

The Cost of Complacency: Projecting the Burden of HIV Care in Eight European Countries

Priscila Radu, [Helen Hayes](#), Ellie Tunnicliffe, David Mott, Grace Hampson

Background

- Despite significant progress in tackling the HIV epidemic in the WHO European region, many individuals continue to be affected.
- In 2023, an estimated 1.3 million people acquired HIV worldwide, more than three times the 2025 target of 370,000 or fewer.
- In the same year, 24 out of 26 reporting countries from the EU/EEA fell short of the goal of 95% of PLWHIV being diagnosed.
- It is estimated that in the WHO European Region, more than half of those diagnosed in 2023, were diagnosed late, and around a third were in an advanced stage.

Aim

- If current efforts and available tools for tackling HIV remain unchanged — or deteriorate further, as is possible given recent geopolitical instability and aid cuts — Europe risks falling significantly short of global targets by 2030.
- There is a cost to missing key HIV targets, which we label the **“cost of complacency”**.
- We examine the economic consequences of continued HIV transmission in eight European countries (France, Germany, Italy, Spain, UK, Belgium, Ireland, and Poland).

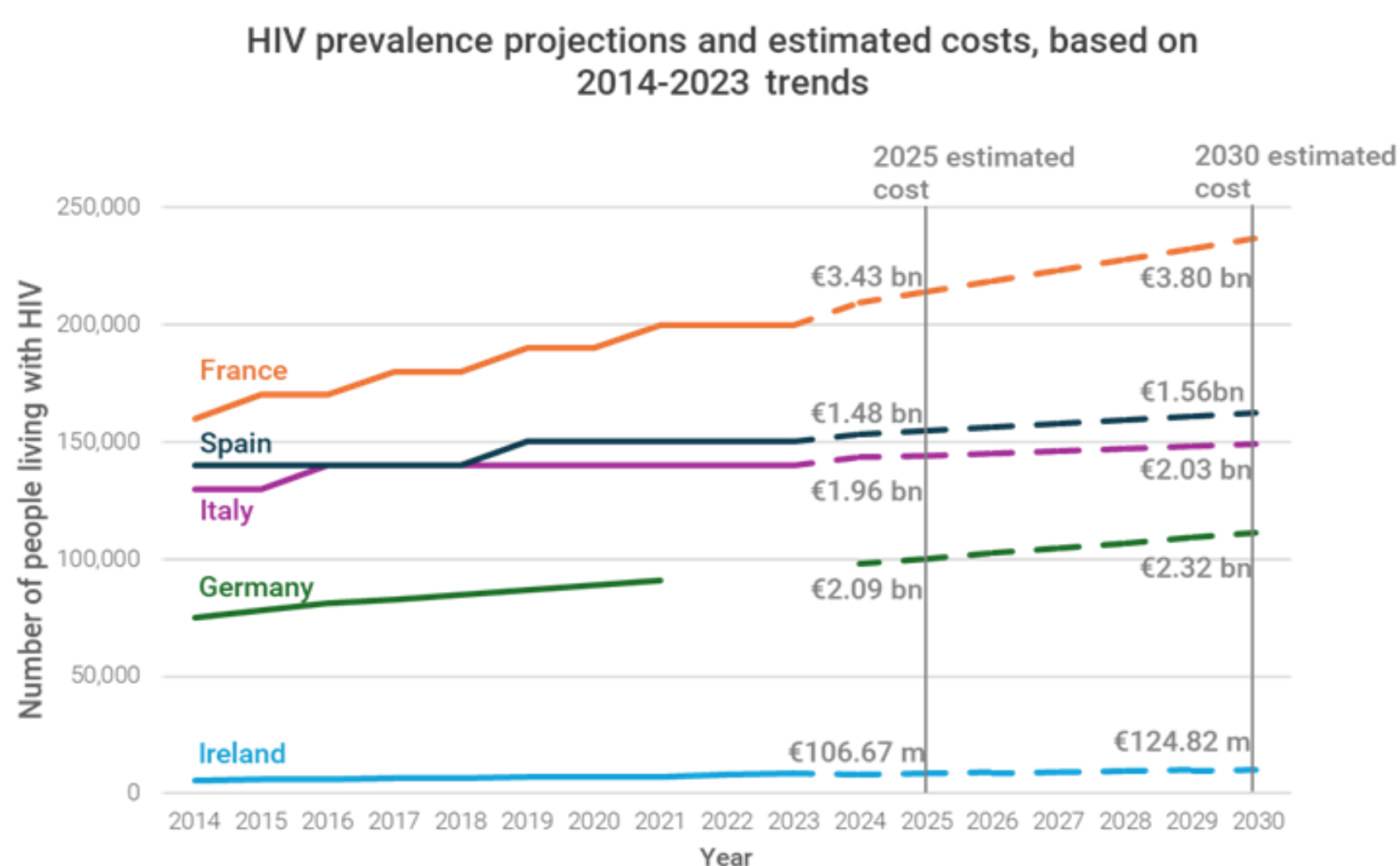
Methods

- Examine historical modelled prevalence and diagnoses figures.
- Apply linear projections based on historical trends (2014-23, 2019-23, 2020-23) to estimate future HIV prevalence and diagnoses through 2030.
- Apply healthcare system and lifetime costs to new diagnosis projections to calculate the cost of complacency.
- Conduct expert interviews to identify key barriers and solutions to progress.

Results (1)

Future increases in HIV prevalence will incur significant economic costs

The estimated prevalence of people living with HIV is projected to increase, driven by new infections, and people living longer with HIV. As such, the cost of complacency is also projected to increase.



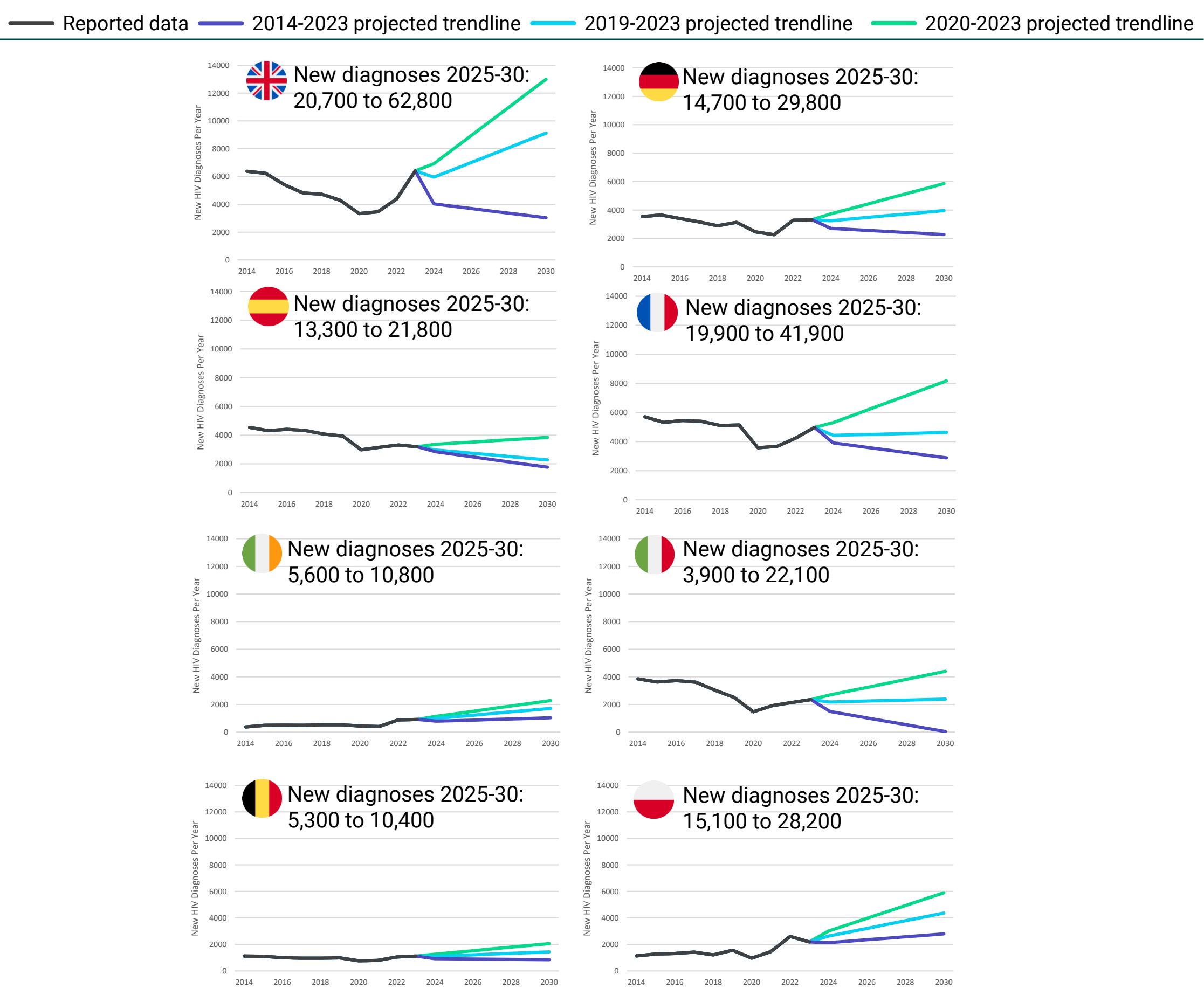
In the five countries with available data:

The number of people living with HIV is projected to reach **670,318** by 2030.

The total estimated cost of HIV care between 2025 and 2030 is **€56.7 billion**.

New diagnoses are not on track to meet UNAIDS targets

Projected numbers of people becoming newly diagnosed with HIV shows a concerning recent uptick in diagnoses.



In the eight countries with available data:

Approximately **98,000** new diagnoses may occur between 2025 and 2030 without increased intervention to alter the current trajectory.

The **total additional cost** of new diagnosed cases between 2025 and 2030 amounts to more than **€4bn** across all countries.

The **additional lifetime costs** of new infections occurring between 2025 and 2030 could reach nearly **€36bn** across all countries.

No country is on track to reach zero new diagnoses by 2030 based on any trajectory.

Results (2)

Key barriers

Barriers and solutions were assessed based on magnitude of impact and feasibility, focusing on the most pressing and achievable issues. Key emergent barriers included:



On an individual level, **knowledge and awareness** of HIV and the risk of infection.



On a societal level, the impact of **stigma** and limited **community-based involvement** are featured as most important.



On the healthcare level, HCP **knowledge** of HIV and those at risk and the fact that testing and treatment are only available in **medicalised settings**.



Regarding policy and research, limited **government commitment** and inconsistency in **surveillance** within and between countries.

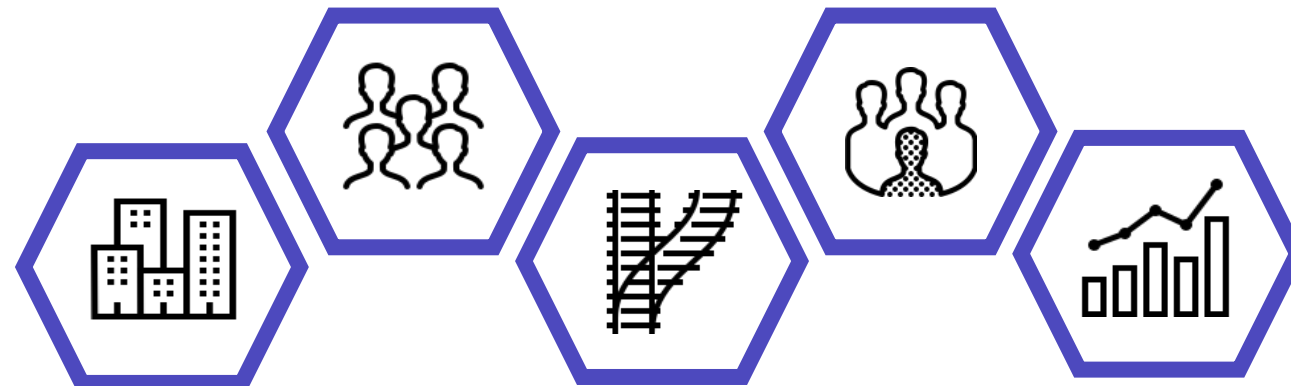
Key solutions

The following five actions are vital to bringing Europe back on track to meeting the 2030 UNAIDS targets:

Engaging communities
Partnering with community organisations to develop and deliver tailored support programs.

Combating stigma
Through education both in the community and within the healthcare systems.

Expanding access to services
Easy access to HIV testing, prevention, and treatment, outside of medicalised settings and adequate access to all elements of healthcare for people living with HIV.



Diversifying treatment options
Long-acting injectable prevention and treatment offer important alternatives that may better align with people's preferences, and enable direct observed adherence, potentially reducing transmission.

Strengthening data collection
Prioritising robust data collection across Europe with special effort made to address data gaps for vulnerable groups that are less visible to the healthcare system.

Discussion

- The number of people living with HIV is projected to increase up to 2030, and with that associated healthcare system costs. This is a combination of people living longer with HIV as well as new infections.
- Cost projections are based on annual healthcare system costs, and do not include wider societal costs. New research is needed on the societal and out of pocket costs to provide a comprehensive understanding of the true cost of HIV.
- Recent diagnosis data shows a concerning uptick in some countries, especially in Ireland, the UK and Poland. We are yet to see if the recent surge in diagnoses captures a backlog of previously undetected cases due to the pandemic, testing improvements, or a genuine increase in transmission.
- Europe is at a pivotal point in managing the trajectory of the HIV epidemic.
- Failure to improve HIV prevention and treatment strategies in Europe places increasing financial burden on healthcare systems.

Key takeaways

- Without increased intervention, approximately **98,000** new diagnoses are projected between 2025 and 2030, with additional treatment costs exceeding **€4bn** and lifetime costs of new infections potentially reaching nearly **€36bn**.
- The total estimated cost of HIV care in the countries in this analysis between 2025 and 2030 is **€56.7 billion**.
- No country is on track to reach zero new diagnoses by 2030.
- Urgent intervention is required to get Europe back on track to achieving UNAIDS targets.