

LETTERS TO THE EDITOR

HIV screening of migrants in the autonomous Province of Trento (north of Italy)

Lo screening per HIV dei migranti nella Provincia Autonoma di Trento (Nord Italia)

Received: 2024 January 31

Accepted after revision: 2024 April 8

Published online ahead of print: 2024 April 18

Key words: HIV infection; Screening; Migrants; Rapid HIV self-test

Abstract

Migrants have accounted for more than 40% of new HIV diagnoses in Europe in 2022. Among the population of asylum seekers currently present in the Trento Province, screening for HIV infection is poorly carried out for various reasons. Here we report our experience about screening for HIV infection in asylum seekers present in that area using rapid self HIV-testing.

Dear Editor:

migrants have accounted for more than 40% of new HIV diagnoses in Europe in 2022 (1). Migrants living with HIV may face numerous intersecting stigmas related to their HIV and migration status, as well as broader racial and cultural discrimination (2). Migrants include both those who have migrated from within Europe and those from outside the region, and will be diverse in terms of race, nationality, gender, and socio-economic status. As of 1st January 2021, there were approximately 5.2 million foreign citizens residing in Italy, representing 8.7% of the total number of residents. On 1st January 2021, 3,373,876 non-EU citizens were regularly present in Italy, 64.4% of whom held a long-term residence permit (3).

According to data published by ISPAT (Institute of Statistics of the Province of Trento) and ISTAT, the foreign population (people with non-Italian citizenship) in the Province of Trento in 2022 amounts to 45,620 residents (8.5% of total resident population, a slight decrease compared to the previous ISTAT 2021 survey (4)).

Foreigners come from 150 countries around the world, but they are concentrated in a fairly small number of communities; the top ten (in order, Romania, Albania, Morocco, Pakistan, Ukraine, Moldova, Macedonia, China, Tunisia, Poland), indeed account for 69.3% of the foreign presence. Among asylum seekers in 2022, 83.3% were Pakistanis. In 2022, 1,880 new diagnoses of HIV infection were reported in Italy, representing an incidence of 3.2 new diagnoses per 100,000 residents (5).

In the same year, foreigners accounted for 31.2% of all reports, a percentage that has remained stable over time with values of around 30%; 25.8% were diagnosed with late-stage HIV infection (57.9% of new diagnoses were attributable to heterosexual relationships, the majority being women). Overall, foreigners in Italy come from profoundly different

Table 1 - New HIV diagnosis among Italians and foreigners living in the Autonomous Province of Trento from 2018 to 2022

Year	Italians (number)	Foreigners (number and percentage)
2018	12	8 (40%)
2019	19	11 (36.7%)
2020	13	6 (31.6%)
2021	2	4 (66.7%)
2022	2	1 (33.3%)

migration routes and from areas with different seroprevalence rates and HIV subtypes. Regarding the place and time of infection acquisition, Italian data attest post-migration infection in 23%-30% of cases (5).

In the Province of Trento, the numbers of new HIV diagnoses (Italians/foreigners) over recent years are shown in Table 1. The population of asylum seekers in the Autonomous Province of Trento consists mainly of people from Pakistan, a country that has seen a steady increase in new HIV diagnoses in recent years (84% rise from 2010 to 2022) (6).

The epidemic in Pakistan follows the pattern of spread observed in other Asian countries, i.e. while the number of new cases among at-risk population groups is stable, there is a gradual increase in the general population, suggesting transmission in bridging populations (spouses, partners, clients) (7).

Among the population of asylum seekers currently present in the Province of Trento, screening for HIV infection is poorly carried out for various reasons including, for example, the need to hand over the result in person, the difficulty in independently managing the post-diagnosis pathway, cultural aspects, the language barrier implicating low health literacy, difficulties in contacting health services, maintaining adherence to the proposed treatment plan, etc. This implies failure to identify some possible HIV infections and thus missing the goals set by PNAIDS (Piano Nazionale di interventi contro HIV e AIDS) 2017-2019 (emergence of the underground, reduction of late-presenters, etc.) (8).

In this context, the Infectious Diseases Unit and the Prevention Department of the Azienda Provinciale per i Servizi Sanitari (APSS) proposed an HIV awareness and information project aimed at asylum seekers and operators, with rapid HIV self-testing offered directly at the reception facilities. Rapid tests offer the advantage of providing the result within few minutes. If the test is reactive (i.e. preliminarily positive), the person was accompanied by an operator to the Infectious Diseases Unit, where the HIV antibody/antigen combination test was performed, ensuring that he or she was taken into care as soon as the result was positive. We started the project on June 2023. 60 of the 75 newly arrived migrants agreed to perform HIV self-test (*OraQuick HIV self-test*; *Meridian Bioscience Europe s.r.l.*) after a full explanation about the type of screening by an infectious disease specialist. Tests were performed all in a day where migrants lived (a former military barracks). All were males and claimed to be all heterosexual. The mean age was 31 years (range 18-66 years). 62% of them came from Pakistan, 25% from Morocco and another 4% from Bangladesh. All HIV self-tests were nonreactive. Our results seem to confirm that HIV among the migrant population is often acquired after arrival (5) and that screening newly arrived migrants at the point of entry alone may not be sufficient to tackle the epidemic among this key population. Our results might also indicate that only a portion of migrants, at lower risk of HIV infection, leave their home countries. Universal access to HIV prevention, testing and treatment services are critical to end new transmissions by 2030. We will continue to screen migrants on arrival and then, if they plan to stay in Autonomous Province of Trento, we will continue screening on a semi-annual basis.

Massimiliano Lanzafame¹, Giovanni Mori^{1,2}, Emanuela Lattuada¹, Donatella Visentin³, Luisa Carraro³, Roberta Gargano³, Pirous Fatehmoghadam⁴, Maria Grazia Zuccali⁵

¹ Unit of Infectious Diseases, Santa Chiara Hospital, APSS, Trento, Italy

² Università Vita-Salute San Raffaele, Milano, Italy

³ Hygiene and public health operational unit, APSS, Trento, Italy

⁴ Simple structure of Epidemiological observatory, Prevention Department, APSS, Trento, Italy

⁵ Prevention Department, APSS, Trento (Italy)

References

1. WHO Regional Office for Europe (WHO/Europe) and European Centre for Disease Prevention and Control (ECDC). HIV/AIDS surveillance in Europe 2023 (2022 data). Copenhagen and Stockholm: WHO/Europe and ECDC; 2023. Available from: <https://www.ecdc.europa.eu/en/publications-data/hivaids-surveillance-europe-2023-2022-data> [Last accessed: 2024 Apr 5].
2. Joint United Nations Programme on HIV and AIDS (UNAIDS). Global partnership for action to eliminate all forms of HIV-related stigma and discrimination; 2023. Available from: www.unaids.org/sites/default/files/media_asset/global-partnership-hiv-stigma-discrimination_en.pdf [Last accessed: 2024 Apr 5].
3. Istituto Nazionale di Statistica (ISTAT). Available from: <https://www.istat.it/it/files//2021/12/CENSIMEN-TO-E-DINAMICA-DEMOGRAFICA-2020.pdf>
4. Istituto di Statistica della Provincia di Trento (ISPAT). [https://statweb.provincia.tn.it/annuario/\(S\(n0npqo45hmv5kmn4kmztg45\)\)/tavola.aspx?id=1.44](https://statweb.provincia.tn.it/annuario/(S(n0npqo45hmv5kmn4kmztg45))/tavola.aspx?id=1.44)
5. Aggiornamento delle nuove diagnosi di infezione da HIV e dei casi di AIDS in Italia al 31 dicembre 2022. Available from: https://www.salute.gov.it/portale/documentazione/p6_2_2_1.jsp?lingua=italiano&id=3377 [Last accessed: 2024 Apr 5].
6. Samarasekera U. Pakistan's growing HIV epidemic. *Lancet*. 2022 Dec 10;400(10368):2031. doi: 10.1016/S0140-6736(22)02530-2.
7. Baloch R, Muzzamil M, Raza S, Naz S, Butt S, Malikzai A. Epidemic of HIV in Pakistan: an emerging health issue threatening to derail progress toward the SDGs. *Int J Surg Global Health*. 2023 Nov; 6(6):e0365. doi:10.1097/GH9.0000000000000365.
8. Piano nazionale di interventi contro HIV e AIDS (PNAIDS) 2017-2019. Available from: https://www.salute.gov.it/portale/documentazione/p6_2_2_1.jsp?id=2655 [Last accessed: 2024 Apr 5].

Corresponding author: Massimiliano Lanzafame, Largo Medaglie d'oro 9, 38122 Trento, Italy
e-mail: massimiliano.lanzafame@apss.tn.it