



## **Peer review plan for “Updated Recommendations for Human Immunodeficiency Virus (HIV) Screening of Gay, Bisexual and Other Men who have Sex with Men (MSM) in Clinical Settings”**

**Title:** Human Immunodeficiency Virus (HIV) Screening of Gay, Bisexual and Other Men who have Sex with Men (MSM) in Clinical Settings: Updated Recommendations

**Subject of Planned Report:** This report will outline the current scientific data regarding screening MSM for HIV and provide updated recommendations for the frequency of screening for this group. The report will not address frequency of screening for persons other than MSM in the United States.

**Purpose of Planned Report:** The purpose of this report is to provide guidance on how frequently MSM should be screened for HIV in clinical settings. The planned report will outline the current state of the scientific evidence on frequency of screening, and will update the 2006 CDC recommendations for HIV screening in clinical settings among MSM.

**Type of Dissemination:** ISI

**Timing of Review:** June – August 2016

**Type of Review:** individual

**Opportunities for the Public to Comment (How and When):** In 2014, subject-matter experts participated in a consultation describing the results from a systematic literature review of the scientific evidence published between 2005 - 2014 comparing annual HIV screening for MSM versus more frequent (e.g., 3- to 6-month) screening intervals, weighed the relative risk and benefits to screening all MSM or subgroups of MSM at these frequencies, and identified additional data needed for future analyses. Subject-matter experts were invited due to their knowledge of the research on frequency of HIV screening (including cost-effectiveness); experience managing HIV screening programs for MSM; or knowledge about the opinions of MSM with regards to HIV screening. Draft versions of the HIV screening recommendations and supporting data were also presented for comment at two public conferences: the United States Conference on AIDS (USCA) annual meeting in 2013, and 2014. Additional public engagement and verbal comment was solicited in August 2015 from members of community-based organizations who conduct HIV screening among MSM.

**Peer reviewers provided with Public Comments before the Review:** No; comments will be provided at time of the review.

**Anticipated number of Reviewers:** 3

**Primary disciplines of Expertise:** Researchers on cost-effectiveness of HIV screening programs; directors and administrators of HIV/AIDS prevention and screening programs.

**Reviewers Selected by (agency or designated outside organization):** CDC

**Nominations Requested for Reviewers:** No

### **Charge to Peer Reviewers:**

CDC has determined that the updated recommendations for the frequency of HIV screening among gay, bisexual and other men who have sex with men (MSM) constitute scientific information that will have a clear and substantial impact on important public policies and private sector decisions. The Information Quality Act requires peer review of these draft recommendations by specialists in the field who were not involved in their development to ensure the quality, objectivity, utility and integrity of information disseminated by Federal agencies. We would like to invite you to serve as a peer reviewer.

These recommendations describe a review of the scientific literature comparing whether there are benefits to MSM screening for HIV at a higher frequency (biannually or quarterly) compared with the previous recommendation made by CDC in 2006 that MSM should be screened at least annually. They also describe the results of an expert consultation held during 2014 and considerations for future research. They are intended for use by clinicians and other health care providers authorized to conduct HIV screening. In your review of the recommendations, we ask that you:

1. Provide an evaluation of the updated recommendations overall and their applicability for screening MSM with HIV;
2. Evaluate the appropriateness of the methods used to develop these recommendations and the strength of the authors' inferences;
3. Point out any omissions or oversights in the literature cited as the evidence base for these recommendations;
4. Identify any biases, oversights, omissions, or inconsistencies in the interpretations, findings, and conclusions;
5. Provide advice on the reasonableness of judgments made from the scientific evidence;
6. Ensure that scientific uncertainties are clearly identified and characterized, that the potential implications of any uncertainties for the proposed recommendations are clear, and
7. Assess whether the authors sufficiently acknowledge limitations in the evidence used to develop the recommendations and any limitations of the recommendations themselves for the intended purpose of screening MSM for HIV infection.

We would also welcome other comments, for example, on improving their implementation or uptake or other suggestions about the use of terminology, etc.

Thank you once again for your assistance with the review of these updated recommendations. We recognize and appreciate the commitment of time and energy this will involve. After receiving your comments, we will forward to all reviewers a copy of CDC's responses to all the comments received and also post them on <http://www.cdc.gov/hiv/policies/planning.html> without commenter attribution.

**Peer Reviewers:** Pending Confirmation

**Additional elements to be added to the public posting as they become available**

- Names of Confirmed Peer Reviewers •  
Peer Reviewers' Comments.
- CDC's Response to Reviewers' Comments- completed and posted on <http://www.cdc.gov/hiv/policies/planning.html>

Page last updated: June 10, 2016