

BC-CfE's decades-long HIV/AIDS leadership takes centre stage in BC and Ottawa on World AIDS Day

C leads the way nationally

In 1996, BC was the epicenter of the HIV/AIDS crisis in Canada, with the province diagnosing up to 800 people a year at the height of the crisis. Being in the 'eye of the storm' forced the province and researchers to address the disease with an innovative spirit and ground-breaking treatment - setting the standard nationally and around the world.

New research from the BC Centre for Excellence in HIV/AIDS (BC-CfE) shows by 2020 90% of people living with HIV in BC will be diagnosed, 91% of those diagnosed will be on treatment, and 90% on effective treatment and unable to pass on HIV (virologically suppressed), showing BC is leading the way in Canada.

However, the research also found disparities: females are 30% less likely to be on HIV treatment compared to men; people with a history of injection drug use are 49% less likely to be on treatment than other groups; and people ages 18 to 29 are 35% less likely to be on treatment. one-on-one meeting with the minister, Dr. Montaner discussed Canada's progress in HIV prevention, the revolutionary Canada-wide phylogenetics program developed by BC-CfE to pinpoint clusters of HIV infection nationally and how Treatment as Prevention[®] (TasP[®]) can be further applied to Targeted Disease Elimination (TDE) in the realm of infectious and noninfectious diseases. Montaner discussed Diabetes Canada's recent adoption of the TasP[®]-based 90-90-90 Target as the first example of applying TasP[®] to a non-infectious disease.

"Spearheaded by the work of Dr. Julio Montaner and the BC Centre for Excellence in HIV/AIDS, BC is a leader in research, prevention and treatment for people living with HIV/AIDS. From the 90-90-90 United Nation program on HIV/ AIDS to the world-renowned Treatment as Prevention[®] strategy that originated from BC-based research and was implemented through the Seek and Treat for Optimal Prevention of AIDS program, we continue to support and encourage innovative approaches "People forget that the universal access to HIV medication enjoyed by people in British Columbia is not a reality for all Canadians," says Dr. Julio Montaner. "While we welcome the guidelines, we need a clear, national and consistent response to de-criminalizing HIV. Simply declaring it a public health issue, and not a criminal issue, I fear, doesn't not go far enough."

The Justice Canada report states criminal law should not be applied to people living with HIV who are on treatment, not on treatment but use condoms, or engage only in oral sex (unless other risk factors are present and the person living with HIV is aware of those risks) because the possibility of transmission "is not met" in these circumstances. However, as we have seen in the case of Ontario, provinces can selectively apply the guidelines.

Ontario has announced the province will refrain from prosecuting people who have a suppressed viral load for six months – leaving all others who manage the risk of transmission open to criminal prosecution.

BC-CfE marks World AIDS Day in Ottawa

BC-CfE Director Dr. Julio Montaner attended a flagraising event at World AIDS Day in Ottawa where he spoke about the importance of education and patientcentered services in fighting HIV/AIDS. Montaner appeared alongside UNAIDS Executive Director Michel Sidibe for the presentation of the UNAIDS report *Blind Spot*, highlighting the importance of reaching out to men and boys to get tested for HIV and access and adhere to treatment.

Dr. Montaner participated in panel discussions with Minister of Health, Hon. Ginette Petitpas-Taylor. In a to HIV treatment and prevention." – Premier John Horgan statement on World AIDS Day

A path to HIV decriminalization

Justice Minister, Judy Wilson-Raybould announced Canada-wide guidelines for the prosecution of HIVrelated cases in the report, *Criminal Justice System's Response to Non-Disclosure of HIV*. While the report addresses the broad over-criminalization of HIV in Canada, the BC-CfE believes the guidelines could go further to prevent HIV criminalization across the country. "The still-present fear of criminalization under these unevenly applied guidelines may keep people from getting tested and treated," says Dr. Montaner. "In the case of condom breakage, for example, disclosure of positive HIV status immediately after exposure allows HIV-negative sexual partners to access post-exposure prophylaxis to significantly reduce the risk of transmission. People need to feel comfortable coming forward about their status without the fear of criminalization. This is how you keep Canadians HIV-free."

 "This year saw the launch of innovative programs like the BOOST Collaborative, Diabetes Canada's adoption of Treatment as Prevention[®] (TasP[®]) inspired 90-90-90 Targets and evidence of BC's leadership and success in meeting HIV targets. It is clear the made- in-BC TasP[®] strategy can provide the inspiration to tackle Canada's most pressing healthcare challenges and high-burden diseases."

– Dr. Julio Montaner, Director, BC Centre for Excellence in HIV/AIDS





BOOST Collaborative pilot project showing positive progress



The BOOST (Best-practices in Oral Opioid agoniSt Therapy) Collaborative, which launched in September of 2017, is showing promising early results through better identification of clients with opioid use disorder (OUD), improved coordination between programs and engaging front-line staff in improvement activities.

The BOOST Collaborative is modelled after the successful BC Centre for Excellence in HIV/AIDS (BC-CfE) STOP HIV/AIDS Collaborative which led to healthcare workers seeking and treating people with HIV in British Columbia. Developed and implemented by the BC-CfE in partnership with Vancouver Coastal Health (VCH) and under the leadership of the Centre's Assistant Director, Dr. Rolando Barrios, this pilot project is the first of its kind in Canada.

"The program is starting to show some positive results, but it's still early," says Barrios. "VCH medical professionals and front-line staff, are working hard to get people into treatment, and ensure they do not miss a single day of their opioid-agonist therapy."

The BOOST Collaborative also supports front-line staff to standardize clinical data entry to easily identify clients with OUD and target specific outreach interventions to ensure they are being supported.

In September, the baseline VCH registry of clients with a standardized diagnostic code for OUD was approximately 650; it is now over 2300. This was accomplished through the introduction of an electronic decision support tool, in-person coaching and the hard work of front-line staff. Preliminary data shows the tool has been used over 4000 times, making it easier to track methadone, Suboxone and Kadian prescriptions and reach out clients if a dose is missed.

"Acknowledging our clients' housing challenges or withdrawal symptoms with compassion goes a long way," says Dr. Cole Stanley, Medical Lead for Continuous Quality Improvement at VCH. "When our clients feel welcome, and openly received by the clinic, they are more likely to continue to seek out the treatment on their own."

The first learning session featured discussion from clients' perspective, for many whom abstinence is not the goal. For these clients, access to treatment can be complicated by judgment from family and friends, dayto-day family obligations and lack of supportive housing.

"The system of receiving medications, getting prescriptions from doctors and pharmacies and consistent psychiatric treatment is a challenge for users particularly those in withdrawal," said VCH client Amber Romanowski. "This extra layer of support from these dedicated outreach teams is exactly what we need."

VCH outreach teams connect people to services supporting and assisting individuals and families attempting to navigate substances use services.

"The current system of care does not support our most vulnerable clients." says Laura Beamish, Quality Improvement Coordinator at the BC-CfE. "Our goal is to empower VCH staff to make small, but meaningful changes to their practice to create a system of care that proactively cares for our clients living with OUD and, ultimately, helps prevent overdose."

EDUCATION COURSE

New guidelines spur high demand for PEP and PrEP education

New HIV prevention technologies are ushering in a

What is new about the course?

AWARD

BC-CfE researcher Dr. Lianping Ti receives UBC Young Alumnus Award



Dr. Lianping Ti, Assistant Professor with the Department of Medicine at UBC and Research Scientist with the BC Centre for Excellence in HIV/AIDS was honoured by the UBC community at its annual Alumni Achievement Awards Gala and Auction at the Fairmont Hotel Vancouver.

The event recognizes a young alumnus (aged 35 or under) whose accomplishments provide inspiration and leadership to students and other young alumni. The recipient is expected to have shown significant leadership either in their professional career and/or community service.

Dr. Lianping Ti's research focuses on the efficacy of healthcare systems for people suffering with drug addiction and related infectious diseases, with a focus on viral hepatitis and HIV. Her research has uncovered barriers to healthcare for marginalized populations and played a role in shaping new hospital policies to address them. She is described as a generous mentor to other young researchers, and is admired for the quality, innovation, and exceptional productivity of her work.

Please join us in congratulating Dr. Ti on this well-deserved honour!

LECTURES & EVENTS

What's New in Addiction Medicine?

TBD

Speaker: Dr. Theo Jankowski

Tuesday, January 23, 2018, 12–1PM

Hurlburt Auditorium (2nd floor), St. Paul's Hospital

Forefront Lecture

TBD

Speaker: Patrick McDougall

Wednesday, January 17, 2018, 12–1PM

Large Lecture Theatre, Providence Level 1, St. Paul's Hospital

HIV Care Rounds

Management of dyslipidemia in HIV positive patients

Speaker: Dr. Greg Bondy

Wednesday, January 24, 2018, 12-1PM

Conference Room 7, Providence Level 1, St. Paul's Hospital

For more information, contact us at **Education@cfenet.ubc.ca or visit** our website at **www.education.cfenet.ubc.ca**

BC Centre for Excellence in HIV/AIDS

Improve the health of British Columbians with HIV through

new era in preventative healthcare for people at risk of acquiring HIV. Along with new treatment options, there is increased demand for information regarding post-exposure prophylaxis (PEP) and pre-exposure prophylaxis (PrEP) access and monitoring.

BC-CfE's Dr. Silvia Guillemi discusses the new online HIV Prevention course, offering health care providers a new way to learn about the latest in HIV prevention.

What is the HIV Prevention course and who would benefit from it?

The new online course contains seven modules, including case discussions and quizzes, providing a comprehensive and interdisciplinary learning platform for health care providers and front-line workers. The course provides information on the assessment and management of individuals that may require PEP and PrEP.

The course is aimed at health care professionals, but there is information regarding HIV risk and risk reduction to help the public increase their knowledge of PEP and PrEP. The course includes the updated 2017 BC-CfE guidelines for PEP and PrEP. In this course, we also address the new PEP regimen and provide a review of the present recommendations for PrEP.

What does accessibility and availability look like under the new guidelines?

PEP is now available for non-accidental exposures (consensual sexual exposures and needle sharing) across BC. Provincial coverage for PrEP, as per the recommendations in the PrEP Clinical Guidelines, is currently under review.

Could there be any changes to the course with changes to access and availability?

Our goal is to have up-to-date information available to care providers and allied health disciplines in a timely manner. We recommend that the course participants use the **course forum** to connect with us.

To learn more about the course, please visit: <u>https://education.cfenet.ubc.ca/online-courses/</u>

- 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.

Physician Drug Hotline 1.800.665.7677 St. Paul's Hospital Pharmacy Hotline 1.888.511.6222 Website www.cfenet.ubc.ca E-mail info@cfenet.ubc.ca

Funding for the BC Centre for Excellence in HIV/AIDS is provided by the BC Ministry of Health..



