Journal of the BC Centre for Excellence in HIV/AIDS

JULY 2020

St. Paul's Hospital Vancouver B.C.





BC-CfE contributes to vital dialogue at a virtual 23rd International AIDS Conference

he fitting theme of AIDS 2020, the first fully-virtual International AIDS Conference, was *Resilience*. The theme reminded the global HIV community of its ability to come together despite a global pandemic to share our commitment to HIV prevention, treatment and cure research.

More than 180 countries participated in this year's conference, held during the second week of July, and it featured more than 600 sessions and activities.

Among the major findings revealed during the conference was a pilot proof-of-concept study of what could be the first case of an adult with HIV to achieve long-term remission without a bone marrow transplant. On the topic of **Treatment as Prevention®**, a study presented at the conference found cabotegravir for long-acting injectable PrEP is not only just as effective, but superior, to daily oral Truvada for HIV PrEP.

Meanwhile, UNAIDS Executive Director, Winnie Byanyima, and WHO Director-General, Dr Tedros Adhanom Ghebreyesus, presented virtually with both examining the link between the HIV and COVID-19 pandemics.

Thanks to research from the US and the UK, we know HIV does not increase the risk of getting COVID-19 nor does living with HIV increase chances of a COVID-19 death. In fact, a London study found COVID-19 patients living with HIV improved faster than HIV negative patients. However, other research presented at AIDS 2020 found COVID-19 lockdown measures affected PrEP access, led to a sudden shift to rapid self-testing, and in some areas, interrupted or restricted access to antiretroviral treatment. Furthermore, we now know, thanks to a Spring survey of more than 13,000 people in 138 countries, how COVID-19 is negatively impacting the global LGBTQ2+ community.

Nearly half of those surveyed faced economic difficulty, with many unable to meet basic needs, skipping meals, or fearful of losing employment. 13% had already lost their jobs. Respondents also reported reduced access to safe injection equipment and opioid substitution therapy, something that threatens to undo global progress toward HIV prevention and treatment goals.

The BC-CfE was represented by five researchers at AIDS2020. Our epidemiologist Martin St-Jean and his team's presentation looked at the impact of drug overdoses on life expectancy among people living with HIV in BC and identified risk factors associated with increased overdose mortality. St-Jean's team found survival gains from effective antiretroviral therapy being threatened by drug overdose deaths among people living with HIV.

The BC-CfE analysis included 10,362 HIV-positive people aged 20 or older in our province's HIV/AIDS Drug Treatment Program clinical registry. About a quarter of these people injected drugs. With their findings, St-Jean's team concluded that overdose prevention and substance use treatment are necessary components of quality HIV care programs. This vital study comes at a time when BC's opioid crisis is worse than it has ever been. May saw a record 171 people die from drug overdoses. That record was tragically broken in June, which saw 175 people die of illicit drug toxicity. In the first six months of this year, 728 British Columbians died from drug overdoses. As of this writing, COVID-19 has killed 194 in BC.

Other BC-CfE attendees to AIDS2020 were able to afford the virtual conference thanks to the Bonnie Devlin Memorial Bursary Endowment Fund for Education. This fund was set up to honour Devlin (1957-2008), who

worked at St. Paul's Hospital as the Program/Research Coordinator for Vancouver Lymphadenopathy AIDS Study (VLAS) between 1986 and 1992, and later for BC-CfE between 1992 and 2007. Bonnie was considered a mother-figure at BC-CfE who everyone loved and cherished.

Julia Yinxin Zhu, a data analyst with the BC-CfE's Division of Epidemiology and Population Health, was able to virtually attend and take full advantage of the global platform to connect with scientists, researchers, and people living with HIV from across the globe. Raquel Maria Espinoza, a data entry clerk with the BC-CfE's Drug Treatment Program was also a beneficiary of the Bonnie Devlin Fund.

Espinoza says, "As a health professional new to the research field, I knew I would greatly benefit from being able to engage with HIV research experts to not only learn about best research practices but also in an effort to contribute to discussions that will help shape future health policies and improve patient health."

Attendees to AIDS 2020 saw the global virtual conference end with an urgent plea. Peter Sands, Executive Director of The Global Fund to Fight AIDS, Tuberculosis and Malaria, talked about the pandemic's drastic impact on both treatment and prevention of HIV, with lockdowns isolating people from their communities, disrupting global supply chains, and changes to local distribution of antiretroviral drugs and other vital medicines.

Sands urged everyone involved in AIDS 2020 to work together to fight against the COVID-19 pandemic and the potential backslide it could bring to the progress made against HIV/AIDS, and continue to work to further reduce new infections and to reduce deaths.



The unprecedented rise in overdose deaths among people living with HIV has considerably reduced the gains in life expectancy achieved through Treatment as Prevention®, underscoring the importance of access to safe drug supply."

This World Hepatitis Day, the BC-CfE's Per-SVR team fights for HCV awareness



Globally, 290 million people are unaware they are living with a hepatitis C virus (HCV) infection. This significant global health problem affects as many as 80,000 individuals here in BC. On July 28th, we observe World Hepatitis Day in order to raise awareness of the global burden of viral hepatitis and to influence real change. This year the theme was 'Find the Missing Millions'.

Thankfully, unlike many other chronic viral diseases, HCV therapy has recently experienced a major paradigm shift to highly effective, simpler, safer, and shorter-course direct-acting antivirals (DAAs)-based therapy. Now, with BC making this new therapy available to all, elimination of this disease in our province is a realistic proposition. We at the BC-CfE know Treatment as Prevention® works as a public health strategy, as demonstrated by scale-up treatment efforts and resulting declines in HIV cases.

The BC-CfE's Per-SVR (PrEseRvation of Sustained Virologic Response – pronounced "persevere") study is leading the expansion of HCV testing, education, and accessible DAA therapy. The aim of Per-SVR is for closer monitoring and management of HCV positive cases and transmission reduction among harder to reach populations who face the most barriers to access and care.

One Per-SVR peer research associate and participant shared her perspective on the importance of HCV education and access, saying,

"Just the recognition of the existence of hepatitis C in the community is a huge start in the survival of this

generation and generations to come. Together we can conquer this disease and seek out the clients in need of our care.'

Per-SVR is led by Principal Investigator and the BC-CfE's Executive Director and Physician-in-Chief Dr. Julio Montaner and BC-CfE Research Scientist Dr. Kate Salters.

The primary research site for the study is based in the DTES on Powell Street. Many study participants live in the DTES and face a myriad of barriers relating to health care access, substance use, homelessness, and mental health concerns. Per-SVR, like other BC-CfE research studies, provides participants a continual link to healthcare providers and services.

Since the COVID19 pandemic began, Per-SVR study operations were put on hold to ensure the safety and well-being of study participants and team members. This temporary pause on study activities highlighted the importance that research studies, such as Per-SVR, have in connecting residents of the DTES to their health care providers. Thankfully, the study's resumption has since been approved, and the team will now seek to identify what impacts COVID-19 has had on hepatitis c testing and treatment access, and how the pandemic has affected access to important harm reduction services and continuation of care.

Per-SVR is actively enrolling eligible participants within BC and have participating sites in the Lower Mainland, Fraser valley and Vancouver Island. If you would like more information about the study please contact the study coordinator, Jessica Ly at jly@cfenet.ubc.ca.

NEWS

CHIWOS to launch new Women-Centred HIV Care Toolkits

WOMEN CENTRED HIV CARE MODE

In order to better support women living with HIV in Canada, the BC-CfE's Canadian HIV Women's Sexual & Reproductive Health Cohort Study (CHIWOS) has developed new Women-Centred HIV Care Toolkits. The toolkits were created from an evidence-based, integrated knowledge translation approach.

Worldwide, women make up more than half of all people living with HIV. These women face significant gender inequities and unmet healthcare needs. Based on findings from an extensive communitycollaborative research program, CHIWOS developed toolkits to guide the delivery of the "Women-Centred HIV Care" (WCHC) Model to meet the health and social needs of women living with HIV (WLWH). Through a partnership with the Centre for Effective Practice (CEP),

these toolkits were developed by a national working group of clinicians, service providers, researchers and WLWH in Canada and contributions from organizational partners, including Oak Tree Clinic at BC Women's Hospital, Women's Health in Women's Hands - Community Health Centre, Salamander Trust

and the World Health Organization.

The toolkits were developed over 18 months (2018-2020) with WLWH meaningfully engaged throughout the process. Furthermore, CEP and CHIWOS staff conducted a systematic literature search, critically appraising current

clinical practice guidelines. This process, along with expert advice, led to a prototype for target end-users across Canada. After a period of usability testing, focus groups and independent reviews, invaluable feedback was incorporated into the finalized toolkits.

> In the end, two Women-Centred HIV Care Toolkits were developed: one for clinicians and other service providers and one for WLWH as a health self-advocacy and self-management tool. The toolkits provide guidance for integrated care applicable across women's lifespan and consist of six sections: a) Person-centred care with attention to social determinants of health and family; b) Trauma- and violenceaware care; c) HIV care; d) Women's health care, including sexual and reproductive health and

rights; e) Mental and emotional health care, including addressing substance use and addiction; f) Peer support, leadership and capacity building.

The two Women-Centred HIV Care Toolkits provide user-friendly integrated guidance for clinicians, other service providers and WLWH to comprehensively address women's unique needs and priorities. Next up for CHIWOS is the launching of these toolkits and hosting instructional webinars to support widespread use. To find out more, please visit www.chiwos.ca and follow **@CHIWOSresearch** on Twitter and Facebook for updates.



Canada Day as Canadian Health



Originally titled "O Canada!: A look at cool Canadian health innovation", The Province highlighted BC-CfE Executive Director & Physician-in-Chief Dr. Julio Montaner as one of the country's most influential Canadians who have helped define healthcare innovations.

Recognizing the important contributions Canadians have made to healthcare in this country that have not only benefitted Canadians but indeed people around the world, Dr. Montaner was among great company.

The Province highlighted Dr. Montaner's work developing highly active antiretroviral therapy (HAART), leading the international effort to create a triple drug cocktail that effectively turned HIV from a death sentence to a chronic disease. The article also focused on his development of Treatment as Prevention® ensuring HAART access to hard to reach populations, like injection drug users, and its adoption by the Joint United Nations Programme on HIV/AIDS (UNAIDS) in 2014 as the formal strategy for fighting HIV/AIDS globally.

This Canada Day we couldn't be more proud of the accomplishments Dr. Montaner and the entire BC-CfE have made globally to the fight against HIV and AIDS.

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 BC and conduct analyses of the effectiveness of HIV-related programs.

1.800.665.7677

1.888.511.6222

info@cfenet.ubc.ca

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



