

Screening for Human Immunodeficiency Virus (HIV)

The U.S. Preventive Services Task Force (Task Force) has issued a **final** recommendation statement on *Screening for Human Immunodeficiency Virus (HIV)*.

This final recommendation statement applies to all people aged 15 to 65, including pregnant women.

The Task Force reviewed recent research studies on screening for HIV. The final recommendation statement summarizes what the Task Force learned about the potential benefits and harms

of this screening: (1) Everyone aged 15 to 65 should be screened for HIV infection. Teens younger than age 15 and adults older than 65 also should be screened if they are at increased risk for HIV infection. (2) All pregnant women, including women in labor who do not know their HIV status, should be screened for HIV infection.

This fact sheet explains the recommendation and what it might mean for you.

What is human immunodeficiency virus (HIV)?

HIV is a virus that attacks cells that help the body fight infection. This makes a person vulnerable to other infections and diseases. HIV is spread mainly through unsafe sex or sharing needles with an HIV-infected person. Less commonly, a woman with HIV can transmit the virus to her baby.

Facts About Human Immunodeficiency Virus (HIV) Infection

Nearly 1.2 million Americans are now living with HIV infection, and about 50,000 people become infected every year. Yet, 20 percent to 25 percent of people who have HIV do not know they are infected.

People can reduce their chance of getting HIV by avoiding risky behaviors, such as injecting drugs or having unsafe sex. For people who are already infected, it is important that they find out early so they can begin treatment with antiretroviral therapy (ART).

Starting ART early—before symptoms appear—greatly reduces the risk of developing acquired immunodeficiency syndrome (AIDS, the final stage of HIV infection), having AIDS-related complications, or dying of AIDS. It also reduces the chance that a person with HIV will pass on the infection to someone else. Treating pregnant women dramatically reduces the chances that the virus will be transmitted to their babies.

HIV screening involves taking a blood sample. The sample is tested to see whether it contains antibodies (disease-fighting proteins) that react specifically to HIV. These tests are very accurate.

There is no cure for HIV infection, but it can be managed to help people live healthier and longer lives. Treatment includes medicines to fight the infection (ART), vaccinations against illnesses such as hepatitis B, and medicines to prevent infections that occur more easily if a person is infected with HIV.

Screening for HIV Infection

Because HIV infection does not usually cause symptoms at the early stage, people need to be screened to learn whether they are infected. People who are feeling well and learn they are infected can start treatment early and avoid giving the disease to other people.

Potential Benefits and Harms of Screening for Human Immunodeficiency Virus (HIV)

The Task Force reviewed studies on the benefits and potential harms of screening for HIV infection.

The Task Force found strong evidence that screening for HIV in teens, adults, and pregnant women has many benefits. Screening tells people who may not feel ill whether they are infected. If they are infected and start treatment, they have a better chance of staying healthy. Treatment can also reduce their chances of passing the infection to other people.

The Task Force found that potential harms are small. False-positive results (a result saying that a person is infected when, in fact, he or she is not infected) are rare. ART is associated with short-term harms, including side effects, but many of these may go away in time. For people who experience side effects, other ART drugs are available.

Long-term use of some ART medicines may increase the risk of heart disease and other health problems, but the Task Force found that this risk seems to be small.

The Final Recommendations on Screening for HIV Infection: What Do They Mean?

Here is the Task Force's final recommendation statement on screening for HIV infection. The final recommendation statement has letter grades. The grades are based on the quality and strength of the evidence about the potential benefits and harms of screening. They also are based on the size of the potential benefits and harms. The Task Force evidence grades are explained in the box at the end of this fact sheet.

When the Task Force recommends (Grade A) a screening test, it is because there is strong evidence that the test has large potential benefits and small potential harms. The Notes next to the recommendations help to explain key ideas.

Visit the Task Force Web site to read the full [final recommendation statement](#). The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grades. Two evidence reports, one on [adolescents and adults](#) and one on [pregnant women](#), provide more detail about the studies the Task Force reviewed.

1 The Task Force recommends that *clinicians screen adolescents and adults ages 15 to 65 years for HIV infection. younger adolescents and older adults* who are *at increased risk* should also be screened. **Grade A**

2 The Task Force recommends that clinicians screen all pregnant women for HIV, including those who *present in labor* whose HIV status is unknown. **Grade A**

Notes

- 1 clinicians**
Health care professionals, including doctors, nurses, physicians assistants, and nurse practitioners.
- screen**
Take a blood test to see whether a person is infected with HIV.
- younger adolescents**
Children younger than age 15.
- older adults**
Adults aged 65 and older.
- at increased risk**
Men who have sex with men and people who inject drugs are at very high risk for HIV. Other behaviors that increase HIV risk are:
- having unprotected sex,
 - having more than one sex partner,
 - having a partner who has HIV infection, and
 - exchanging sex for drugs or money.
- People who have, or ask for testing for, another sexually transmitted infection also may be at increased risk for HIV.
- 2 present in labor**
Coming to the hospital or clinic while in labor.

Should You be Screened for HIV Infection?

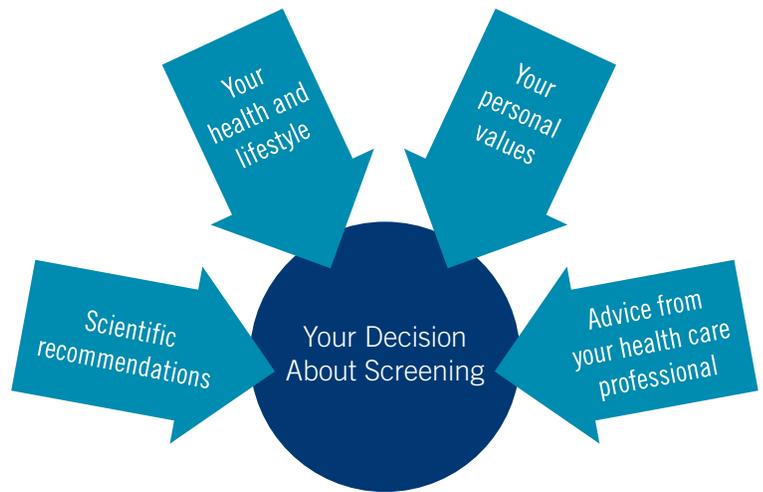
Getting the best health care means making smart decisions about what screening tests, counseling services, and preventive medicines to get and when to get them. Many people don't get the tests or counseling they need. Others get tests or counseling they don't need or that may be harmful to them.

Task Force recommendations can help you learn about screening tests, counseling services, and preventive medicines. These services can keep you healthy and prevent disease. The Task Force recommendations do not cover diagnosis (tests to find out why you are sick) or treatment of disease. Task Force recommendations also apply to some groups of people, but not others.

Deciding whether to get screened for HIV

The Task Force recommends that people ages 15 to 65 should be tested for HIV at least once. People at increased risk should be tested more often. You may be at increased risk if you are a man and have sex with men, if you engage in unsafe sex, or if you use injection drugs.

Even though the Task Force recommends that doctors and nurses offer you an HIV test, you can choose to decline. If you have questions, talk to your doctor or nurse about HIV infection, the test, and the meaning of positive and negative results. Be comfortable that all your questions have been answered. When deciding whether to get screened, think about your own lifestyle, personal beliefs, and preferences for health care. Consider scientific recommendations, like this one from the Task Force. Use this information to become fully informed and to decide whether getting an HIV test is right for you.



What is the U.S. Preventive Services Task Force?

The Task Force is an independent group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, or preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed. Recommendations only address services offered in the primary care setting or services referred by a primary care clinician.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the **final recommendation statement**. To learn more, visit the [Task Force Web site](#).

USPSTF Recommendation Grades

Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

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