Testing for HIV Along With COVID-19 Could Lead to Earlier Diagnosis

Linking HIV and COVID-19 testing meant one Chicago hospital saw an increase, rather than a decrease, in early HIV diagnosis and treatment starts.

May 12, 2021 By Heather Boerner

Pairing opt-out HIV testing with coronavirus testing at an emergency department in Chicago led to catching more people in the early stages of HIV, even during the COVID-19 pandemic, according to a study published in the Journal of the American Medical Association Internal Medicine.

Meanwhile, emergency departments that did not tie the two tests together saw their HIV testing rates drop by 49%.

The findings by Kimberly Stanford, MD, an emergency medicine doctor at University of Chicago Medicine (UCM), and colleagues agree with past research showing that the time from HIV acquisition to diagnosis is shrinking but remains longer for people ages 55 or older, heterosexual men and Black, Latino and Asian adults.

Data came from the Expanded HIV Testing and Linkage to Care Program, a collaborative of 13 health centers, community hospitals, academic hospitals and emergency departments on the South Side and West Side of Chicago. Stanford and colleagues took data on HIV testing and rates of HIV diagnoses at the earliest stages of infection (so-called acute HIV infection) for the four years before 2020 and then from January to October 2020 to see how HIV testing rates fared at centers committed to early HIV diagnosis and rapid connection to care.

What they found was that the number of HIV tests dropped by 49% overall during the early days of the COVID-19 pandemic across the collaborative. But at the UCM emergency department, where they'd set up a COVID-19 testing area that included phlebotomy services for HIV antibody/antigen testing, the number of HIV tests didn't dip.

Between January and October 2020, emergency department staff performed 14,215 HIV tests and 18,830 SARS-CoV-2 tests. Of the 46 people diagnosed with HIV by UCM in 2020, 12 met criteria for early infection—a twofold increase in early diagnoses compared with the previous four years. Meanwhile, emergency departments that didn't incorporate HIV testing into their COVID-19 testing services saw diagnoses of newly acquired HIV drop by 25%.

Eleven of the 12 people diagnosed with acute HIV were referred to HIV care and started antiretroviral treatment within days of diagnosis.

“The COVID-19 pandemic is superimposed on the HIV pandemic, jeopardizing progress toward HIV elimination. Routine HIV screening in health care settings is a key elimination strategy that has been negatively affected during the pandemic,” the researchers wrote. “Thus, HIV screening programs, particularly in EDs [emergency departments], should incorporate or even link HIV screening to COVID-19 testing.”

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