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# Disclosure and perceived HIV-related discrimination in Danish dental clinics

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## BACKGROUND

People living with HIV (PLHIV) are susceptible to increased severity or frequency of oral diseases e.g. oral candidiasis, necrotizing gingivitis, periodontal lesions, oral hairy leukoplakia, ulcerative diseases, and Kaposi's sarcoma. Regular dental visits and disclosing HIV positive status is thus recommended, allowing for adequate prevention and timely treatment of oral diseases.

Scarce data exist on the extent to which PLHIV perceive discrimination and disclose their HIV status within the health care system and particularly within dental health care.

This study focused on the following issues from the perspective of PLHIV:

How often do PLHIV disclose their HIV status to the attending dentist?

Do PLHIV perceive discriminative issues when accessing dental care?

Are PLHIV being refused dental treatment because of their HIV seropositivity?

Which factors are associated to disclosure and perceived discrimination?

Is fear of discrimination a barrier to disclosing HIV status?



#### **METHODS**

- Cross-sectional study design, self-administered questionnaire
- Data were collected at an out-patient medical clinic at Rigshospitalet, Copenhagen, Denmark
- Consecutive sampling: Enrolment offered to 250 PLHIV in the period March 2009 May 2009
- Univariate statistical analyses were applied: Categorical data were analysed with Chi-square test for equality of proportions. Continuous data were tested for normal distribution and compared by means of a two-sample *t*-test

#### RESULTS

226 PLHIV were enrolled (90% response rate, 87% male) of which 21 respondents had not visited a Danish dental clinic since they were diagnosed with HIV. The 21 participants were excluded from subsequent analyses.

#### Disclosure

In total, 44 respondents (27%) had never informed a dentist of their HIV infection (**Figure 1**) and 68 (33%) had not disclosed to their current dentist (**Figure 2**). Factors significantly associated with disclosure status are presented in **Table 1**. Additional variables such as age, sex, dentist having asked for information about the patients' HIV status, disclosure to the general medical practitioner and co-workers, dental anxiety, and believing the dentist is automatically informed via patient records were not significantly associated to disclosing behaviour.

Of the respondents who had not disclosed to their current dentist, 40% (27/68) reported that they had avoided disclosing their HIV positive status due to fear of being discriminated against (**Figure 3**).



at p<0.05		
Factors associated with disclosure status	OR	95% CI
Disclosed ≥ 1 family member	3.78	1.83 - 7.83
Disclosed ≥ 1 friend	5.19	2.22 - 12.14
>10 yrs since HIV diagnosis	6.15	3.38 - 11.19
Trusting the dentist's confidentiality	6.16	2.59 - 14.63
Think you are legally obliged to inform dentist	17.30	4.02 - 74.41
Believe disclosure is necessary for optimal oral care and advice	19.17	7.56 - 48.59



## **Perceived discrimination**

Of the 148 respondents who had disclosed their HIV status to a dentist, 30 (20%) had felt discriminated against on the grounds of their HIV positive status in a Danish dental clinic (**Figure 4**). Among these 70% (n=21) reported perceived discrimination within the past ten years, and 26% (n=8) within the past year.

15 respondents (10%) had experienced being denied treatment due to their HIV infection (**Figure 5**), of which about half (n=7) reported this to have occurred within the past ten years, 3 participants within the past year.

The only variable significantly related to perceived discrimination in a Chi-square test was: 'general anxiousness attending a dentist' (p=0.032).



### CONCLUSIONS

The results from this study imply that non-disclosure, discrimination and denial of treatment are present-day concerns in Danish dental clinics, and further indicate that fearing discrimination represents a barrier to disclosing. These findings call for an interdisciplinary approach to promote non-discriminatory attitudes in dental clinics and to increase patients' awareness of potential health benefits gained from disclosure.



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