

Coordinated eradication of HIV on a city level: combining behavioral and biomedical interventions in a public health setting

the HIV Transmission Elimination AMsterdam initiative

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The consortium



SOAIDS













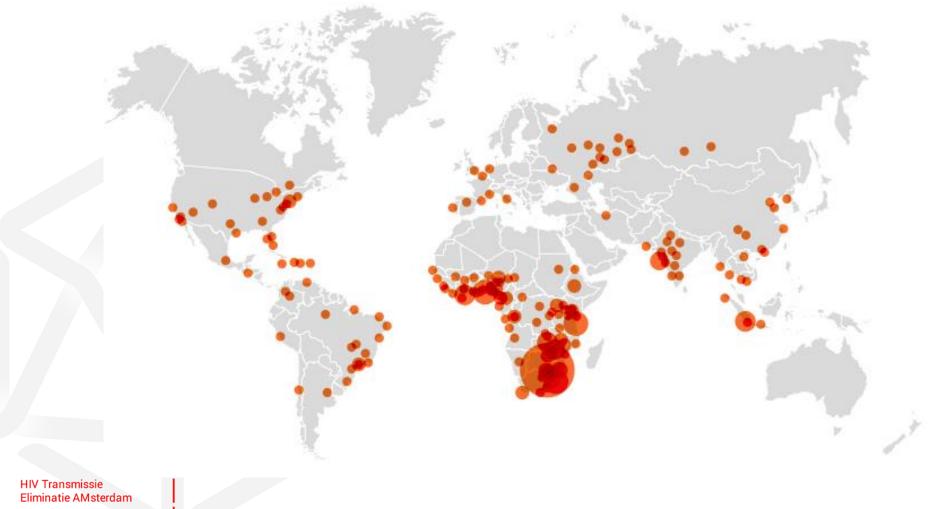
Eliminatie AMsterdam HIV Transmission Elimination AMsterdam

- Amsterdam Public Health Service
- Soa Aids Nederland (STI Netherlands)
- Amsterdam Institute for Global Health and Development (AIGHD)
- Rotterdam Public Health Service
- HIV patient society Netherlands (HIV Vereniging)
- General practitioners Amsterdam
- **Dutch Society of HIV Physicians**
- **RIVM**
- **Dutch HIV Monitoring Foundation**
- Hospitals Amsterdam: AMC, Onze Lieve Vrouwe Gasthuis, DC Klinieken, Slotervaart Ziekenhuis, VUMC
- Hospitals Rotterdam: Erasmus MC, Maasstad Ziekenhuis
- LUMC, RadboudMC





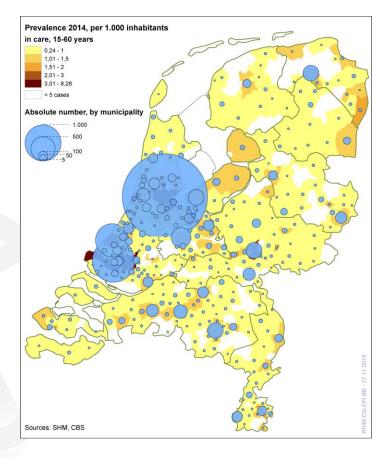
The HIV epidemic is concentrated in cities



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The HIV epidemic in the Netherlands



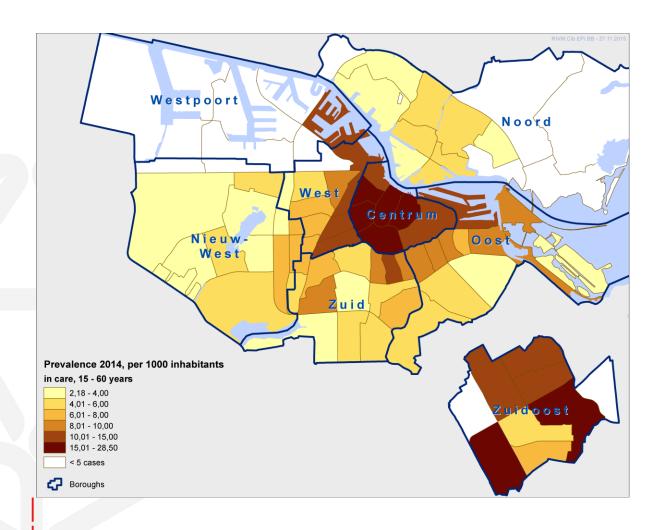
200-300

People with a newly diagnosed HIV infection in Amsterdam in 2015

Data E op de Coul RIVM; Dutch HIV Monitoring Foundation



The HIV epidemic in Amsterdam



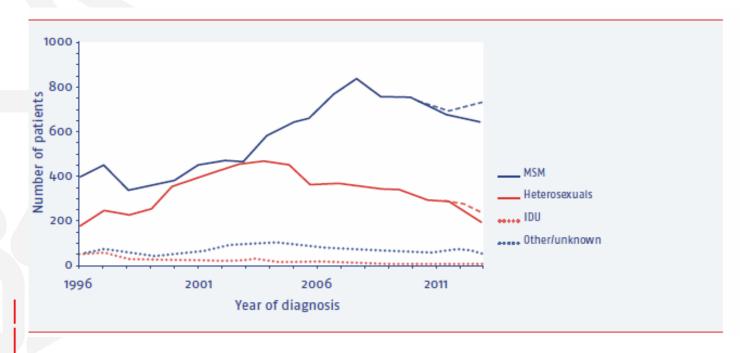
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Data E op de Coul RIVM; Dutch HIV Monitoring Foundation



Three key elements - populations

- 76% MSM
- 20% heterosexual > more than 50% are migrants





Cities are hotspots

H-TEAM

Hiv Transmissie Eliminatie AMsterdam

90-90-90

An ambitious treatment target to help end the AIDS epidemic

CITIES
UNITE TO
FAST-TRACK
TO END
THE AIDS
EPIDEMIC

Event summary: taking action World AIDS Day 2014



"Ending the urban epidemic"



Hiv Transmission Elimination AMsterdam

Hteam.nl



Key contributors to current transmission

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7-12 % of people in Amsterdam are unaware of their infection

- An estimated 71% of transmissions occurs before diagnosis
 - Ratmann Sc Transl Med 2016
- Especially at the acute infection phase chance for transmission is high

Key element – late presentation

39% of new HIV infected individuals have a CD4 count below 350 cells / mm³

21% has a CD4 count below 200 cells / mm³ or an AIDS defining illness

This late presentation is associated with a worse clinical prognosis



AIM of the H-TEAM

 Intercept current contributors to ongoing transmission and achieve reduction of the HIV incidence in Amsterdam

Improvement of prognosis of HIV infected individuals



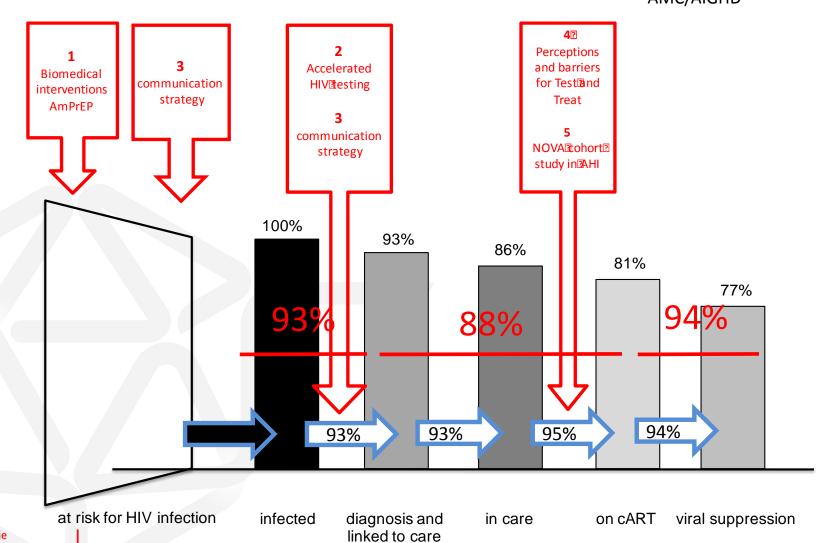
AIM of the H-TEAM

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Slide: Godelieve de Bree AMC/AIGHD



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WP1 - PrEP

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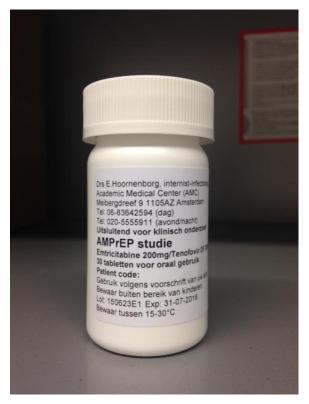


Amsterdam PrEP project

- A demonstration project
- For 370 MSM and transgender people
- Choice: daily or event-driven PrEP
- August 2015 to June 2018

Primary endpoints	Uptake, acceptability, usability
Secondary endpoints	Impact /consequences of PrEP use, Adherence, hiv infection, resistance, risk behaviour, side effects





Elske Hoornenborg, projectleader



WP1- AmPrEP, initial results

- 376 MSM & Transgender initiated PrEP
- The majority chose a daily regimine
- High Chemsex use
- High prevalence of Hep C



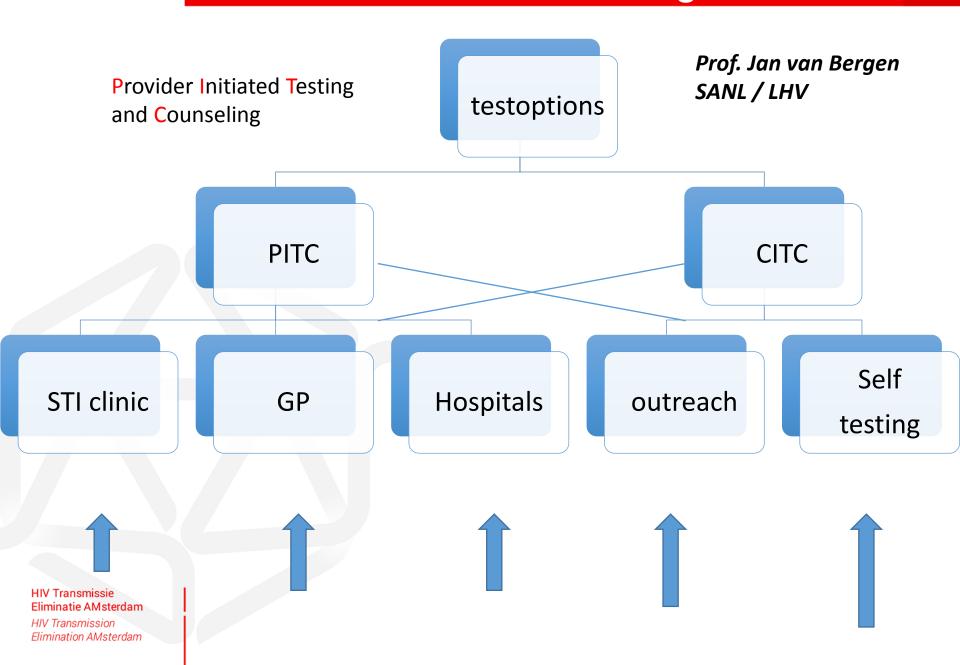
WP2 - Facilitate testing

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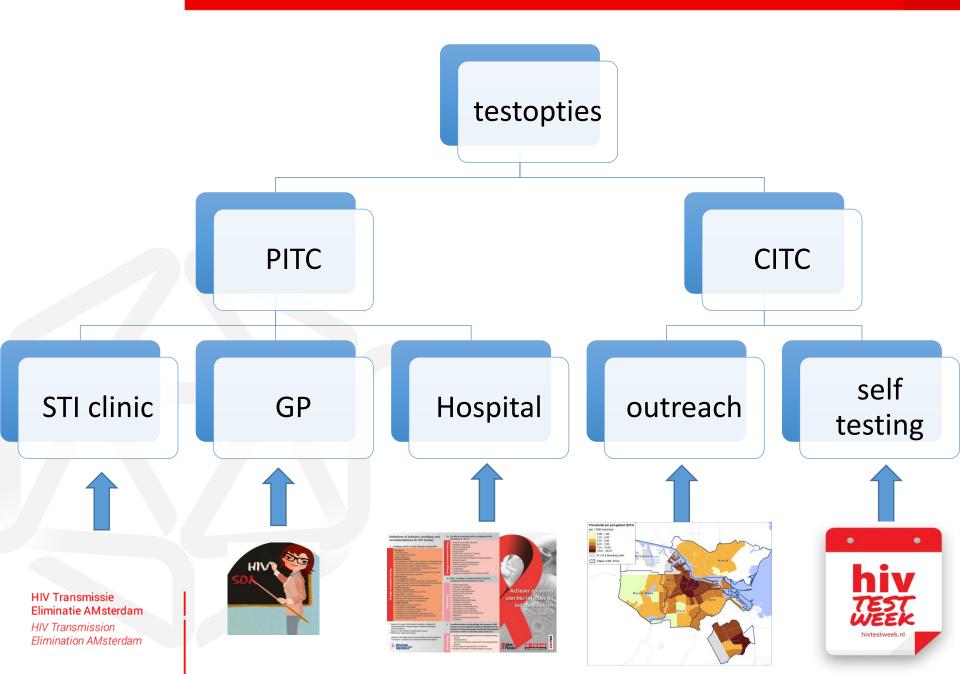


Multi-level testing channels





Conclusie





WP4 – Barriers for early treatment among professionals / patients



WP 4 — Barriers among patients and Health care professionals for early treatment initiation = a Mixed Methods study (Prof.Dr. Suzanne Geerlings et al., AMC)

- 1) Reasons for patients with CD4 >500 to start or not to start cART
- 2) Reasons for HCWs to start or not to start cART

To investigate the succes and barriers of TasP/early treatment in practice



WP4- Barriers

Specialists:

health compromised (side effects) diminished by the benefits >> START study

transmission reduction is not a reason to start treatment

adherence is an issue – no start if the client is not ready (readiness, motivation, stability)



WP4- Barriers

patients:

Client-provider relationship

Individual characteristics (e.g. culture, mental readiness)

Emotional acceptance of the diagnosis Stability of the personal situation





WP5 - Acute HIV Infection (AHI)



WP5 - AHI



Viro-immunological research on the effect of immediate treatment of acute HIV infection on viral reservoir and immune system – functional cure

Cohort study: 40 patients in follow-up since August '15

Godelieve de Bree, AIGHD-AMC



WP3 – Motivational interventions / campaigns



Motivating HIV-testing and early diagnosis Workpackage 3

Udi Davidovich (GGD A'dam/AMC)

Names de communication team:

Wim Zuilhof (SANL) Godelieve de Bree (AMC, AIGHD) Fred Verdult (HVN) Arjan van Bijnen (SANL)



Principal target:

Increase timely HIV testing

Increase motivation to test & Minimize a.m.a.p the time between exposure and detection



Acute HIV Infection & Early Treatment



Awareness towards acute HIV infections (AHI)

Symptoms as cues for engagement in testing in target populations (push not pull)



Early treatment

The rationale why one should always know his current HIV status: Early treatment – good for your health & makes you non-infectious

A stigma reducing intervention!



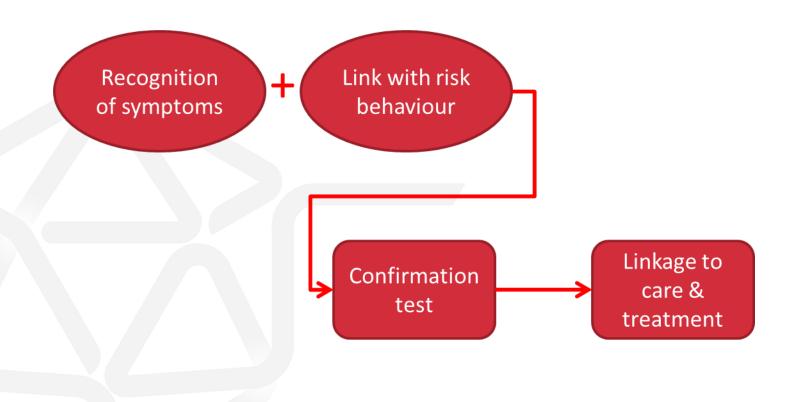
Awareness of AcuteHIV Infec. (AHI)

MSM know relatively little of acute HIV infection

- The symptoms
- The consequences, such as high infectiousness
- The potential advantage of direct treatment (less damage, functional cure?, less infectiousness – community viral load)



Strategy



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Deze symptomen zijn zeer verschillend. Van koorts, hoofdpijn of vermoeidheid tot nachtzweten en huiduitslag. Heb jij onbeschermde seks gehad en gezondheidsklachten? Doe de Symptomencheck op hebikhiv.nl voor advies! In een nieuw traject van de GGD Amsterdam kun je je meteen laten testen en zo nodig met de behandeling starten. Beter voor jouw gezondheid én die van anderen.



X GGD X Amsterdam



WP 3 Increasing awareness for acute HIV infection





× Cepheid | GeneXpert I

hebikhiv.nl

www.hebikhiv.nl

ternet Explorer

nttps://hebikhiv.nl/

ken Beeld Favorieten Extra Help



Symptomencheck

Start de symptomencheck

heb ik hiv?



Start de symptomencheck

Ervaringsverhaal



Alles over de test



heb ik hiv?



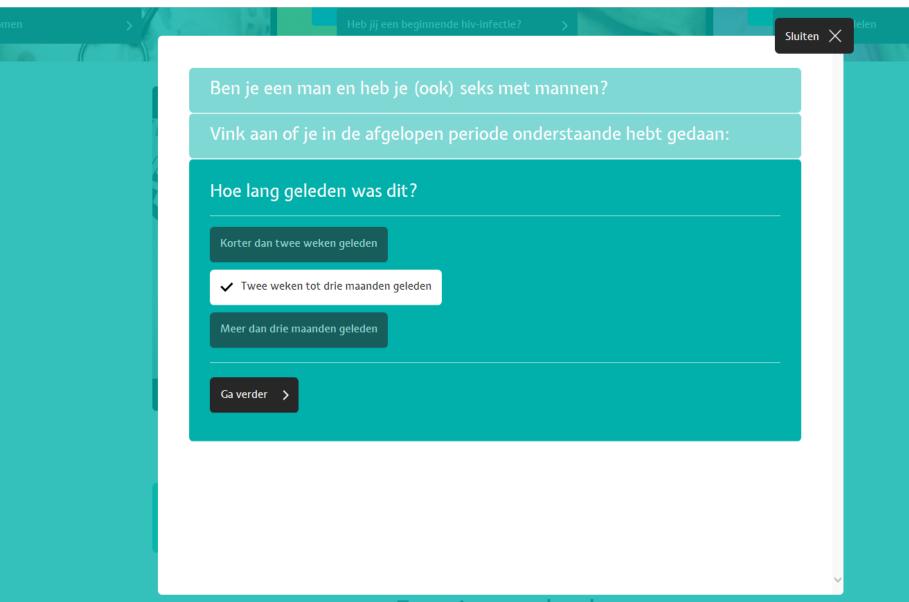




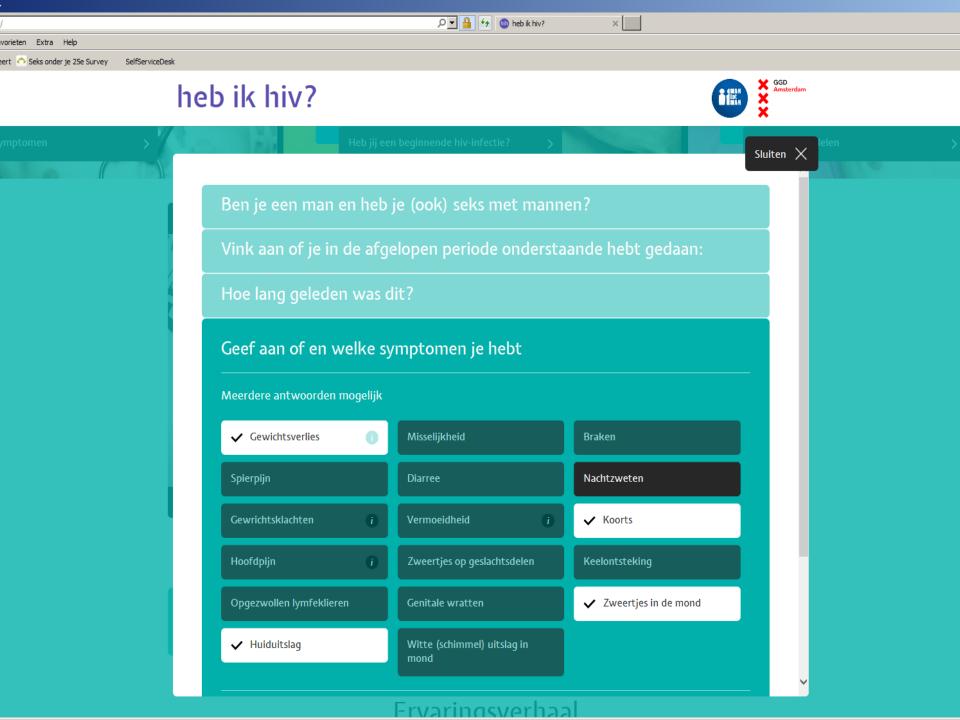
Seks onder je 25e Survey

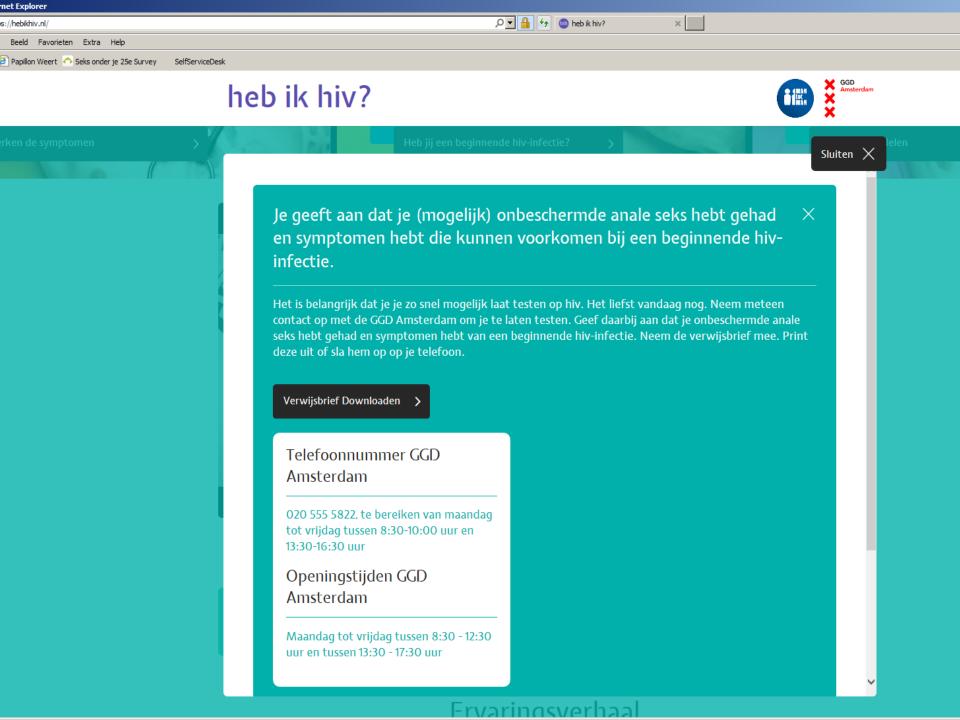
heb ik hiv?

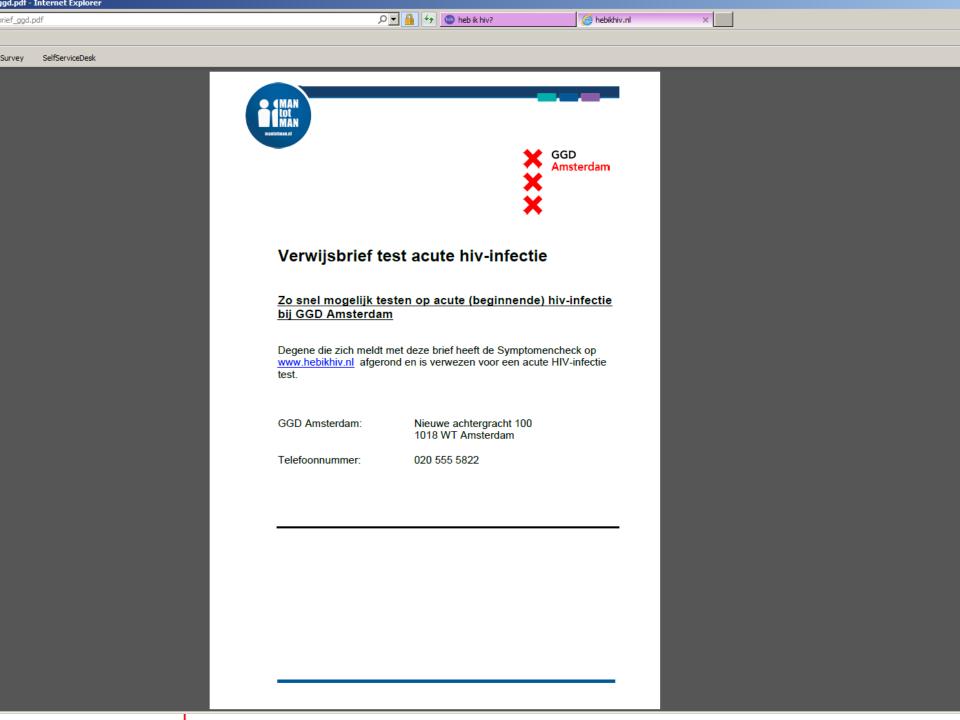




P ★ beb ik hiv?













- Intake risk & symptoms
- Corroboration campaign as source of referral
- Confirmation test
- Same-day referral to HIV treatment center / NOVA study





Impact campaign December, 2015

- Unique sessions: **55.151** (now over 150,000)
- Symptom-check started: 41.435
- Symptom-check completed: 33.348 (80%)
- Advise to test: 3672 >> (9%)
- Downloaded reference letter: 656 (1,6%, 18%)



Behavioral Impact today

- Close to 200 AHI requests
- Minimal flow from the campaign of 62%
- 151 AHI tests
- 12 AHI diagnosis



Conclusion

A coordinated city based approach addressing interventions on all aspects of the HIV epidemic, in a structured and connecting manner, is a good way forward



Proof of concept



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For questions: udavidovich@ggd.amsterdam.nl