Benefits of continuing to provide life-saving HIV services outweigh the risk of COVID-19 transmission by 100 to 1

Disruption to HIV services as high as 75% has been reported in some countries—to prevent increased AIDS-related deaths, HIV services must continue during the COVID-19 pandemic.

GENEVA, 13 April 2021—UNAIDS and the World Health Organization (WHO) have supported mathematical modelling to establish the benefits of continuing HIV services compared to the potential harm of additional COVID-19 transmission. The analysis shows that maintaining HIV services would avert between 19 and 146 AIDS-related deaths per 10 000 people over a 50-year time horizon, while the additional COVID-19-related deaths from exposures related to HIV services would be 0.002 to 0.15 per 10 000 people. The analysis demonstrates that the benefits of continuing to provide HIV services during the COVID-19 pandemic far outweigh the risk of additional COVID-19-related deaths.

“The world should make investments now that don’t leave it with such stark trade-offs in the future,” said Peter Ghys, Director, Strategic Information and Evaluation, UNAIDS. “We need to build robust future systems for health that recognize community-led contributions as part and parcel of a resilient system, not as an afterthought.”

The analysis looked at disruptions to four key HIV services: voluntary medical male circumcision, HIV diagnostic testing, viral load testing and programmes to prevent mother-to-child transmission of HIV. It compared COVID-19 deaths in 2020 and 2021 among health workers and clients due to keeping HIV services open with averted AIDS-related deaths occurring now and over the next 50 years due to maintenance of services. The models were applied to countries with a range of HIV and COVID-19 epidemics.

The COVID-19 pandemic has caused widespread disruption to health services, with restrictions in population movements and health services suspended or limited in many countries. The analysis shows that the potential harm of additional COVID-19 transmission occurring in HIV health services needs to be carefully balanced against the benefits of those services, which, the analysis shows, include fewer AIDS-related deaths. These results may seem intuitive, but it is important to realize that some services have been closed to protect people living with HIV from exposure to COVID-19 and its potential lethal outcomes. However, the risk of not keeping those essential HIV services open entails a greater overall risk of death related to lack of prevention of HIV, access to diagnosis and eventual treatment—these trade-offs are unacceptable.

While there is some additional short-term risk of COVID-19 transmission associated with providing HIV services, the risk of additional COVID-19 deaths is at least 100 times less than
the AIDS-related deaths averted by continuing those services. Additional effort to encourage health-care seeking for HIV services during the ongoing COVID-19 pandemic may be needed.

“Ministries of health take into account many factors in deciding when and how to offer essential health services during the COVID-19 pandemic,” said Meg Doherty, Director of WHO’s Global HIV, Hepatitis and Sexually Transmitted Infections Programmes. “This work shows that taking the longer view, the benefits of continuing key HIV services are far larger than the risks of additional COVID-19 transmission; innovative and safe delivery of services must continue as the pandemic is brought under control.”

The full analysis can be found on medrxiv at: https://doi.org/10.1101/2021.03.01.21252663

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UNAIDS
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WHO
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