

IAS 2015 shines a light on Vancouver, B.C.

UN 90-90-90 targets and TasP[®] strategy key to ending HIV and AIDS pandemic

early 6,000 attendees from the global HIV community—scientists, clinicians, public health experts, community leaders, and media professionals—converged on Vancouver, British

Columbia, for the 8th International AIDS Society Conference on HIV Pathogenesis, Treatment and Prevention (IAS 2015) from July 19–22, 2015.

IAS 2015 welcomed delegates during a memorable opening ceremony kicked off by Larry Grant, an Elder from the Musqueam First Nation in Vancouver. The conference also Vancouver played host in 1996 to the International AIDS Conference where Dr. Julio Montaner and his team at the BC Centre for Excellence in HIV/AIDS (BC-CfE) introduced highly active antiretroviral therapy

IAS 2015 AT A GLANCE

- 180 volunteers
- 117 countries represented
- 697 participants from Canada
- 1,256 abstracts accepted, with about 60 from BC-CfE researchers
- 237 media delegates

 (HAART), ushering in the first truly effective HIV treatment. Nearly twenty years later, it is with great pride that Dr. Montaner co-chaired the IAS 2015 conference alongside IAS President Dr. Chris Beyrer, during which results of two major studies, START and HPTN 052, were unveiled. These studies confirmed what Dr. Montaner and his supporters have always IAS 2015 saw over 500 researchers, clinicians, and civil society experts, sign the Vancouver Consensus which calls for immediate access to antiretrovirals, preexposure prophylaxis for those at high risk of HIV exposure, and urges rapid progress towards the implementation of new scientific evidence. The Vancouver Consensus has been endorsed by leaders of major agencies including the Global Fund to Fight AIDS, Tuberculosis and Malaria, the US President's Emergency Plan for AIDS Relief (PEPFAR) and UNAIDS, and is intended to place pressure on governments to support expanded treatment and prevention. It states in part: "All people living with HIV must have access to antiretroviral treatment upon diagnosis. Barriers to access in law, policy, stigma and bias must be confronted and dismantled. With a unified message

welcomed several distinguished guests who included, among others, opening conference

keynote speaker, Dr. Nora Volkow, Director of the National Institute on Drug Abuse *(read interview on reverse side)*, Michel Sidibé, UNAIDS Executive Director, Ambassador Deborah Birx, MD, US Global AIDS Coordinator, Reverend Monsignor Robert J. Vitillo, head of Caritas Internationalis, Dr. Fabio Mesquita, director of the Brazilian Ministry of Health's Department of STDs, AIDS and Viral Hepatitis, and Ryan and Julie Lewis, founders of the 30/30 Project.

90 scholarship recipients

believed: Treatment as Prevention® (TasP) works. Starting HIV treatment

immediately after diagnosis decreases plasma viral load to undetectable levels and prevents transmission of the virus to others.

"Health agencies, funders, supporters, Presidents, Prime Ministers, and governments from around the world are increasingly rallying behind the TasP[®] strategy and the UN 90-90-90 targets as the key to ending the HIV and AIDS pandemic," said Dr. Montaner, BC-CfE director. that ending AIDS by 2030 is achievable."

"Let this be the conference where the question of when to start treatment stops being a scientific question and starts being a question of finance and political will," said Dr. Beyrer.

Echoing the sentiment of many in attendance, Dr. Montaner said, "Political leaders of the world, you are either with us or against us. We know the evidence and we know what needs to be done. We now have the unique opportunity to end the pandemic. It's up to you to decide whether you're going to be counted as doing the right thing."

IAS 2015 in Vancouver must call for treatment to everyone, everywhere, as a fundamental human right"

– Michel Sidibé, UNAIDS Executive Director



Q&A with Dr. Nora Volkow Director of the National Institute on Drug Abuse (NIDA) at the US National Institutes of Health (NIH)

During the 8th International AIDS Society Conference on HIV Pathogenesis, Treatment and Prevention (IAS 2015) in Vancouver, British Columbia, from July 19–22, scientists, researchers and policymakers discussed how to end AIDS once and for all. The general consensus among the HIV research community is to achieve this goal, addictions must be addressed and treated, and harm reduction strategies implemented. The opening conference keynote speaker, Dr. Nora Volkow, Director of the National Institute on Drug Abuse, focused on the importance of integrating HIV and addiction treatment.

Dr. Nora Volkow's work has been instrumental in demonstrating drug addiction is a disease of the human brain. As a research psychiatrist and scientist, Dr. Volkow pioneered the use of brain imaging to investigate the toxic effects and addictive properties of drugs of abuse.

The BC-CfE sat down to speak with Dr. Volkow at the start of IAS 2015.

1) What are you most looking forward to during IAS 2015? What is the significance of this conference on the international stage?

I am always looking forward to hearing about scientific discoveries that spur the development of an effective HIV cure. There is a very high expectation that recent advances have a good chance of helping us realize that goal. The second aspect I am looking forward to is getting the pulse on countries' strategies. For example, we have established a partnership with China and Vietnam to implement medically assisted therapy in ways that can improve their outcomes in addictions and also HIV.

Also, I am interested in the intersection between alcohol addiction and HIV, as it relates to the clinical outcomes of those living with an HIV infection. In general, I don't think this is an area that has attracted much attention, even though alcoholism is likely a major contributor to increased risk behaviours. That aspect of drug intoxication—whether it's methamphetamines or alcohol—is one that we haven't paid much attention to but one that B.C. has always been at the forefront of.

2) IAS 2015 will feature research on the intersections between addiction or drug use, HIV/AIDS and viral hepatitis. How could addressing the health of those with addictions help curb the spread of communicable diseases?

The contribution of drugs to the HIV epidemic is twofold. First is the impact drug use has on the emergence of new cases of HIV, and second, its influence on treatment outcomes. If someone is taking drugs constantly, or on a daily basis, the risk of infection goes up. One of the best known consequences of repeated drug use is the reduced performance in areas of our brain that regulate self-control. This erosion of the capacity to exert self-control helps explain why people who use drugs tend to engage in high-risk behaviours such as sharing needles or high-risk sexual practices when they take those drugs.



For the treatment component, we know that people who take drugs are much less likely to be adherent. This is one of the reasons why it's so important to initiate treatment for substance abuse at the same time that you initiate antiretroviral therapy. Study after study has shown that adherence suffers when addictions are not treated.

Within the United States, rates of HIV have remained stable at about 48,000 new cases each year. So, I wonder to what extent is our inability to bring down these numbers related to not properly implementing evidence-based practices for the treatment and testing for addicted individuals. One of the areas for the implementation cascade that we are very interested in following is the model of B.C. on addiction treatment.

3) In B.C., there has been enormous success in reducing the rate of HIV by coupling the Treatment as Prevention® (TasP) strategy, which provides early and full access to HIV treatment, with harm reduction, such as needle exchange programs and supervised injection facilities. Do you see progress happening in other locations or jurisdictions using these approaches?

Yes, definitely. A good example would be Brazil because their approach for implementing TasP® included a very aggressive way of expanding ART (antiretroviral therapy) while at the same time seeking out injection drug users. We at NIDA have been encouraging countries to adopt such practices—such as China and Vietnam. We are also attempting in the U.S. to understand what kinds of medications will help those with addictions remain adherent to ARV.

AWARDS

Four GSHI students receive Michael Smith Foundation for Health Research Postdoctoral Awards

The Michael Smith Foundation for Health Research grants Trainee Awards each year to support highly qualified applicants at the post-PhD and post-health professional degree levels training for careers as health researchers. This year, we are excited to announce four of BC-CfE's Gender Sexual Heath Initiative (GSHI) students were selected to receive Postdoctoral Awards from the Michael Smith Foundation for Health Research: Dr. Andrea Krüsi, for her work on the gendered impacts of the criminalization of HIV disclosure; Dr. Putu Duff, for her research on sexual and reproductive rights with the SHAWNA Project; Dr. Eugenia Socias, for her work on HCV with GSHI and the Addiction Medicine Program; and Dr. Ofer Amram, for his research on barriers to HIV treatment access among key populations in B.C.

Read more about the awards, recipients and their research at: *bit.ly/2015MSFHRTraineeAwards*

LECTURES & EVENTS

HIV Care Rounds

Speaker: Dr. M-J Milloy Thursday, September 10, 2015, 8:00–9:00AM Conference Room 7, Providence Level 1 St. Paul's Hospital

Forefront Lecture Series

Speaker: Smarita Sengupta, Destiny Foundation, Kolkata Wednesday, September 16, 2015, 12:00–1:00PM Large Lecture Theatre, Providence Level 1 St. Paul's Hospital

HIV Care Rounds

Speaker: Dr. Viviane Dias Lima Thursday, September 24, 2015, 8:00–9:00AM 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 comprehensive research and treatment programs;
- > Develop cost-effective research and therapeutic protocols;

RESEARCH GRANTS

Three BC-CfE researchers awarded New Investigator Awards

The BC-CfE is proud to announce three of its rising researchers have been recognized by the Canadian Institutes of Health Research (CIHR) with New Investigator Awards: Dr. Kanna Hayashi, Dr. Lindsey Richardson and Dr. Shira Goldenberg (*pictured left to right*). The prestigious and competitive grants are each \$300,000 for research to be conducted over the course of five years. These innovative grant projects are reflective of the broad range of BC-CfE research and investigation. The BC-CfE extends its warmest congratulations to the awardees. Read more at: *bit.ly/CIHRNewInvestigatorAward*



- 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

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