In recognition of National HIV/Aging Awareness Day, September 18th, the Presidential Advisory Council on HIV/AIDS (PACHA) stands united in our commitment to address the unique challenges faced by older adults aging and vulnerable to HIV. It is imperative that we recognize and attend to the intersecting issues of aging and HIV, ensuring that older adults receive the support, care, and respect they deserve.

Whereas, the Centers for Disease Control and Prevention (CDC) currently recommends that in all healthcare settings, HIV testing should be performed at least once as part of routine healthcare for all individuals between ages 13 and 64, and further recommends that people at heightened vulnerability to HIV acquisition get tested for HIV at least once a year;

Whereas, HIV acquisition is not confined to specific age groups, necessitating a comprehensive and inclusive approach to HIV testing;

Whereas, barriers to HIV testing among people over 50 include low perceived HIV risk and clinician preconceptions about older people;

Whereas, according to CDC data in 2019, 17% of new HIV diagnoses were among persons aged 50 and older;

Whereas, older people are at the highest risk of all age groups for having Stage 3 disease (AIDS) at the time of diagnosis such that in 2021, 34% of people 55 and older were diagnosed with Stage 3 disease (AIDS) at time of HIV diagnosis;

Whereas, older adults are at increased risk for immunocompromising conditions such as cancer, which can further increase risk of mortality if HIV is undiagnosed;

Whereas, the existence of an upper age limit in the CDC HIV testing guidelines may inadvertently perpetuate the misconception that older people are not susceptible to HIV acquisition and may deter healthcare providers from recommending HIV testing to this population;

Whereas, the evolving landscape of healthcare and advancements in HIV prevention and treatment underscore the importance of ensuring that individuals of all ages have equitable access to sexual health, HIV prevention, and comprehensive age-appropriate healthcare services;
Whereas, current CDC HIV testing guidelines do not mention or include individuals 65 and older who may be at risk for HIV acquisition and may unintentionally reinforce beliefs that people age 65 and older are not vulnerable to HIV acquisition;

Whereas, CDC is currently working to update its HIV testing guidelines to take into the account the current state-of-the-science in HIV, which has evolved substantially since CDC issued its last HIV testing guidance in 2006;

Be it resolved, PACHA recommends that CDC remove the upper age limit of its HIV testing recommendations when it releases its revised HIV testing guidelines, such that HIV testing should be performed at least once as part of routine healthcare for all individuals ages 13 and older, and further that people at heightened vulnerability to HIV acquisition receive HIV testing at least once a year.