A. Background

The HIV (Human Immunodeficiency Virus) antibody test, since its availability in 1985, has gradually become an important diagnostic investigation for people who are at risk of the infection. Because of the social and psychological implications of the disease, HIV tests should generally be performed on a voluntary basis and with expressed consent of the individual (see guidelines on consent for HIV testing, June 1992). Voluntary testing also provides important epidemiological information for monitoring public health programme for prevention and control of HIV/AIDS.

Another surveillance method, the Unlinked Anonymous Surveillance Screening (UAS), has gained popularity in the recent years because of the minimum of participation bias involved. UAS was first considered by the Scientific Working Group and then endorsed by the Advisory Council on AIDS at its meeting on 8 November 1990. The scheme has expanded considerably, and over 20,000 tests have been performed on various groups under the supervision of the Scientific Working Group in the past 2-3 years.

This document provides guidelines on the implementation of UAS, and is based on recommendations given by the World Health Organization in its proposed international guidelines issued in June 1989.

B. Definition of UAS

The testing of specimens for markers of infection after elimination (unlinking) of all personal identifying information from each specimen.
C. Recommended Guidelines

1. UAS for HIV surveillance may be performed on specimens which have been proved to be useful for detection of the HIV antibody in the laboratory. The tests may be done on blood, urine, saliva or other specimens as appropriate.

2. UAS involves use of specimens already collected for other purposes. Appropriate consent should be obtained for the procedure’s primary purpose.

3. No additional consent is required from the individual for undertaking the HIV antibody tests in the UAS system.

4. No information should be requested in addition to that normally collected for the primary purpose for which the specimen was obtained.

5. All data that could potentially identify the individual must be removed from the specimens before they are tested by the laboratory for UAS.

6. There should be no possible way in which test results could be traced back to individuals.

7. Staff involved should be trained to adhere to the UAS protocol, and supervised to avoid breach of anonymity.

D. Other Considerations

1. The taking of specimens primarily or solely for UAS falls outside the scope of provisions detailed in section C. Because of ethical concerns, such programmes should be considered separately by the involved authorities.

2. In general, voluntary testing with counselling should be made easily available so that those individuals who wish to know their HIV status can do so. It is important that such testing is offered through a separate system.

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