

# People living with HIV

## Overview

- Some people living with human immunodeficiency virus ([HIV](#)) may be at higher risk of other sexually transmitted infections ([STIs](#))
- [Undetectable equals untransmittable](#): people who take antiretroviral therapy for [HIV](#) daily as prescribed, and who achieve and maintain an undetectable viral load, cannot sexually transmit the virus to an [HIV](#)-negative partner. Treatment should be initiated as soon as possible after diagnosis
- [Men who have sex with men should be](#) tested for [STIs](#) every 3 months, and other people living with [HIV](#) annually, although patients who are not sexually active may be tested less frequently
- [Hepatitis B](#), [hepatitis C](#) and [herpes](#) co-infection are common among people living with [HIV](#)

## Testing advice

### Testing

Site/specimen	Test	Consideration

<p>First pass urine or self-collected vaginal swab</p>	<p>NAAT/PCR <a href="#">gonorrhoea/chlamydia</a></p>	<p>Self-collected vaginal swab or clinician-collected endocervical swab (during clinically indicated examination) are more sensitive</p>
<p><a href="#">Men who have sex with men</a>: oropharyngeal swab and self-collected anorectal swab</p>		<p><a href="#">Men who have sex with men guidelines</a></p>
<p>Blood</p>	<p><a href="#">Syphilis</a></p>	<p>At each clinical blood draw 3 monthly in <a href="#">men who have sex with men</a></p>
	<p><a href="#">Hepatitis C</a></p>	<p>Yearly in <a href="#">men who have sex with men</a> and <a href="#">people who inject drugs</a></p>
	<p><a href="#">Hepatitis A</a> antibody</p>	<p>Vaccinate if antibody negative Test if not vaccinated and to confirm antibody response</p>
	<p><a href="#">Hepatitis B</a> Surface antigen (HBsAg), Core antibody (Anti-HBc), Surface antibody (Anti-HBs)</p>	<p>Test if not vaccinated and for antibody response. Vaccinate if no history or no documentation of full vaccination course.</p>

NAAT – nucleic acid amplification test

Anti-HBs – [Hepatitis B](#) surface antibody

### Specimen collection guidance

Clinician collected | Self-collection

### Clinical indicators for testing

- At diagnosis of [HIV](#), testing for other [STIs](#) and blood borne viruses should be offered

### Special considerations

- Local support, through a sexual health clinic, is available
- Women with [HIV](#) should be offered 3-yearly cervical screening test
- Contraception in [women with HIV](#)

## Follow Up

Even if all test results are negative, use the opportunity to:

- Educate about condom use, contraception, HIV PrEP/PEP, safe injecting practices, consent, CST and vaccinations for HAV, HBV and HPV as indicated.
- Vaccinate for [hepatitis A](#) and [B](#), if susceptible
- Discuss and activate reminders for regular testing according to risk

## Auditable Outcomes

- 100% of people living with [HIV](#) should have evidence of baseline serology for [hepatitis A](#), [hepatitis B](#), [hepatitis C](#) and [syphilis](#) in records

- 100% sexually active people living with [HIV](#) are offered [STI](#) testing at least annually