

STRADA : Strategy to improve screening of infectious diseases, tuberculosis, HIV, HBV and HCV in the migrant population in France

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EA7334 Research team

- Methodology of patient-reported outcomes and of quality of life measures
- Development and validation of questionnaires measuring quality of life:
 - HIV
 - Hepatitis C
 - Irritable bowel syndrom
- Other projects:
 - Development of an electronic tool to monitor patient-reported outcomes

EA7334 Research team

- Collaborations:
 - Australia (Institute for Immunology and infectious Diseases, Murdoch University, Perth)
 - Canada (Centre hospitalier de l'Université de Montréal- CHUM)
 - Brazil (Centro de Referência e Treinamento DST/Aids, São Paulo)
 - US
 - Northwestern University, Chicago
 - University of Arkansas for Medical Sciences, Little Rock, Arkansas

STRADA Study

Context

- High prevalence of infectious diseases such as Tuberculosis (TB), HIV, Hepatitis B (HBV) and Hepatitis C (HCV) amongst migrants
 - 4536 cases of tuberculosis notified in France in 2015; 2/3 of them are amongst migrants.
 - Almost half the HIV new diagnoses in France concern migrants

Context

- All legal migrants undergo a mandatory medical check-up that includes a tuberculosis screening by chest X-ray
 - An electronic questionnaire has been developed in Switzerland to screen tuberculosis amongst asylum seekers (TB screen). It could detect active tuberculosis and replace systematic chest X-rays.
 - The mandatory medical visit is an opportunity to offer rapid HIV and hepatitis testing.
 - A screening questionnaire for risk factors (TROD screen) has been developed and could help target the screening offered.

Objectives

- To evaluate the efficacy of a screening strategy for infectious diseases based on risk-factor questionnaires amongst migrants during the medical check-up.
 - **HIV, HBV, HCV:** To validate a risk-factor based questionnaire (TROD screen) for the three infections and demonstrate its superiority to target screening compared with a screening based on the prevalence in the country of origin.
 - **TB:** To evaluate the performance of a risk-factors based questionnaire compared with the chest X-ray to screen for TB amongst migrants.

Methods

- Prospective, multicenter, observational study
- **TB:** Development of an extended version of the TB screen with 2 extra questions
 - The questionnaire is administered to all migrants undergoing the medical check-up, alongside the chest X-ray
 - Inclusion of 70,000 migrants to find 100 TB cases
- **HIV, HBV, HCV:** Introduction of rapid testing for HIV, HBV and HCV at OFII during medical check-up
 - Phase 1: A risk score will be validated (10,000 participants)
 - Phase 2: Its performance will be compared with a screening based on the country of origin (5,000 participants)
 - Health economics analysis
- **Participants informed of the independence between study and residence permit.**

Preliminary results

- TB study started in April 2017; 18 centres recruiting
 - 17544 participants included
 - 8 cases of active tuberculosis screened
- HIV, HBV, HCV: study started in December 2017; 16 centres recruiting
 - 2320 participants included

Health Literacy issues

Issues related to health literacy

- Informed consent (Do migrants really understand that the study is voluntary and independent from the issuance of a residence permit?)
- Understanding the questionnaires and replying accurately
- Understanding test results and receiving counselling in case of a positive result

Solutions

- Qualitative study amongst migrants and health professionals
- Development of the questionnaire and other study documentation in several languages with visual and audio aid
- Use of existing documentation in different languages
- Use of interpret services
- Partnerships with community organisations

Qualitative study- Methods

- This qualitative study checked acceptability: perceptions , barriers, motivations for conducting screening tests
- 34 legal migrants and 19 health professionals, in five immigration centers
- Validated methodology
- Team of 8 researchers
- Data saturation

Qualitative study- Results

- Migrants' acceptability of HIV and hepatitis testing was high
- Participants who accepted testing indicated a benefit for:
 - individual health
 - avoiding transmission
 - public health
 - access to healthcare, free access to the treatment
 - care of the Republic as of regular citizens
- Most preferred
 - rapid tests – shorter anxiety
 - to do it onsite – save time and money
 - trust in healthcare providers

Qualitative study- Results

- Reluctance for rapid testing was related to
 - anxiety about the immediate results
 - the perceived reliability of rapid tests

Few prefer GP they know

- Voluntary testing in the context of a mandatory medical visit did not present an obstacle for acceptability
- Most participants understood the independence between the residence permit and screening test
- Few others expressed concerns if screened HIV+

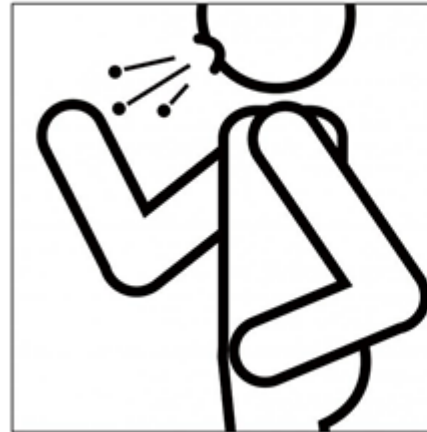
Translations

- Development of the questionnaire and other study documentation in several languages
 - Information note, questionnaires, negative results explanation note
 - Visual and audio aid
 - Online consent requested at the beginning of the questionnaire (also translated)
- Questionnaires tested for understanding during several pilot visits



您曾经接受过结核病的治疗吗？您曾患过结核病吗？

- 是
- 否
- 不清楚

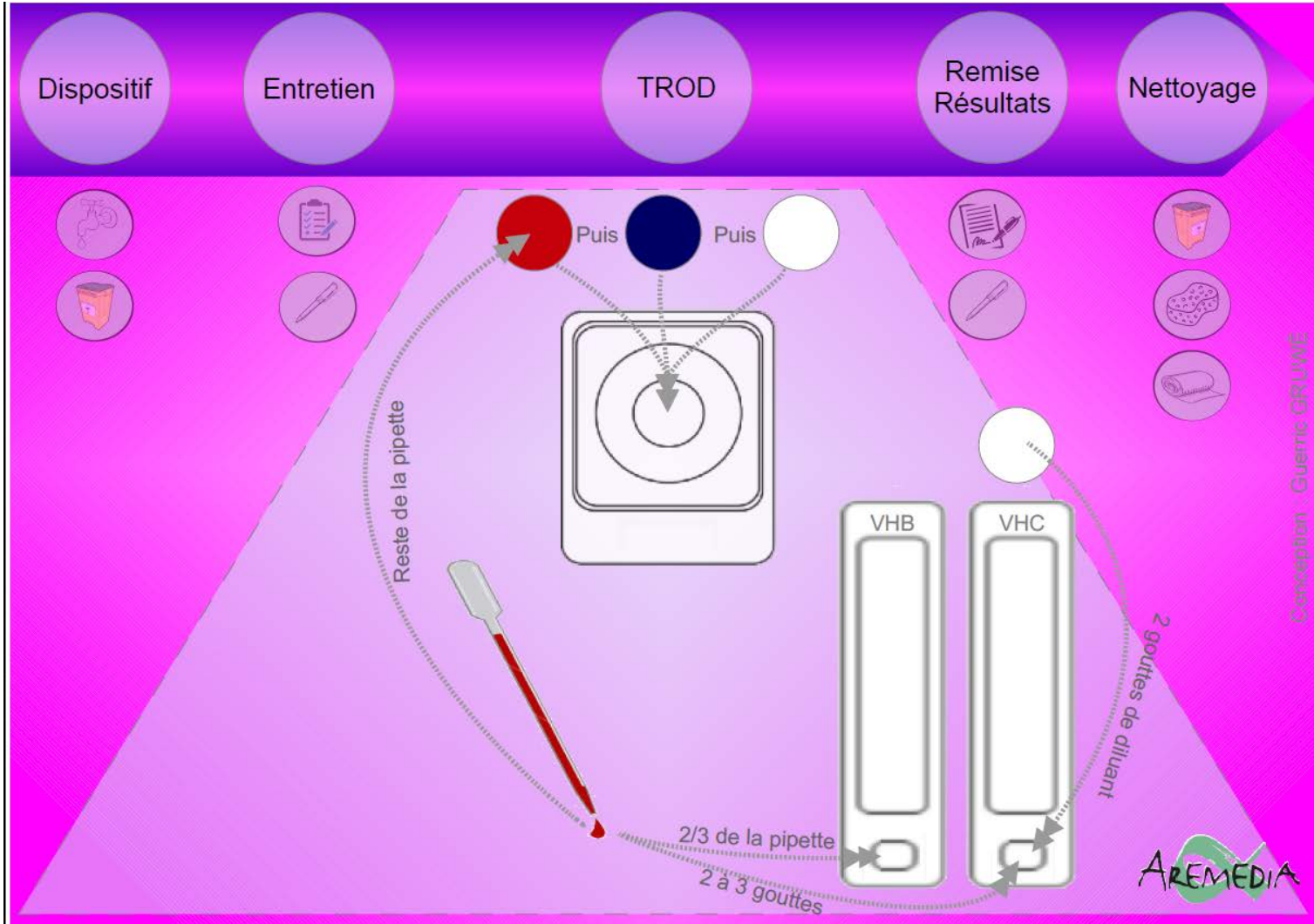


هل سبق لك أن سعلت حتى أن تبصق؟

- نعم
- لا
- لست أدري

Ваше участие является свободным и добровольным. Вы можете задавать вопросы и в любой момент отказаться от участия в исследовании без объяснения причин.





Use of existing documentation in different languages

- Survey of all existing information and prevention documents about HIV, hepatitis, sometimes unknown to health professionals
- Distributed to health professionals at OFFI

Duke bërë një depistim

Që është një kontroll special për të kërkuar nëse virusi është në trup apo jo. Për t'u siguruar që nuk jemi të sëmurë apo për t'u shëruar para se të jemi shumë të sëmurë dhe të afërmit. Për të mbrojtur familjen dhe të afërmit.

Depistim i zakonshëm :
Marrje gjaku (2 ditë)

Depistim i shpejtë : Marrje e gjakut në majë të gishtit (20 minuta)

* Nëse testi është pozitiv, duhet bërë një analizë gjaku për të qenë të sigurtë për rezultatin.

Use of interpret services

- Advocacy and organisational changes for a more widespread use of phone interpreters by health professionals at OFII
- Work with health professionals experimented in providing positive results to migrants
- Use of medical translation applications
- Currently not all tools are being used widespread.



Partnerships with community organisations

- Partnership established with community organisations and HIV fighting organisations working with migrants:
 - Steering committee
 - Training doctors and nurses at OFII
 - Reviewing questionnaire
 - Supporting migrants in case of a positive result (phone counselling, physical accompaniment to hospital, providing information)

Thank you for your attention