

Howard A. Zucker, M.D., J.D. Acting Commissioner of Health

Sue Kelly Executive Deputy Commissioner

October 31, 2014

Dear Colleague:

As required by New York State Public Health Law, the New York State Department of Health (NYSDOH) receives reports of all indeterminate results on the HIV Western blot (WB) for New York State residents and providers. You are receiving this letter because the NYSDOH has received an indeterminate HIV WB report from your site, but has not received the results of follow-up testing to resolve the patient's HIV infection status.

An indeterminate HIV-1 WB result may occur for several reasons including HIV-1 infection in the early stage of seroconversion, weak-reactivity due to a late-stage HIV-1 infection, cross-reactivity due to HIV-2 infection or non-specific reactivity in an uninfected person. Additional testing after an indeterminate WB is needed to determine a patient's HIV status. Of the 886 reports of indeterminate WBs received by the NYSDOH to date, only 52% (N=462) had additional testing reported. Of these cases, 20% (91 patients) were confirmed to be HIV infected and virtually all were in the early phase of infection. These data suggest that additional cases of early HIV infection may have been missed among patients who did not have any additional testing following an indeterminate WB.

Diagnosing persons early in their HIV infection is particularly important because HIV is more highly transmissible during the early stages. Persons with undiagnosed HIV infection may continue to engage in high-risk unsafe sex and drug-using practices resulting in an unintentional spread of HIV. Without timely detection, clinical providers will miss the critical opportunity to advise patients on treatment options and to provide HIV prevention messages including abstaining from sex and/or needle sharing during this highly infectious period.

When a patient tests WB indeterminate, a provider should:

- Order an HIV-1 RNA test as soon as possible;
- Consider additional testing to rule-out HIV-2 infection if risk factors exist;
- If a patient is confirmed to be HIV-infected:
 - Report the patient using the NYSDOH-4189 Medical Provider HIV/AIDS and Partner/Contact Report Form (PRF). Completion of the PRF is required within fourteen days of diagnosis by Public Health Law, Article 21, Title III, Section 2130. For assistance with obtaining or completing the PRF, please call 518-474-4284.

¹ Pilcher CD, Tien HC, Eron JJ Jr., et al. Brief but efficient: acute HIV infection and the sexual transmission of HIV. J Infect Dis 2004;189:1785–92.

Ensure the patient is linked to HIV medical care. If you do not provide HIV medical care, you are mandated to assist patients (who agree) by making their linkage to care appointment.²

As always, we appreciate your contributions in recognizing, reporting, and responding to cases of public health importance.

If you have questions or comments regarding additional testing, please call the NYSDOH AIDS Institute HIV, HCV & STD Clinical Education Initiative at 1-866-637-2342.

Sincerely,

Bridget J. Anderson, PhD Director Bureau of HIV/AIDS Epidemiology AIDS Institute New York State Department of Health

2

 $^{^2\ \}underline{http://www.health.ny.gov/diseases/aids/providers/testing/law/faqs.htm}$