



UEMO

UNION EUROPÉENNE DES MÉDECINS OMNIPRATICIENS/MÉDECINS DE FAMILLE
EUROPEAN UNION OF GENERAL PRACTITIONERS/FAMILY PHYSICIANS

UEMO BULLETIN N°9 – 2016

Dear UEMO Members,

The focus topics in the healthcare community this month are primary prevention, Antimicrobial resistance, healthcare assessment and the global fight against HIV/AIDS.

UEMO has been very active during this period and had various occasions to bring the voice of General Practitioners and Family Physicians on the European political stage.

As announced, UEMO took part in the European Antimicrobial Resistance Awareness Day.

During a bilateral meeting with EU Commissioner for Health and Food Safety we discussed on issues of common interest and the future collaboration.

UEMO gave a presentation in a workshop organised by the European Parliament in Brussels. The focus was on health promotion and primary prevention.

I hope you enjoy reading about these developments and much more in this issue.

Yours sincerely,

Aldo L'UPO

UEMO President

EU NEWS

- ❖ DG Sante-OECD published 'Health at a Glance: Europe 2016' report
- ❖ DG Sante launches consultation on stakeholder's experience on Medicines for Children
- ❖ ECDC published HIV/AIDS Surveillance report

UEMO NEWS

- ❖ UEMO participates in the European Antibiotic Awareness Day
- ❖ UEMO President has a high-level meeting with the EU Commissioner for Health and Food Safety
- ❖ UEMO delivers a speech in a European Parliament workshop on Health Promotion and Primary prevention
- ❖ UEMO leads Working Group on e-Health
- ❖ BMA conducts survey on GPS development

OTHER NEWS

- ❖ ECDC launched European HIV-Hepatitis Testing Week
- ❖ WHO organised World Antibiotic Awareness Week
- ❖ WHO organised 9th Global conference on health promotion



EU NEWS

DG SANTE IN COLLABORATION WITH OECD PUBLISHED 'HEALTH AT A GLANCE: EUROPE' REPORT

NOVEMBER 2016

The Organization for Economic Co-operation and Development (OECD) with cooperation from the Commission, DG Sante has published the 'Health at a Glance: Europe 2016' report. The report provides an updated analysis of the health status of EU citizens and the performance of health systems.

Vytienis **Andriukaitis**, European Commissioner for Health and Food Safety, underlined that: *"The Health at a Glance report provides useful information for Member States to shape their actions on health across all policies. It shows that in the EU many people die every year from potentially avoidable diseases linked to risk factors such as smoking or obesity. It also highlights the need to continue our efforts in making sure that healthcare becomes more accessible. The report represents the flagship of the partnership between the Commission and the OECD to develop country-specific and cross-country knowledge on health and health systems, as the first step of the 'State of Health in the EU'."*

Secretary General of the Organisation for Economic Co-operation and Development (OECD), Angel **Gurría**, added that : *"Many more lives could be saved if the standards of care were raised to the best level across EU countries. More*

needs to be done to reduce inequalities in access and quality of care, and European health systems must become more efficient in channelling resources where they have the most impact on health outcomes, including on prevention."

The 2016 report includes chapters on the labour market impacts of behavioral risk factors and related chronic diseases, and the strengthening of primary care systems.

Find out more:

- ❖ OECD report is available [here](#).



DG SANTE LAUNCHES CONSULTATION ON STAKEHOLDERS' EXPERIENCE ON MEDICINES FOR CHILDREN

29TH NOVEMBER 2016



DG Sante has launched a consultation on 'stakeholders' experience on medicines for children'. The aim of the consultation is to gather real-life experiences and opinions on the Paediatric Regulation. The feedback from stakeholders will be integrated in the Commission's 2017 report, which will assess the impact of the Paediatric Regulation on public health and businesses.

The 2006 [Paediatric Regulation](#), which came into force on 26 January 2007, aims to meet three main objectives:

1. to ensure high-quality research into the development of medicines for children;
2. to ensure, over time, that the majority of medicines used by children are specifically authorised for such use with appropriate forms and formulations – and thus reduce the level of off-label use; and

3. to ensure the availability of high-quality information about medicines used by children.

In 2013, the Commission published a first report on the Paediatric Regulation and while it revealed that such progress had occurred, it would take at least 10 years to gain a full understanding of the situation.

The Commission's second report to the European Parliament and Council on the Paediatric Regulation is due in 2017. For this purpose DG Sante has launched a public consultation.

The public consultation is open until February 2017.

Find out more:

- ❖ DG Sante's Public Consultation is available [here](#).



ECDC PUBLISHED HIV/AIDS SURVEILLANCE REPORT

29TH NOVEMBER 2016



Almost 30 000 newly diagnosed HIV infections were reported by the 31 European Union and European Economic Area (EU/EEA) countries in 2015, according to data published today by ECDC and the WHO Regional Office for Europe. ECDC estimates that around 122 000 people living with HIV across the region are unaware of their infection. The estimated time between HIV infection and diagnosis is four years.

The newly reported HIV infections in 2015 account to 29 747. The EU/EEA notification rate is similar to recent years with an overall insignificant change from 6.6 per 100 000 population in 2006 to 6.3 in 2015 (adjusted for reporting delay).

European Commissioner for Health and Food Safety, Vytenis Andriukaitis, mentioned that: "HIV/AIDS continues to be a serious problem in Europe. The Commission is committed to helping Member States reach the SDG target of ending HIV/AIDS and Tuberculosis by

2030 and reducing Hepatitis, as underlined a few days ago in our Communication for a sustainable European future. ECDC's estimate that one in seven people living with HIV is unaware of his/her status is particularly worrying: people who do not know they are infected cannot benefit from life-saving treatment and can continue to transmit the virus to others. The European Commission supports HIV testing by working together with Member States and civil society on joint projects, funded by the EU Health Programme, on prevention and linkage to care."

ECDC is currently supporting Member States to improve their national estimates regarding the number of people living with HIV. This should lead to a more effective HIV response, because it enables better targeting of resources at populations identified as being most at risk.

Zsuzsanna Jakab, WHO Regional Director for Europe emphasised that "despite significant efforts, HIV remains among the main public health concerns in the WHO European Region, in particular in its eastern part. 2015 recorded the highest number of new cases in one year, contributing to an appalling 2 million cumulative cases". She added that in order "to address this critical situation, we have made available a new action plan that all European countries endorsed in September 2016. We now call on countries' leaders to use this plan for an urgent, accelerated and innovative response to HIV in the Region, to reverse



the AIDS epidemics immediately and end it by 2030”.

Time between infection and diagnosis in the EU/EEA: four years
The new surveillance data also show that almost every second (47%) HIV positive person in the EU/EEA is diagnosed at a late stage of infection. The new ECDC estimate revealed that it takes almost four years (3.8) before an HIV infection is diagnosed and reported.

Find out more:

- ❖ ECDC's full surveillance report is available [here](#).



UEMO PARTICIPATES IN EUROPEAN ANTIBIOTIC AWARENESS DAY

18TH NOVEMBER 2016

On 18th November, the European Antibiotic Awareness Day event took place in Brussels, organised by the ECDC.

Journalist Ms. Maryn McKenna, moderated the debate. She commented that Antimicrobial Resistance accounts for six aircraft crashes every day.

Dr. Andrea Ammon, ECDC's Acting Director delivered the opening speech. She mentioned that ECDC will release new data on Antibiotic Resistance. She further emphasised that there are worrying trends on Antibiotic Resistance which continue to increase. However, Dr. Ammon praised the EU Member States for the work on decreasing the trend and claimed that it is still possible to reverse the situation. She underlined that it is necessary to continue joint efforts globally in both human and veterinary medicine.

Commissioner for Health and Food Safety, Mr. Vytenis Andriukaitis, opened his speech referring to a small informal survey performed by his trainees. They inquired the pharmacies of the neighborhood how many antibiotics they sell every day which amount to roughly 35000 packages in Belgium, 1.6 million packages on an EU level. Commissioner Andriukaitis identified the existence of Antimicrobial resistance as an accumulation of factors: excessive use of antibiotics and poor infection control. He emphasised that Antimicrobial resistance

is the quintessential of One Health approach and therefore he is continuing his policy on the Action Plan 2011-2016. The Action Plan served as a symbol of political commitment, stimulated actions with Member States and strengthened the international cooperation. He underlined the importance of supporting 3rd countries together with agencies (ECDC, EFSA, EMA). He emphasised that the three key priorities for tackling Antimicrobial resistance are:

- 1) Make the EU a best practice region;
- 2) Stimulate research and innovation;
- 3) Shape global action outside the EU.

Deputy Director-General of DG Sante, Mr. Martin Seychell commented on the need for political leadership on these issues. The European Commission has assessed the EU Action Plan of 2011. Most MS have implemented an action. He further mentioned the publication of the Roadmap for Action on help to Member States in their fight against Antimicrobial resistance with the establishment of One Health Network. France has offered to coordinate the participating Member States such as Greece, Spain and Sweden. The European Commission will continue to cooperate with EMA and EFSA. Therefore the EU is ready to release EU funds and instruments in order to promote innovation. The EU is also committed to engage internationally and globally in order to combat the phenomenon by collaborating closely with the WHO Europe. Through the collaboration of the South Pacific and WHO Europe the EU has unleashed further funds. The EU is further collaborating with the transatlantic partnership.



Deputy Director-General from DG Research and Innovation, Ms. Ruxandra Draghia Akli, took the floor and emphasised that the Action Plan of 2011, promoted private and public collaborative research fostering international collaboration. She referred to the IMI initiative “New Drugs for Bad Bugs” which provides the largest fund as well as the Drive AB which provides a new economic model. She mentioned the joined programming on AMR (JPIAMR) which comprises of activities that pulled together national research. The goal of the JPIAMR is to support national strategic agendas around Antimicrobial resistance.

During the second session of the event, Mr. Dominique Monnet, Head of the Antimicrobial Resistance and Healthcare associated Infections Programme in ECDC, presented data on the AMR resistant bacteria in Europe, in particular pneumonia. Antibiotic resistance in *Klebsiella pneumonia* is of increasing concern in Europe. He underlined that the options to address the threat of bacteria resistant to last-line antibiotics is to create a national multidisciplinary task force; train infection control practitioners; screen actively risk patients in hospitals; isolate patients who are carriers of highly resistant bacteria and lastly pay close attention to hand hygiene.

Ms. Marta Hugas, Head of Unit of Biological Hazards and Contaminants Unit at EFSA presented the summary report that they produce together with ECDC. The data are fully harmonized. They are collected from food and animals. The bacteria samples include salmonella and *E. Coli*. The 2014 report was published and currently they are working on an updated version.

Ms. Helen Jukes, Vice-Chair of the Committee for Medicinal Products for Veterinary Use from EMA underlined that EMA received a first request from the EC to work on AMR in 2013. EMA formed the AMR group with experts in both veterinary and human science. They focused on colistin resistance. In 2015, in China a major increase in colistin-resistance was noted in routine surveillance of *E. Coli* in animals. In November 2015, a microbiological and molecular biological study was published on the issue. The use of colistin in some Member States has increased. In some countries the prospects of alternatives are very limited.

Dr. Danilo Wo Fo Wong Programme Manager on AMR, in WHO Regional Office in Europe. WHO has a programme dedicated on AMR. In September 2016, AMR was discussed in the UN General Assembly. AMR was mentioned as a fundamental long-term threat to health. Mr Wong emphasised that AMR has a human and economic cost since it will contribute to 10 million/deaths per year by 2050 and the loss of 100 trillion dollars. AMR also affects the sustainable development goals. It will affect the “good health”, “poverty”, “development” and “environment” SDGs. Mr. Wong further underlined that the antibiotic awareness week is based on the European Antibiotic Awareness Day. The WHO will be expanding the UK **Antibiotic Guardian campaign**. They will also launch the second **CAESAR report and support country campaigns**.

After the end of the session the floor was given to the participants per organization. The president of the UEMO, Dr. Aldo Lupo emphasised that it is necessary to make the EU closer to the Citizens by bringing the policy “down to earth”; In



other words, by providing input on the current situation on the ground to the policy makers. This will allow them to evaluate the real situation in order to be able to provide policy developments in health policy.

Ms. McKenna delivered the closing speech, emphasising that AMR can be resolved at an international and global level conjointly with the participation and efforts of the developing world.

Dr. Ammon reaffirmed the need to include the developing world in the sharing of best practices and the importance of providing a forum where such exchanges can happen.

The full video of the event is available here:

<https://www.youtube.com/watch?v=sNSZLHojOfQ&feature=youtu.be>



UEMO PRESIDENT HAS A HIGH-LEVEL MEETING WITH EU COMMISSIONER FOR HEALTH AND FOOD SAFETY

18TH NOVEMBER 2016



On 18 November 2016, the President of the European Union of General Practitioners/Family Physicians, Dr. Aldo Lupo, had a meeting with the EU Commissioner for Health and Food Safety, Mr Vytenis Andriukaitis.

Dr. Lupo presented UEMO to the Commissioner mentioning that UEMO is not a scientific association but an organization which provides moral and ethical principles. He further commented that the aim of this meeting is to have a follow-up on a higher level, following the previous meeting with Mr. Ryan.

The first objectives were to discuss ways to raise awareness, provide a mutual understanding on the issues at hand and express the commitment of UEMO to collaborate closely with the EU.

EU Commissioner for Health and Food Safety, Mr. Andriukaitis, mentioned that he is aware of the lack of capacities and personnel in primary healthcare. He brought forth the examples of Greece where there is only a 10% of GPs and a lack of nurses and primary healthcare physicians on the ground. He commented that there are developments in e-health in order to coordinate the practitioners however he is not aware how every country's system works.

Commissioner Andriukaitis expressed his wish to have a “map” on the numbers of Health sustainability and have the actual number of GPs and nurses on the ground on each member state so as to focus on patient-centered approach for health.

He requested from the UEMO to present a showcase from every member state of the organization on what is the situation on the ground in terms of numbers of personnel, facilities and needs. He will use this data in order to determine the Health Systems Performance Assessment, evaluate the available resources and determine which system is more cost-effective.

Commissioner Andriukaitis further expressed his wish to focus on public health since by focusing on the population it is less expensive for healthcare systems.

Dr. Lupo reaffirmed his commitment to work closely with the EU in order to have an evidence-based service which will provide the benchmark for further initiatives.



UEMO PARTICIPATES IN EUROPEAN PARLIAMENT WORKSHOP ON HEALTH PROMOTION AND PRIMARY PREVENTION

29TH NOVEMBER 2016



On 29 November, the Environment, Public Health and Food Safety Committee (ENVI) of the European Parliament organised a workshop on “Health Promotion and Primary Prevention”. The workshop took place at the European Parliament and was chaired by MEP Alojz Peterle (EPP, SL).

The first session focused on the state of primary prevention and health promotion in Europe. The floor was given to participants from NGOs. Dr. Aldo Lupo represented the European Union of General Practitioners/Family Physicians (UEMO). Dr. Lupo informed the

participants that structured clusters do not exist in all of the Member States. He added that where structured clusters exist, it is easier to share guidelines. On the issue of registered lists, Dr. Lupo emphasised that in cases where there is a registered list proactive interventions are ethically justified since patients share a close relationship with their doctor. Dr. Lupo added that changing the behaviour is the most difficult thing. He further underlined that the focus should be on primary prevention where the barriers in the implementation of the advice and guidelines are less.

Other participants included EurohealthNet, Schools for Health in Europe Network-SHE, European Federation of Allergy and Airways Diseases Patients' Associations (EFA). Mr Clive Needle from EurohealthNet emphasised the added value of CHRODIS in empowering patients to take care of their own health. Ms. Roberta Savli (EFA) underlined that EFA's working group on patients' education study shows results on poor adherence to treatment. Mr. Goof Buijs (Schools for Health in Europe Network-SHE) mentioned that the role of schools in disease prevention. He informed the participants that SHE is currently running an EU funded project in order to create a tool that coordinates school on health education.

The second session focused on good practices. Mr. Artur Furtado (DG SANTE) mentioned that Health Prevention is very important. He underlined that the European Commission is working actively with the OECD on improving country



knowledge on economies of prevention. Moreover, he urged the European Parliament to modify the Audio-visual regulation in order to decrease the marketing appeal of unhealthy products.

The floor then was given to industry representatives as well as representatives of the trade unions. Ms. Jessica Carreno Louro (International Association of Mutual Benefit Societies-AIM) emphasised that AIM can contribute to health promotion and disease prevention due its wide network of members and relationship of trust between them.

Mr. De Boer (European Association of Crafts, Small and Medium-Sized Enterprises) delivered the point of view of the industry on the topic. He added that the tools need to be tailored since prevention and risk assessment have a cost. The last presentation was delivered by Mr. Dimitris Theodorakis (Uni Europa) that represented the trade unions. He presented the case of the hairdressing sector since Uni Europe is running a campaign on chancing the European Framework Agreement also known as 'REMIT'. The framework agreement can improve health and safety for over one million workers.

MEP Peterle concluded that in order to empower the patients we need to motivate them to work with themselves and with the decision-makers.



UEMO LEADS WORKING GROUP ON E-HEALTH

NOVEMBER 2016



UEMO will leading one of the Working Groups under e-Health stakeholder group. This will be one of the four Working Groups.

The group is called "***new balances and side-effects of e-Health initiatives.***" The concept is that even though e-Health has a mainly positive value there are always some side-effects. UEMO will be working on this theme all 2017.

UEMO will produce a document and possibly contribute to a workshop in an international IT conference.

BMA CONDUCTS SURVEY ON GPS DEVELOPMENT

NOVEMBER 2016

Following the publication of the [BMA's Urgent Prescription for General Practice](#), and [NHS England's General Practice Forward View](#), the English General Practice Committee surveyed GPs in England about how they would like to see general practice develop. The survey focused on four main areas: workload, workforce, working at scale, and practice finance/contracts. The results of the survey are being released over the month of December and have so far received widespread coverage in both the trade and mainstream press. We are using the results to inform GPC negotiations on all changes affecting general practice, to inform GPC position on future developments, and to inform GPC of perceived impact of amending contracts.

The key findings so far are:

- The quality and safety of patient care in general practice in England is under threat from rising workload pressures:
 - Eight out of ten GPs (84 percent) believe that workload pressures are either unmanageable (57 per cent) or excessive (27 per cent) and are having a direct impact on the quality

and safety of the care they deliver to patients.

- Suggestions to help the manage workload:
 - Increased provision of enhanced community nurses to manage vulnerable housebound patients (64 percent), more help to enable patients to safely self-care (59 percent) and greater provision of mental health workers (53 percent) in the community.
- Almost a third of GP partners who run GP practices in England have been unable to fill GP staff vacancies for a year
 - A further one in five (18 per cent) stated it takes between three and six months to recruit to a vacancy.
 - Around a third of GP partners who need to hire locums do so in order to cover long term employment vacancies (31%) or to be able to continue to provide a full range of services (30 per cent) to their patients.
- Strong support for increased collaborative working:
 - Half of all GPs (50 per cent) want to see the current independent model continued but with resources for greater collaboration.
 - A third (32 per cent) want to see the development of



collaborative alliances with multi-professional healthcare staff to manage increasing care outside of hospitals.

- GPs believe that greater collaboration has a range of benefits, including the potential to reduce the bureaucracy of managing a practice (39 per cent), cutting overall workload (37 per cent) and providing a sustainable way to cope with extended access (34 per cent).

The full report will be released in due course and further information can be accessed on the [BMA website](#).



OTHER NEWS

ECDC LAUNCHED EUROPEAN HIV-HEPATITIS TESTING WEEK

18TH NOVEMBER 2016

From 18 to 25 November 2016, almost 500 organisations all across Europe are hosting activities to increase awareness of the benefits of HIV and hepatitis testing. These diseases can be asymptomatic for a long time and without getting tested, many people will live with their infection without knowing it. ECDC backs the efforts of European HIV-Hepatitis Testing Week with an updated version of the European Test Finder which now allows locating testing sites for HIV, sexually transmitted infections and viral hepatitis.

ECDC Acting Director Andrea Ammon emphasised that “as our surveillance data show, reaching and testing those at risk of infection, whether it’s HIV or hepatitis, is still a public health challenge across Europe”. She further added “If we want to interrupt the existing transmission chains and avoid further infections, we need to strengthen local prevention and control practices, including a boost of testing services. That’s why ECDC welcomes the efforts of European HIV-Hepatitis Testing Week to increase positive dialogue and awareness among those who ought to be tested for HIV and viral hepatitis and those who offer tests across Europe.”

Viral hepatitis is preventable and curable.

While there is currently no cure for HIV, early diagnosis allows access to lifesaving treatment and also reduces the long term cost to the healthcare system. But almost every second person diagnosed with HIV in Europe still presents at a late stage or with indication of advanced infection. A quick and simple blood test will tell if one is infected or not – knowledge that can help protect own health and that of others.

The European Test Finder makes it a lot easier to locate testing site for HIV, hepatitis or STI in Europe: all that is needed is a post code or city name to find information about the nearest testing site.

The ECDC HIV testing guidance provides key information on why, where, how and when to test for HIV. It aims to inform existing national HIV testing strategies in Member States to adopt a strategic, evidence-based approach to develop and implement effective HIV testing procedures.

Find out more:

- ❖ ECDC article is available [here](#).





WHO ORGANISED WORLD ANTIBIOTIC AWARENESS WEEK

14TH NOVEMBER 2016



The week of 14-20 November 2016 marks the second World Antibiotic Awareness Week.

This year the WHO-lead initiative focuses on healthcare workers and the essential role they play in raising awareness about

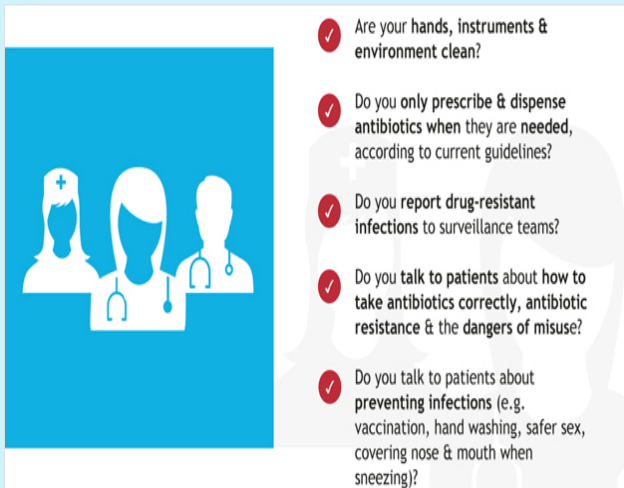
antibiotic resistance and making sure that antibiotics will also be effective in the future. Healthcare workers are vital both when it comes to ensuring the prudent use of antibiotics and implementing good infection control practices, including hand hygiene as well as the screening and isolation of hospitalised patients with multidrug-resistant bacteria, in order to prevent their spread to other patients.

European Antibiotic Awareness Day (EAAD) partners with the World Antibiotic Awareness Week to increase global awareness about prudent use of antibiotics and antibiotic resistance. On 18 November, ECDC will organise an EAAD launch event in Brussels and coordinate a "24-hour Global Twitter conversation" hosted together with WHO and EAAD partner organisations from Australia, Canada, New Zealand, and the United States.

Find out more:

- ❖ WHO world antibiotic awareness week is available [here](#).
- ❖ ECDC press release is available [here](#).





WHO ORGANISED THE 9TH GLOBAL CONFERENCE ON HEALTH PROMOTION: GLOBAL LEADERS AGREE TO PROMOTE HEALTH IN ORDER TO ACHIEVE SUSTAINABLE DEVELOPMENT GOALS

21ST NOVEMBER 2016



The 9th Global conference on health promotion, co-organised by WHO and the National Health and Family Planning

Commission of the People's Republic of China in Shanghai on 21–24 November, has agreed:

- **The Shanghai Declaration on Health Promotion**, will provide political choices for health, stressing the links between health and wellbeing and the United Nations 2030 Agenda for Sustainable Development and its Sustainable Development Goals.
- **The Shanghai Healthy Cities Mayors' Consensus**, contains a commitment by more than 100 mayors to advance health through improved management of urban environments.

WHO Director-General Dr. Margaret Chan emphasised that there is a need for government action that protects people from health risks, provides access to healthy choices and spreads awareness of how to be and stay healthy.

The Declaration highlighted the need for people to be able to control their own health and lifestyle choices. Governance-related commitments include protecting health through public policies, strengthening legislation, regulation and taxation of unhealthy commodities and implementing fiscal policies to enable new investments in health and wellbeing.

The Declaration is committed to ensure that environments support healthy consumer choices, for example through pricing policies, transparent information and clear labeling. The Declaration further emphasized the need for healthy urban policies that promote social



inclusion, issues that are further strengthened in the Mayors' Consensus.

The mayors agreed to integrate health as a core consideration in all city policies. This will be a way to promote community engagement through multiple platforms, including schools, workplaces and modern technology, to advance health.

Find out more:

- ❖ WHO press release is available [here](#).

WHO ISSUED NEW GUIDANCE ON HIV SELF-TESTING AHEAD OF WORLD AIDS DAY

29TH NOVEMBER 2016



In advance of World AIDS Day, WHO has released new guidelines on HIV self-testing to improve access to and uptake of HIV diagnosis.

According to a new WHO progress report lack of an HIV diagnosis is a major obstacle to implementing the Organization's recommendation that everyone with HIV should be offered antiretroviral therapy (ART).

The report reveals that more than 18 million people with HIV are currently taking ART, while almost the same amount of people still unable to access treatment, the majority of which are unaware of their HIV positive status. Today, 40% of all people with HIV (over 14 million) remain unaware of their status. Many of these are people at higher risk of HIV infection who often find it difficult to access existing testing services.

Dr. Margaret Chan, WHO Director-General mentioned that "HIV self-testing should open the door for many more people to know their HIV status and find out how to get treatment and access prevention services."

HIV self-testing means people can use oral fluid or blood finger pricks to discover their status in a private and convenient setting. Results are ready within 20 minutes or less. Between 2005 and 2015 the proportion of people with HIV learning of their status increased from 12% to 60% globally. This increase in HIV testing uptake worldwide has led to more than 80% of all people diagnosed with HIV receiving ART.

Men account for only 30% of people who have tested for HIV. Adolescent girls and young women in East and Southern Africa experience infection rates up to eight times higher than among their male peers. WHO is supporting three countries in southern Africa which have started large scale implementation of self-testing and many more countries are considering this innovative approach to reaching those who are being left behind.



Find out more:

- ❖ WHO press release is available [here](#).

UEMO

European Union of General
Practitioners / Family Physicians
Piazza Cola di Rienzo 80/a
IT-00192 Roma - Italy

Email: secretariat@uemo.eu

HEAD OFFICE:

Rue des Deux Eglises 37-39
1000 Brussels - Belgium

