





# Background & Significance

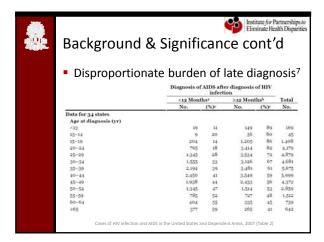
- Misperceptions persist about older adults not being at risk for HIV/AIDS
  - Patients:
    - No longer concerned about getting pregnant so don't need to use a condom<sup>1-2</sup>
  - Providers:
    - Older adults are not still having sex<sup>3</sup>
    - Older patients' symptoms (i.e., dementia, fatigue) must just be signs of aging<sup>4</sup>
      - After all, they're not having sex so it couldn't be AIDS





# Background & Significance cont'd

- Older adults may be at an increased risk for acquisition of HIV infection due to physiological and biological changes associated with aging
  - Decreased immunity (age)<sup>5</sup>
  - Thinning of vaginal lining (age \* gender)<sup>6</sup>







# Background & Significance cont'd

- Duffus et al<sup>8-9</sup> has shown that missed opportunities for earlier diagnosis of HIV/AIDS exist in health care settings
  - Older adults more likely to be diagnosed late
  - Risk-based HIV testing is ineffective
- Duffus et al (unpublished data)
  - Women 42+ more likely to be diagnosed late
- CDC 2006<sup>10</sup> revised HIV testing guidelines
  - All persons 13-64 years old, regardless of risk

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- To examine HIV testing uptake among
  - post-menopausal women
  - 50-64 years old

Objective



# Methods

- Data Source: BRFSS 2008
  - Deep South states (AL, GA, LA, MS, NC, SC)

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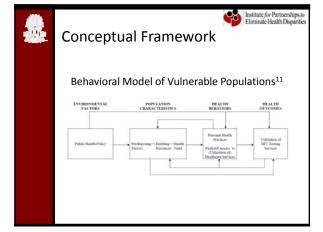
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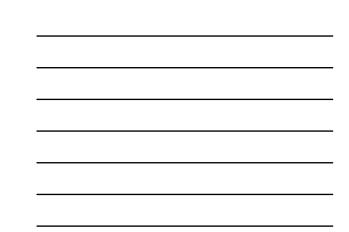
- Sample (n=2,027)
  - NHB and NHW women
  - 50-64 years old
  - Previously tested for HIV
    - Based on self-report



# Methods cont'd

- Outcome of interest
- Age at most recent HIV test
  - ≤44 or >44 years old
- Descriptive statistics
  - Frequencies & proportions
  - Bivariate (Chi-square tests)
- Multivariate logistic regression
  - Model
    - tested for HIV during post-reproductive years = Yes









## Results

- Prevalence of HIV testing:
  - 26% (n=2,027) of Deep South women 50+ years old (n=8,346) who completed the 2008 BRFSS survey reported that they had ever had an HIV test.
  - More than half (54.6%) of the 2,027 women in our subsample reported that they had been tested for HIV most recently during their postreproductive years (n=1,091).
  - Only 14% (n=1,091) of the 8,346 women in the larger study reported being tested for HIV most recently during their post-reproductive years.

Weighted Proportions





### Results cont'd

- Women 50-54 years older were significantly less likely to have been tested for HIV during their postreproductive years than those 60-64 years old.
  - 50-54 years old: AOR=0.64, 95% CI 0.46-0.88





# Results cont'd

- NH white (NHW) older women were significantly less likely to have been tested for HIV during their postreproductive years than NH black (NHB) older women.
  - NHW: AOR-0.48, 95% CI 0.36-0.64





#### Results cont'd

- Both urban and suburban older women were significantly more likely to have been tested for HIV during their postreproductive years than rural older women.
  - Urban: AOR=1.53, 95% CI 1.15-2.03
  - Suburban: AOR=1.66, 95% CI 1.09-2.52





#### Discussion

- Although the prevalence of HIV testing in our study was low, it was higher than that reported in a similar study conducted using the 2006 NHIS data<sup>12</sup>
  - CDC used this data as a baseline measure of prevalence of HIV testing before the 2006 revised HIV testing guidelines were released and 2007 new initiatives to ↑HIV testing
  - 5.9% tested for HIV
    - 45-64 years old (n=7,180)
    - Males and females





## Discussion cont'd

- HIV testing is underutilized among postmenopausal women
  - Increased uptake of HIV testing is needed among women 50+ years old
- More providers need to routinely offer an HIV test to their older patients, regardless of perceived risk
  - esp. among those who have never tested for HIV
- Increased prevention efforts that target older women are needed
  - esp. among those who are sexually active as they may not perceive themselves as being at risk for HIV/AIDS





#### Discussion cont'd

- Further research is needed to explain our study's finding that women 50-54 years old were significantly less likely to report that they had been tested for HIV compared to women 60-64 years old.
  - <u>Hypothesis:</u> Providers may still be using riskbased testing strategies (e.g., testing older women with HIV/AIDS symptoms such as fatigue and dementia, which can mimic the signs of aging in this target population)





#### Limitations

- BRFSS data did not assess:
  - HIV/AIDS status
    - HIV-positive
    - Diagnosed with AIDS
  - Sexually active
  - Provider had offered an HIV test but patient refused
- Measurement weaknesses:
  - Self-reported data
    - Social Desirability
  - Recall bias
    - HIV test had been done but patient either didn't remember or wasn't aware that they had been tested
    - Prevalence of HIV testing could be underreported





## Strengths

- Estimate prevalence of HIV testing among a population-based sample
  - NOTE: These data would not otherwise be available except for national surveys such as the BRFSS, NHIS, etc. because all HIV testing is not reported
  - e.g., private health care providers are not required to report the number of HIV tests performed, just any HIV-positive test results
- Telephone-based, interviewer-administered survey
  - ↓socially desirable responses





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