HIV/AIDS

HIV Testing

If you think you might have been exposed to HIV, it’s important to get tested promptly. If you test positive, starting antiretroviral treatment quickly will minimize damage to your immune system and reduce the risk of transmitting the virus to others.

According to the Centers for Disease Control and Prevention (CDC) there are about 1.2 million people living with HIV in the United States. The CDC estimates that around 14% of people with HIV do not know they carry the virus, and nearly 40% of new HIV infections are transmitted by people who don’t know their status.

Getting tested for HIV is easy. Yet many people avoid getting tested for a variety of reasons. Some may find the idea of getting tested so frightening they just won’t do it, while others may think HIV testing is unnecessary because they believe they aren’t at risk.

The truth is, anyone can get HIV. Some demographic groups are more heavily affected than others, but the risk factors are the same for everyone.

When it comes to HIV testing, the old cliché “knowledge is power” still holds true. Knowing your HIV status, whether negative or positive, puts you in the best position to protect your health and the health of your sexual partners. While there is no cure for HIV or AIDS, effective medications allow HIV-positive people to live a normal, healthy life. Being aware of your HIV status makes it less likely that you will pass the virus to others, both because you and your partners can take precautions and because effective treatment prevents transmission.

The CDC recommends that everyone between the ages of 13 and 64 get tested for HIV at least once, regardless of perceived risk. Women should be tested during each pregnancy. Those at higher risk should get tested more often.
You may be at higher risk if:

- You are a man who has had sex with other men.
- You have had unprotected anal or vaginal sex with someone who is living with HIV.
- You have had more than one sex partner.
- You have shared needles or syringes to inject drugs (including steroids or hormones)
- You have gotten a body piercing or tattoo using unsterilized equipment.
- You have exchanged sex for money, food, shelter or drugs.
- You have been diagnosed with or sought treatment for a sexually transmitted infection (STI) such as gonorrhea or syphilis.
- You have been diagnosed with or sought treatment for viral hepatitis or tuberculosis.
- You have had sex with someone who fits any of the above descriptions or whose sexual history you don’t know.

If you are at risk for HIV, you may also have been exposed to other STIs. Some of these can be quite serious and require immediate treatment. If you are being tested for HIV, you should also discuss with your provider whether you should be tested for these STIs.

What are the types of HIV tests?
There are several different tests that can be used to determine if you have HIV: antibody tests, antigen/antibody tests and nucleic acid tests. None of these tests are able to detect HIV right away. The time between HIV exposure and when the test can detect the virus is referred to as the window period.

- Antibody tests look for antibodies to HIV in your blood or oral fluid; the ELISA test is most widely used. This is the most common type of HIV screening test. Antibody tests can take 23 to 90 days to detect HIV infection after an exposure because the body takes time to produce antibodies. Most rapid tests and the only FDA-approved HIV self-test are antibody tests. In general, antibody tests that use blood from a vein can detect HIV sooner after infection than tests done with blood from a finger prick or an oral fluid sample.
- Antigen/antibody tests look for both HIV antibodies and antigens, or proteins from the virus itself. If HIV antigen called p24 becomes detectable in the blood before antibodies are
produced. Antigen/antibody tests are done in a laboratory. A test using blood from a vein can usually detect HIV infection 18 to 45 days after exposure, while those done using a drop of blood from a finger prick can take longer (18 to 90 days).

- Nucleic acid tests look for HIV genetic material (typically RNA) in the blood. This laboratory test can usually detect HIV infection 10 to 33 days after exposure. The test is expensive and not used for routine screening, but it may be used in some cases to detect early infection. This is the same type of test used to measure viral load and guide treatment for people living with HIV.

Many testing sites now use rapid oral or finger-prick tests. The oral test involves swabbing the upper and lower gums inside the mouth. The sample is then placed into a developer vial, with results available within 20 to 40 minutes. Home HIV self-testing kits are also available.

If an initial rapid test or self-test result is positive, it is important to see a health care provider for a follow-up laboratory test. If the initial HIV test was done through a lab, follow-up testing can usually be done using the same blood sample. HIV tests are generally accurate, but follow-up testing can confirm the diagnosis. If you get an HIV test after a potential exposure and the result is negative, get tested again after the window period end.

What’s the difference between anonymous & confidential testing?

With anonymous testing, you don’t have to give your name to anyone. With confidential testing, you supply your name during the testing process, but health care providers and government agencies in the United States are required by law to keep your testing information confidential, per the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Generally speaking, only your doctor or the facility where you have your test done has access to your medical records. However, many states have opted to use name-based reporting, which means if you test positive for HIV, your test result and name will be reported to state and local health departments for surveillance purposes. The state health department then removes all personal information about your test result (name, address, etc.) and shares the information with the CDC so it can track national HIV trends.

Since laws vary from state to state, if you are concerned about anonymity or disclosure, you should contact your local health department or any AIDS service organization hotline to find out what the law is in your area and where anonymous testing is available.

Using a home test or going to an anonymous testing site—which are available through departments of health in all states—are good ways of getting tested anonymously, which means that your name does not need to be used in order to have the test. You will have a conversation
with a counselor, but your identity will still be protected.

Where can I get tested?
HIV testing is widely available at a number of health facilities—in private medical practices, public health clinics, hospital emergency rooms, pharmacies and mobile testing vans run by clinics and health organizations.

You can also purchase at-home testing kits that can provide results within 20 to 40 minutes.

Counseling is an important part of HIV testing. It may be done face-to-face with a doctor, at a testing site with a counselor, or over the phone with a counselor working for a company that supplies home testing kits. These conversations play a valuable role in informing anyone who’s tested negative about maintaining their negative status and advising those who test positive about their health care.

Every state has its own HIV hotline from which you can obtain information about where to get tested, including anonymous testing sites, in those states in which anonymous testing is available.

You can search the POZ Health Services Directory to find an HIV testing site in your area.