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St. Paul's Hospital, Vancouver, B.C.



BC-CfE-led STOP HIV/AIDS pilot transforms approach to HIV testing

Routine HIV testing will help find those unaware of their infection

The Seek and Treat for Optimal Prevention of HIV/AIDS (STOP HIV/AIDS), a first of its kind pilot program in Canada, has given B.C. a unique opportunity to identify the inadequacies of earlier approaches to HIV testing and improve diagnosis, linkage to care, and retention in care and treatment.

hris Buchner, regional director of prevention at Vancouver Coastal Health (VCH) explained that for many years we have focused almost exclusively on targeted testing of high-risk populations.

While successful in diagnosing some, the status quo approach also has some important limitations, including too many late diagnoses, and thus, inferior health outcomes and potentially less impact on curbing transmission.

"STOP has provided us with an opportunity to significantly re-evaluate the way we approach HIV testing," said Buchner. "What is needed is to make HIV testing a routine part of health care."

Provincial recommendations for HIV testing were modified last year to recommend an annual HIV test for all sexually active adults. Building on this recommendation, VCH and Providence Health Care

initiatives to increase opportunities for testing. Among them, in October this year, they will launch an acute care testing pilot in Vancouver hospitals where patients will be offered an HIV test upon admission to key programs.

VCH and PHC have also escalated efforts to increase access to HIV testing for high-risk populations. Among them, nurses are collaborating with community partners on the introduction of a HIV testing pilot involving peers in the Downtown Eastside. And HIV testing has been increased for Aboriginal people at the Vancouver Native Health Society.

As a result of these efforts, there were 7,482 HIV tests conducted in Vancouver in August 2011. That is the highest monthly total in many years, according to statistics from the BC Centre for Disease Control (BCCDC).

Northern Health (NH), VCH and PHC manage the regional implementation of the pilot with support from the Provincial Health Services Authority (PHSA), including the BCCDC and BC Women's Hospital, under the leadership of the BC Centre for Excellence in HIV/AIDS (BC-CfE).

Dr. Susan MacDonald, Northern Interior medical director of NH, provided highlights of the progress made by NH in implementing the STOP HIV/AIDS pilot. She said NH has appointed an HIV-dedicated pharmacist to provide education about highly active antiretroviral therapy (HAART) to HIV-positive individuals in person or by telehealth (audio and video conferencing) for those living outside Prince George. In partnership with the Northern Aboriginal HIV/AIDS Task Force and Public Health, NH has conducted discussions over the past year with the leadership of the First Nations communities in the north to gain valuable information about community readiness and ways to offer culturally sensitive HIV testing and care.

PHSA has also been delivering on key STOP HIV/AIDS goals. Dr. Gina Ogilvie, medical director of clinical prevention services at BCCDC said that PHSA is currently providing point of care HIV testing directly at BCCDC-operated clinics treating sexually transmitted infections and is delivering test kits to other community sites throughout B.C.

STOP HIV/AIDS is a four-year, \$48-million pilot project that was launched by the B.C. government in 2009. It is currently underway in Vancouver's inner city and Prince George, expanding rapid testing and access to HAART to hard-to-reach populations such as injection drug users and sex trade workers.

The pilot is based on the BC-CfE-pioneered groundbreaking Treatment as Prevention strategy, which advocates for increased testing and expansion of HAART, both to prevent HIV from progressing to AIDS in individuals and to dramatically reduce new HIV diagnoses in the community.





Award-winning health economist joins BC-CfE

Dr. Bohdan Nosyk has joined the BC Centre for Excellence in HIV/AIDS (BC-CfE) as a health economist. He has published 26 peer-reviewed manuscripts and is considered a leading expert in the statistical and mathematical modelling required for economic evaluations of health programs.

Nosyk has evaluated several large intervention programs in Canada and the U.S. These include the BC Methadone Maintenance Treatment Outcome Study, the North American Opiate Medication Initiative and California's Substance Abuse and Crime Prevention Act.

In an interview with Forecast, Nosyk talked about his new role at the BC-CfE and how he stumbled upon a career in health economics.

"Health economics was a subdiscipline I had always wanted to enter. I just saw a world of possibilities given how little has been done, and how great the challenges are to maintain and improve our health and social systems," said Nosyk. "My mindset has been

about maximizing the social welfare function, to use an economics term. I think an economist working in a health research group is in a great position of doing just that."

Nosyk has a PhD in epidemiology and a master's degree in economics from the University of British Columbia. He recently completed a post-doctoral fellowship at the University of California, Los Angeles Integrated Substance Abuse Programs. Nosyk has won several awards and research grants that amount to over \$2 million.

Below are excerpts from the interview:

Q: Describe your new role at the BC-CfE.

A: I am very excited to join the BC-CfE team. My research interests are in the areas of drug addiction and HIV and the BC-CfE is at the leading edge in both these areas. I will bring my background in epidemiology and economics to evaluate BC-CfE's health programs, technologies and interventions to ensure they provide good value for money. It's not enough for health programs to deliver only health benefits. In this day and age, they must be financially sustainable as well.

Q: What do you hope to accomplish in this role?

A: In the long term, I will be developing a repertoire of health economics research within the disease areas covered by the BC-CfE. In the immediate future, I will focus on evaluating the cost-effectiveness of the BC-CfEpioneered Treatment as Prevention strategy, which has been endorsed internationally as a model to stop HIVand AIDS-related deaths and prevent new HIV cases.

Q: What would success look like for you at the BC-CfE?

A: I really want to see the research we do to be translated into practice. I want to see it at the street level, working for the citizens of B.C. and really have a tangible impact on population health.

MAT program helps unstably housed HIV clients adhere to treatment

Researchers at the BC Centre for Excellence in HIV/ AIDS (BC-CfE) investigated the association between antiretroviral adherence and the use of supportive services, such as the Maximally Assisted Therapy (MAT) program among unstably housed HIV-positive individuals in Vancouver.

The MAT program is located at the Downtown Community Health Centre, an inner city primary care clinic that is a part of Vancouver Coastal Health. Open every day of the year, the program uses a multidisciplinary approach to support Downtown Eastside's HIV-positive clients with a history of addictions, mental illness and homelessness to minimize barriers and improve access to antiretrovirals. The program's team of medical experts and social workers provide a number of support services including offering a daily breakfast, arranging and accompanying clients to medical appointments, and providing assistance in finding housing.

"We help stabilize people living with HIV by connecting them to the health care system," said Christine Gillespie, clinical coordinator of the MAT program. "Without a program like ours, many people living with HIV in the Downtown Eastside wouldn't be accessing antiretrovirals, thus leading to poor health outcomes and early death."

The study participants were enrolled in the BC-CfE's Longitudinal Investigations into Supportive and Ancillary Health Services (LISA) cohort. Of the 212 unstably housed participants, the study found that those who



BC-CfE's Surita Parashar says housing plays a key role in determining health outcomes for HIV-positive clients.

attended the MAT program were almost five times more likely to adhere to their medications than those who did not. The study defined unstable housing as living in a single room occupancy hotel, shelter, hostel, treatment centre, prison or having no fixed address.

"Housing plays an integral role in influencing health trajectories and shaping health outcomes," said study author Surita Parashar. "These findings suggest that in the absence of sustainable housing solutions, programs such as MAT are crucial to helping unstably housed HIV-positive people access and adhere to treatment."

This study was recently published online in AIDS and Behavior.

HAARTbeats

South Africa announces earlier HIV treatment

South Africa's deputy president Kgalema Motlanthe announced in August that HIV-positive people in South Africa will now have access to antiretrovirals sooner.

The decision allows for any HIV patient with a CD4 cell count (percentage of white blood cells) of 350 or below to access antiretroviral therapy immediately. Before now, HIV patients had to wait until their CD4 counts dropped below 200. The World Health Organization recommended the higher threshold in 2009.

"The decision to start people on HIV treatment earlier, before they become sick with diseases like tuberculosis, marks a critical moment for this country that is so hard hit by the epidemic," PlusNews quoted Gilles van Cutsem, Médecins Sans Frontières' medical director in South Africa. "We also know that HIV treatment dramatically reduces the spread of the virus to others - by making people more than 96 percent less infectious. Early treatment is better for everyone: for the individual and for the community."

Research

BC-CfE researcher awarded Michael Smith Foundation's Post Doctoral Fellowship Award

Dr. Kathleen Deering, a researcher with the Gender and Sexual Health Initiative of the BC Centre for Excellence in HIV/AIDS (BC-CfE), is a recipient of a \$120,000 Michael Smith Foundation for Health Research (MSFHR) Post Doctoral Fellowship Award.

The research scholar and trainee funding awards, announced in August, will fund her research that explores the social, structural and environmental factors that place female sex workers in Vancouver at an elevated risk for HIV and sexually transmitted infections, violence, and poor access to health services.

Dr. Deering's research will aim to inform public health policy recommendations and the development of effective safer-environment interventions to improve the health and safety of sex workers.

Health Canada Advisory

Unlicensed HIV home test kit

On September 12, Health Canada issued a public advisory alerting Canadians that a Toronto company, ACCU-METRICS, has been advertising the sale of HIV home test kits through their website.

Health Canada has advised Canadians not to use the ACCU-HIV 1 & 2 Saliva Test or any other HIV home test kits as they are not authorized for home use in Canada. Health Canada's advisory noted that inaccurate test results from unlicensed HIV test kits may provide Canadians with false test results, such as a failure to indicate HIV in an infected individual, or indicate HIV when none is present.

Consumers and health professionals wanting more information about this advisory from Health Canada can contact their Public Enquiries Line at 613-957-2991, or toll free at 1-866-225-0709. You can review Health Canada's full advisory at: www.hc-sc.gc.ca.

If you are a B.C. resident and would like more information about HIV testing, please visit the BC Centre for Disease Control's website at: www.bccdc.ca and search for HIV testing

Forefront Lecture Series

Date: Wednesday, October 5, noon to 1 p.m.

Location: Hurlburt Auditorium, St. Paul's Hospital

Speaker: Dr. Will Small, Qualitative Research Program Coordinator, Urban Health Research Initiative, a program of the BC-CfE

Lecture: Injection drug use and drug-related harm in Vancouver — Findings from a program of qualitative research

Contact: Gina Willis at 604-682-2344 ext. 69093 or gwillis@cfenet.ubc.ca

A light lunch and refreshments will be served.

BC Centre for Excellence in HIV/AIDS

- Improve the health of British Columbians with HIV through comprehensive research and treatment programs;
- Develop cost-effective research and therapeutic protocols;
- Provide educational support programs to health-care professionals;
- Monitor the impact of HIV/AIDS on B.C. and conduct analyses of the effectiveness of HIV-related programs.

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