

Pismo uredniku | Letter to the Editor

Initial impact of COVID-19 epidemic on HIV services in Croatia

Inicijalni učinak epidemije bolesti COVID-19 na HIV usluge u Hrvatskoj

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Keywords:

Covid-19
coronavirus
SARS-CoV-2
HIV care
pre-exposure prophylaxis
voluntary testing and counselling

Primljeno: 20-4-2020

Received: 20-4-2020

Prihvaćeno: 27-4-2020

Accepted: 27-4-2020

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Dear Editor,

We aimed to quantify the impact of COVID-19 epidemic on HIV services in the Republic of Croatia. The Republic of Croatia (population 4.1 million) has a low-level HIV epidemic driven by men who have sex with men (MSM)^[1]. HIV care is centralized, and all people living with HIV (PLWHIV) are treated at the University Hospital for Infectious Diseases (UHID) in Zagreb; the hospital pharmacy dispenses antiretrovirals to all PLWHIV^[2]. A phone consultation service was established in 2006 and an mHealth platform (EMERGE) has been in use since April 2017 (<https://www.emergeproject.eu>)^[3]. UHID is the only centre in Croatia that has a Sexual Health Clinic for MSM (MSM-SHC) and provides HIV pre-exposure prophylaxis (PrEP), and also runs a voluntary counselling and HIV testing (VCT) service.

The COVID-19 epidemic in Croatia started on February 26, 2020 and many measures were introduced: quarantine for travellers, isolation for those testing positive and their contacts, suspension of schools and universities (March 16), prohibition of gatherings of more than 5 persons (March 19), cessation of intracity (March 21) and intercity (March 23) transport. Croatia has so far avoided a larger COVID-19 epidemic. Since UHID also became the central hospital for treatment of COVID-19 in the Zagreb area, we investigated how the COVID-19 epidemic has impacted HIV services.

We reviewed data from all interactions of PLWHIV with the HIV treatment centre and data on the usage of other services (PrEP, MSM-SHC and VCT) from February 3rd till April 5th. The following was analysed: phone interactions, office visits, number of viral load tests performed and interactions that resulted in dispensing antiretrovirals (ART). Data on COVID-19 patients were extracted from the official governmental reports (<https://www.koronavirus.hr/>) and on HIV care from the local electronic database.

With the rise in COVID-19 cases, an increasing number of phone consultations occurred (Figure 1). A total of 2068 phone consultations were made, an average of 190 per week in February (February 3 to March 1) and 261 per week in March (March 2 to April 5). There were 322 office visits, on average 46 per week in February and 22.5 per week in March. There was a decline in viral load measurement from a weekly average of 44 in February to 20 in March (Figure). A total of 2528 1-month supplies of ART were dispensed, of

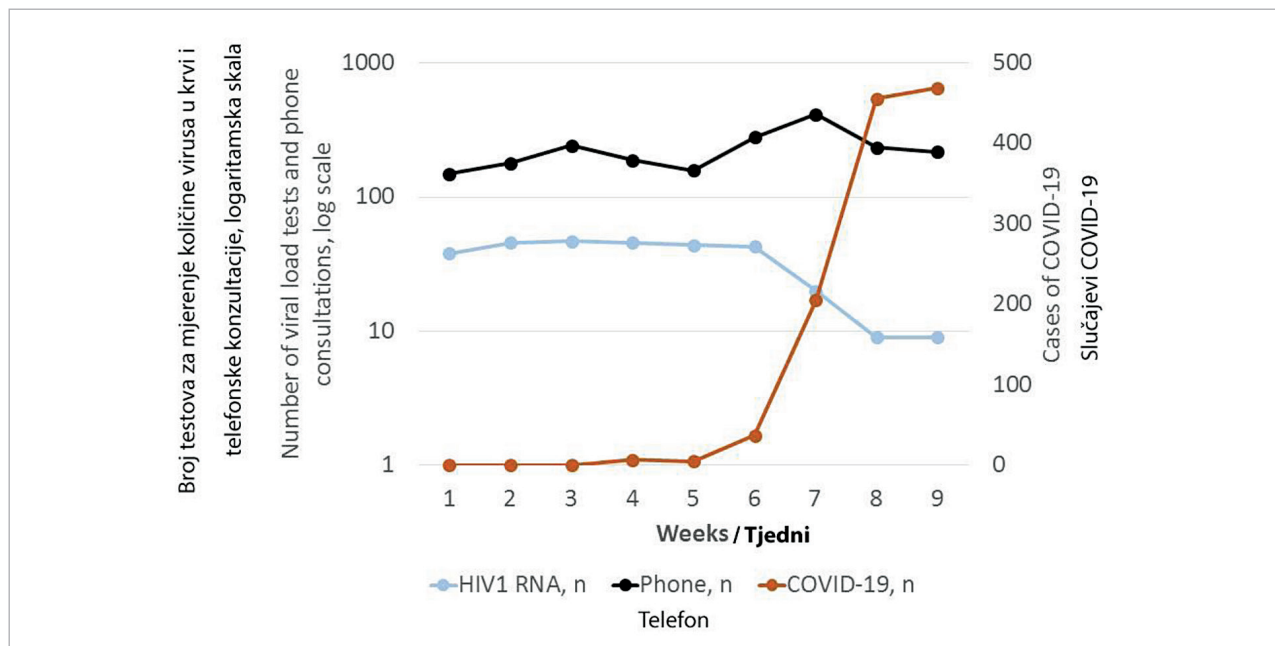
which an average of 248 packages per week were dispensed in February and 307 in March. A total of 189 home deliveries of ART for PLWHIV outside Zagreb were made, of which an average of 8.5 shipments per week were made in February and 31 shipments per week in March. So far, we are aware of two cases of treatment interruptions.

Our PrEP service had a 50% decline in visits (12 *versus* 6 visits per week in February and March, respectively). VCT counselling sessions declined from 17.5 per week in February to 5 per week in March. Our MSM-SHC service closed on March 9.

At the beginning of the COVID-19 epidemic an intensification of phone consultations was observed. The ART supplies were regular with more home delivery, and a decline in viral load measurements occurred. Instead of the planned expansion of the PrEP service, a decline in visits happened. Besides a sharp decline in HIV testing at our centre, both community-based centers for HIV testing in Zagreb (CheckPoint and

FIGURE 1. NUMBER OF VIRAL LOAD TESTS DONE AND PHONE CONSULTATIONS PER WEEK DURING THE INITIAL PHASE OF COVID-19 EPIDEMIC IN CROATIA. WEEK 1 STARTS ON FEBRUARY 3RD AND WEEK 9 ENDS ON APRIL 5TH.

SLIKA 1. BROJ TESTOVA ZA MJERENJE KOLIČINE VIRUSA U KRVU I TELEFONSKE KONZULTACIJE NA TJEDNOJ BAZI TIJEKOM INICIJALNE FAZE EPIDEMIJE BOLESTI COVID-19 U HRVATSKOJ. TJEDAN 1. POČINJE 3. VELJAČE, A TJEDAN 9. ZAVRŠAVA 5. TRAVNJA.



Iskorak) closed (on March 19). We were not able to continue to operate the MSM-SHC.

In conclusion, HIV care has mainly focused on delivery of ART. The emergence of the COVID-19 pandemic may slow the progress towards achieving the end of HIV/AIDS in Croatia. Actions should be undertaken to address those issues.

Acknowledgment:

This paper was supported by the Croatian Science Foundation Project no. IP-2019-04-9702 (principal investigator: Josip Begovac).

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