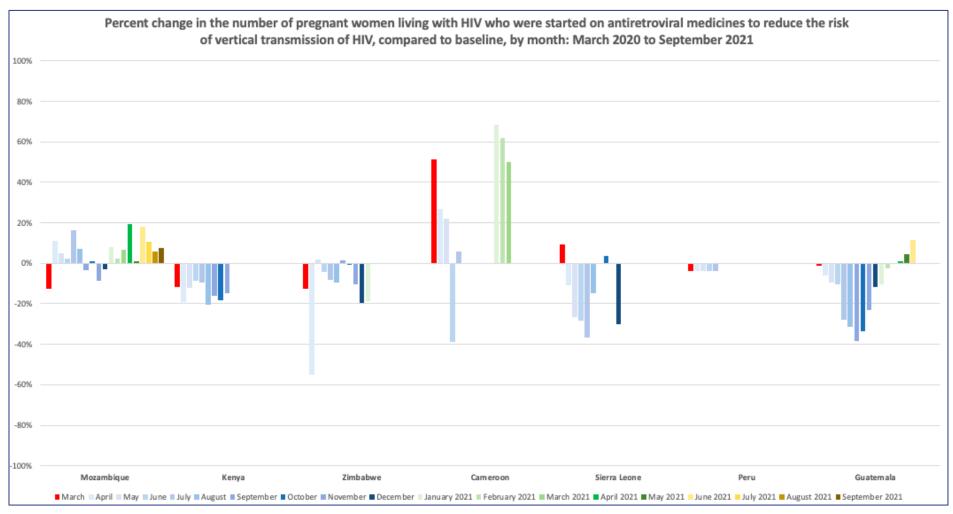
Six out of 11 countries had a 10% or greater reduction in the monthly number of pregnant women tested for HIV at antenatal clinics in March 2020





## **Disruption in PMTCT services**

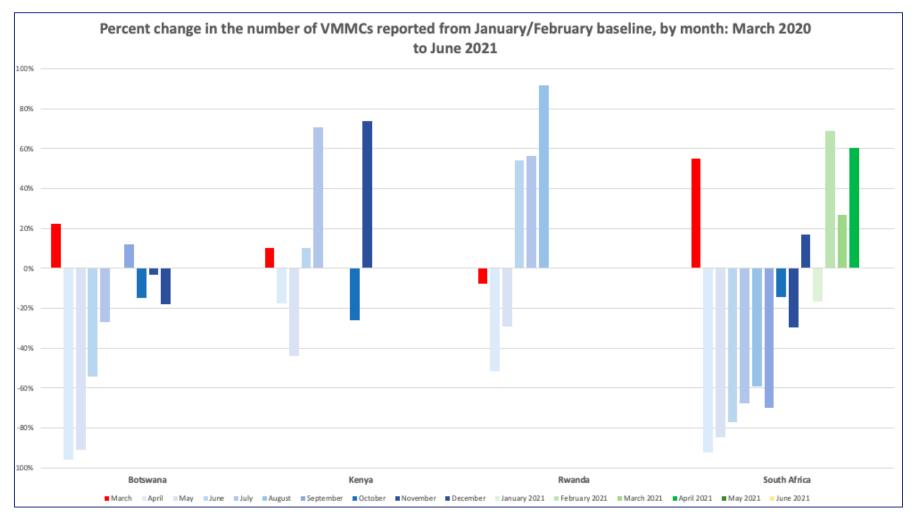
In six out of seven reporting countries there was a 10% or greater monthly reduction in women living with HIV reached with treatment during pregnancy from March 2020

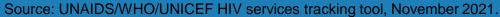




## Disruption in VMMC services

In Botswana, Kenya, Rwanda, and South Africa Voluntary Medical Male Circumcision (VMMC) services were suspended or slowed down in April/May 2020, however services are resuming



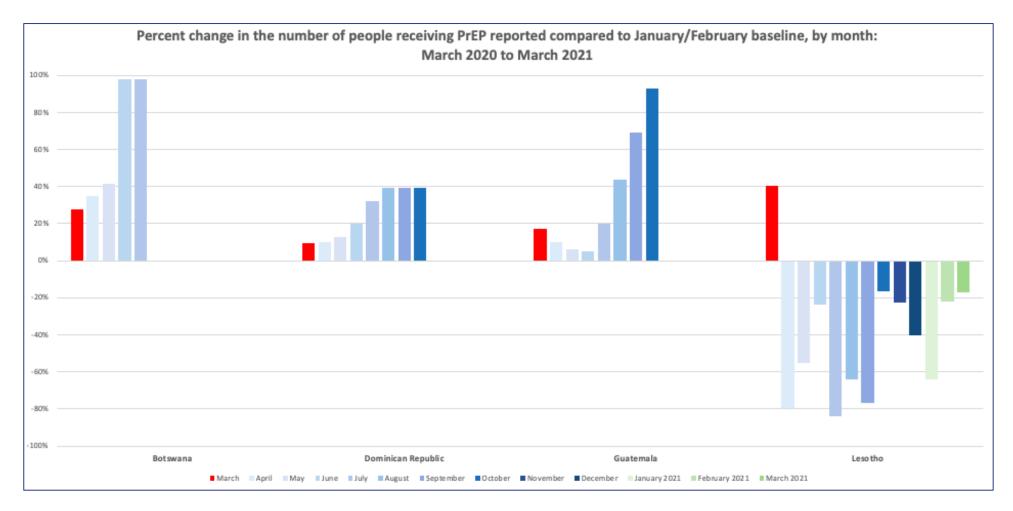






## Disruption in HIV prevention services

Of four countries with available data on the number of people who received PrEP in the previous month, only Lesotho experienced a sustained decline from April to December 2020 compared to the pre-COVID-19 baseline





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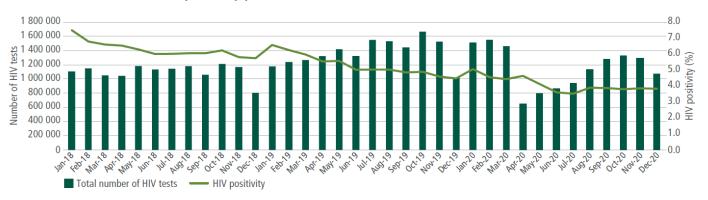
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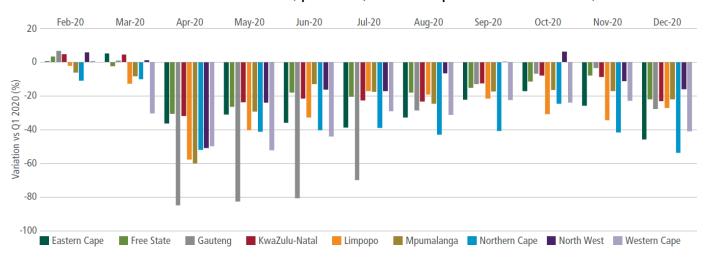
#### Disruption in HIV services: Country cases

#### Number of HIV tests and HIV positivity per month, South Africa, 2018–2020



Source: National Department of Health, South Africa

#### Variation in the number of HIV tests conducted, per month, across nine provinces in South Africa, 2020

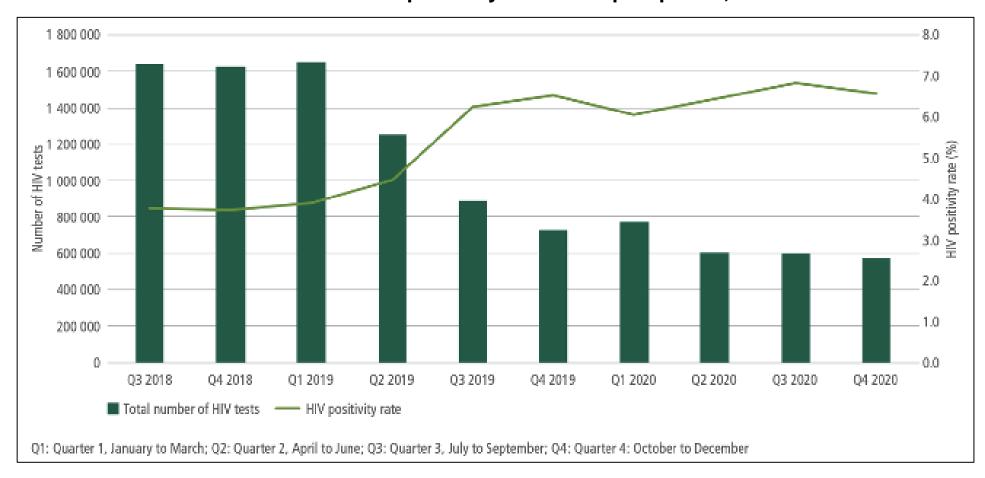


The chart compares the variation in HIV testing volumes by comparing the first quarter 2020 (January to March) to subsequent months throughout 2020. Source: National Department of Health, South Africa



### Disruption in HIV services: Country cases

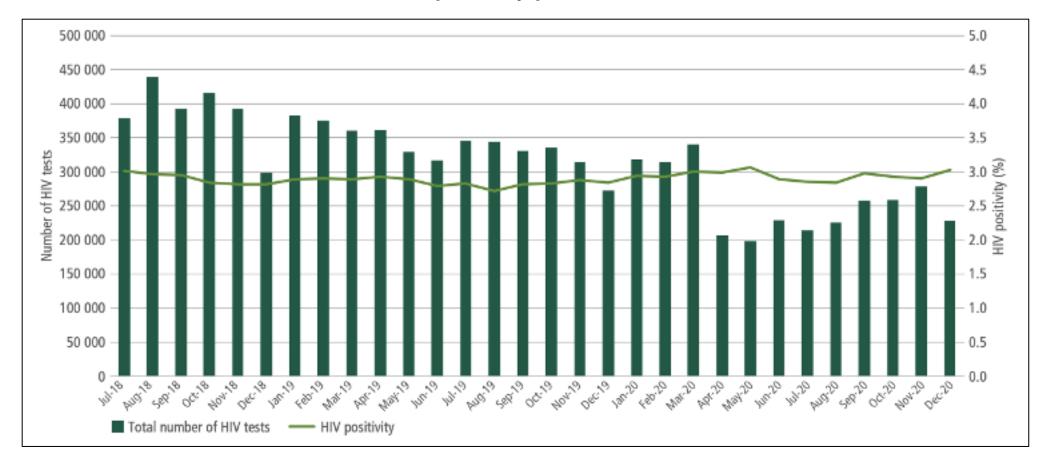
#### Number of HIV tests and HIV positivity in Zambia per quarter, 2018-2020





#### Disruption in HIV services: Country cases

#### Number of HIV tests and HIV positivity per month in Malawi, 2018-2020





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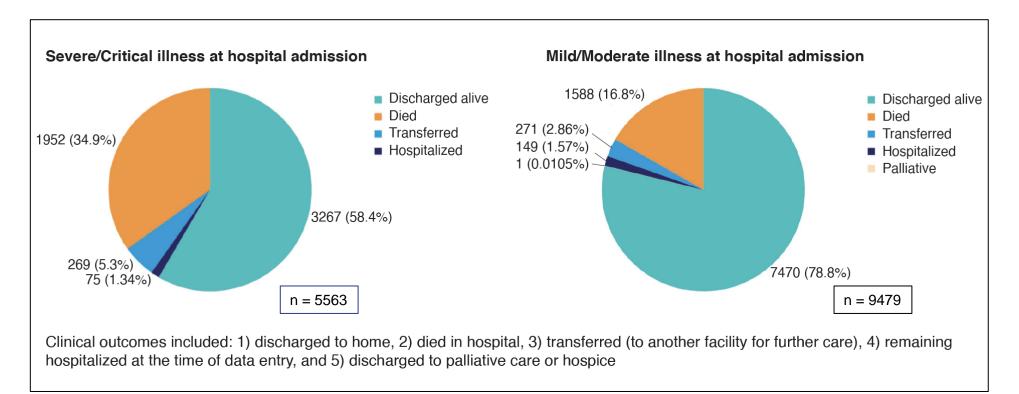
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## Outcomes among PLHIV hospitalised with COVID-19, by severity of illness at hospital admission

23.1% of PLHIV with a known clinical outcome died during the hospital stay

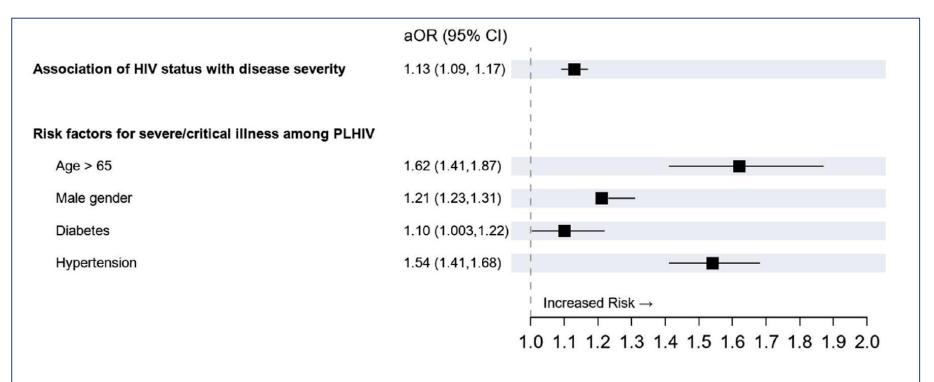


24 countries contributed data on people living with HIV:

Argentina, Belarus, Brazil, Cameroon, Chile, China, Democratic Republic of the Congo, Dominican Republic, France, Germany, Guinea, India, Italy, Jordan, Nigeria, Panama, Romania, Russian Federation, South Africa, Spain, United Kingdom, United States of America, Zambia, Zimbabwe.



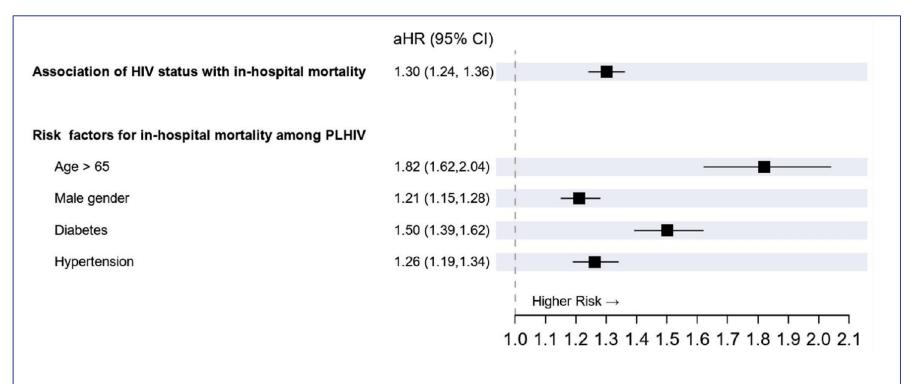
# Association of HIV status with severe/critical disease severity of COVID-19 at hospital admission



The upper part of the figure shows HIV infection as a significant independent risk factor for severe or critical presentation of COVID-19, after adjusting for age, sex, burden of underlying conditions (adjusted odds ratio (aOR). The lower part of the figure shows the adjusted odds ratio for each risk factor for severe or critical presentation of COVID-19 among PLHIV, after controlling for the other risk factors.



# Association of HIV status with in-hospital COVID-19 mortality



The upper part of the figure shows HIV infection as a significant independent risk factor for in-hospital mortality of COVID-19, after adjusting for age, sex, disease severity and burden of underlying conditions (adjusted hazard ratios (aHR)). The lower part of the figure shows the adjusted hazard ratio for each risk factor for in-hospital mortality among PLHIV, after controlling for the other risk factors.

The presence of 1-2 underlying conditions (aHR 1.40, data not shown in Fig. above), and ≥3 underlying conditions (aHR 1.50) was associated with increased risk of death.

