

An HIV test I wished I had offered

The Practice Nurse's story



Our patient SK is a 37 year old single mother with two teenage kids. She works as a secretary in a school. I have got to know her quite well over the years, and was shocked when I heard that she was in intensive care with severe pneumonia.

When it turned out that this had been due to HIV, one of our GPs, Dr BB, used a clinical meeting to update us all on HIV and we reviewed SK's case. We learned that, in general, patients do much better if their HIV infection is picked up early before the damage to their immunity is too severe.

We concluded that opportunities had been missed by almost every doctor and nurse in the practice. Including me.

SK had consulted a practice nurse on four occasions – for repeats of oral contraception (2 occasions, 16 months and 5 months prior to her admission]. She had seen me about her recurrent vaginal candida. She had also had a cervical screening test and been found to have severe dyskariosis. None of the three of us practice nurses had been aware that HIV increases the risk of vaginal thrush and also of progression to cervical cancer and that, in a sense, this might have alerted us.

Me and my nurse colleagues found out quite quickly that there is no barrier to practice nurses offering HIV tests. In fact we found out that in areas with higher prevalence than here, schemes are being run where health care assistants offer HIV tests to newly registering patients! At least one of our doctors was pretty surprised when we pointed that out. We started to explore means of offering HIV tests in a range of clinical situations and have increased our testing substantially. We now review the cases of those women referred for colposcopy.

It wasn't so much that I was scared in some way of offering HIV tests before (though some of my colleagues were). It was more a question of 'out of sight out of mind'. I am happy we have all changed our practice and taken this on board.