



Summit 2019

Warsaw, Poland | 10-12 October

“SOPHOCLES – P4G”

The experience of the first interventional implementation PrEP pilot program in Athens

Sophocles Chanos
Checkpoint Head

Pillars of the strategy for the eradication of HIV infection

- Diagnose all individuals with HIV as early as possible after infection
- Treat HIV infection rapidly and effectively to achieve sustained viral suppression (U=U)
- Prevent at-risk individuals from acquiring HIV infection, including the use of pre-exposure prophylaxis (PrEP)
- Rapidly detect and respond to emerging clusters of HIV infection to further reduce new transmissions

Anthony Fauci et al., JAMA, 2019

National Institute of Allergy and Infectious Diseases (NIAID)

EDITORIAL

Ending the HIV Epidemic A Plan for the United States

Anthony S. Fauci, MD; Robert R. Redfield, MD; George Sigounas, MS, PhD; Michael D. Weahkee, MHA, MBA;
Brett P. Giroir, MD

In the State of the Union Address on February 5, 2019, President Donald J. Trump announced his administration's goal to end the HIV epidemic in the United States within 10 years. The president's budget will ask Republicans and Democrats

to make the needed commitment to support a concrete plan to achieve this goal.

While landmark biomedical and scientific research advances have led to the development of many successful HIV treatment regimens, prevention strategies, and improved care for persons with HIV, the HIV pandemic remains a public health crisis in the United States and globally.

In the United States, more than 700 000 people have died as a result of HIV/AIDS since the disease was first recognized in 1981, and the Centers for Disease Control and Prevention (CDC) estimates that 1.1 million people are currently living with HIV, about 15% of whom are unaware of their HIV infection.¹ Approximately 23% of new infections are transmitted by individuals who are unaware of their infection and approximately 69% of new infections are transmitted by those who are diagnosed with HIV infection but who are not in care.² In 2017, more than 38 000 people were diagnosed with HIV in the United States. The majority of these cases were among young black/African American and Hispanic/Latino men who have sex with men (MSM). In addition, there was high incidence of HIV among transgender individuals, high-risk heterosexuals, and persons who inject drugs.¹ This public health issue is also connected to the broader opioid crisis: 2015 marked the first time in 2 decades that the number of HIV cases attributed to drug injection increased.³ Of particular note, more than half of the new HIV diagnoses were reported in southern states and Washington, DC. During 2016 and 2017, of the 3007 counties in the United States, half of new HIV diagnoses were concentrated in 48 "hotspot" counties, Washington, DC, and Puerto Rico.⁴

The US Department of Health and Human Services (HHS) has proposed a new initiative to address this ongoing public health crisis with the goals of first reducing numbers of incident infections in the United States by 75% within 5 years, and then by 90% within 10 years. This initiative will leverage critical scientific advances in HIV prevention, diagnosis, treatment, and care by coordinating the highly successful programs, resources, and infrastructure of the CDC, the National Institutes of Health (NIH), the Health Resources and Services Administration (HRSA), the Substance Abuse and Mental Health Services Administration (SAMHSA), and the Indian Health Service (IHS). The initial phase, coordinated by the HHS

Office of the Assistant Secretary of Health, will focus on geographic and demographic hotspots in 19 states, Washington, DC, and Puerto Rico, where the majority of the new HIV cases are reported, as well as in 7 states with a disproportionate occurrence of HIV in rural areas (eFigure in the Supplement).

The strategic initiative includes 4 pillars:

1. diagnose all individuals with HIV as early as possible after infection;
2. treat HIV infection rapidly and effectively to achieve sustained viral suppression;
3. prevent at-risk individuals from acquiring HIV infection, including the use of pre-exposure prophylaxis (PrEP); and
4. rapidly detect and respond to emerging clusters of HIV infection to further reduce new transmissions.

A key component for the success of this initiative is active partnerships with city, county, and state public health departments, local and regional clinics and health care facilities, clinicians, providers of medication-assisted treatment for opioid use disorder, and community- and faith-based organizations.

The implementation of advances in HIV research achieved over 4 decades will be essential to achieving the goals of the initiative. Clinical studies serve as the scientific basis for strategies to prevent HIV transmission/acquisition. In this regard, as reviewed in a recent Viewpoint in JAMA,⁵ large clinical studies have recently proven the concept of undetectable = untransmittable (U = U), which has broad public health implications for HIV prevention and treatment at both the individual and societal level. U = U means that individuals with HIV who receive antiretroviral therapy (ART) and achieve and maintain an undetectable viral load do not sexually transmit HIV to others.⁵ U = U will be invaluable in helping to counteract the stigma associated with HIV, and this initiative will create environments in which all people, no matter their cultural background or risk profile, feel welcome for prevention and treatment services.

Results from numerous clinical trials have led to significant advances in the treatment of HIV infection, such that a person living with HIV who is properly treated and adherent with therapy can expect to achieve a nearly normal lifespan. This progress is due to antiviral drug combinations drawn from more than 30 agents approved by the US Food and Drug Administration (FDA), as well as medications for the prevention and treatment regimens of HIV-associated coinfections and comorbidities. Furthermore, PrEP with a daily regimen of 2 oral antiretroviral drugs in a single pill has proven to be highly effective in preventing HIV infection for individuals at high risk. In addition, postexposure prophylaxis provides a highly ef-

jama.com

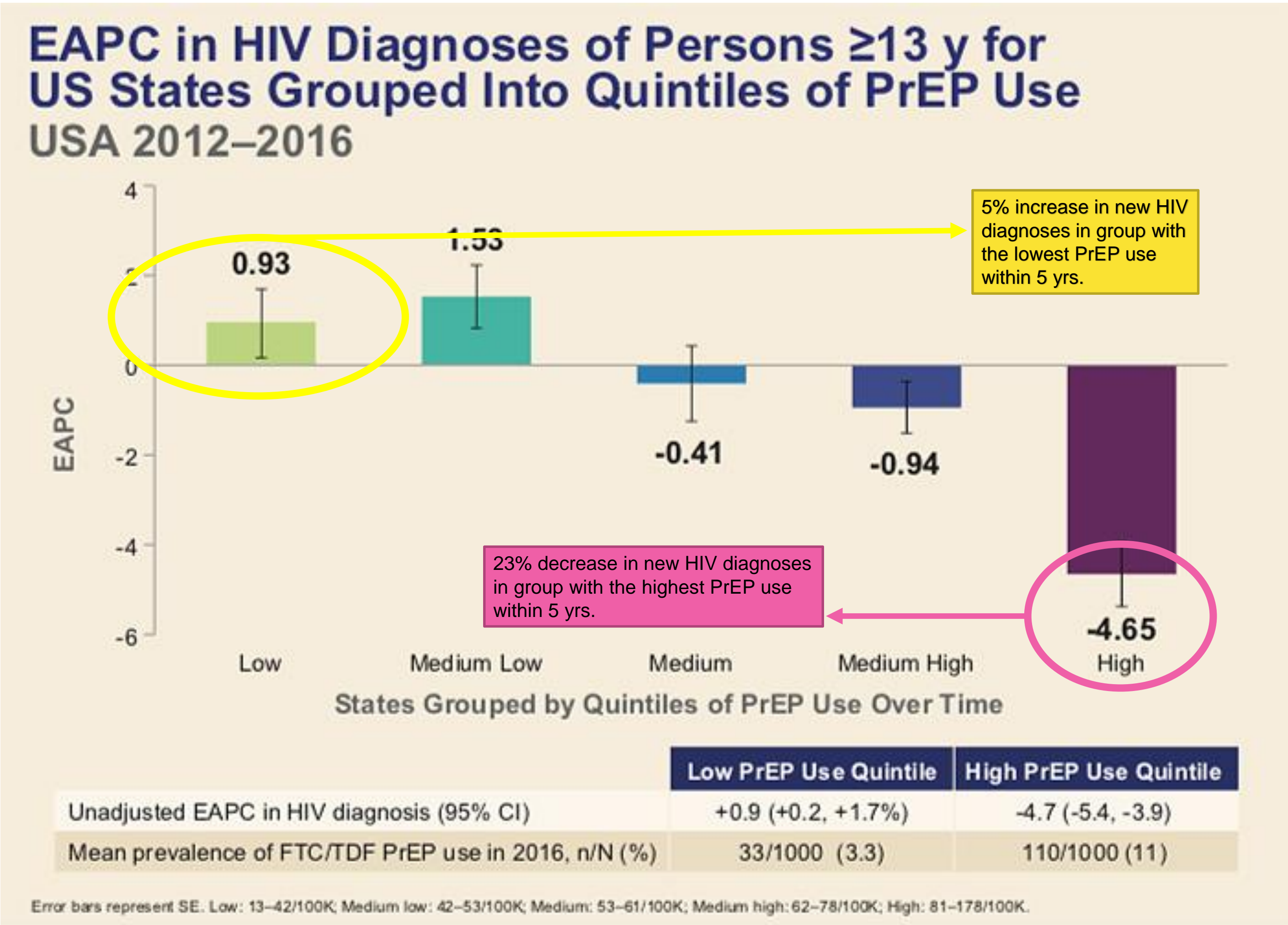
JAMA Published online February 7, 2019

E1

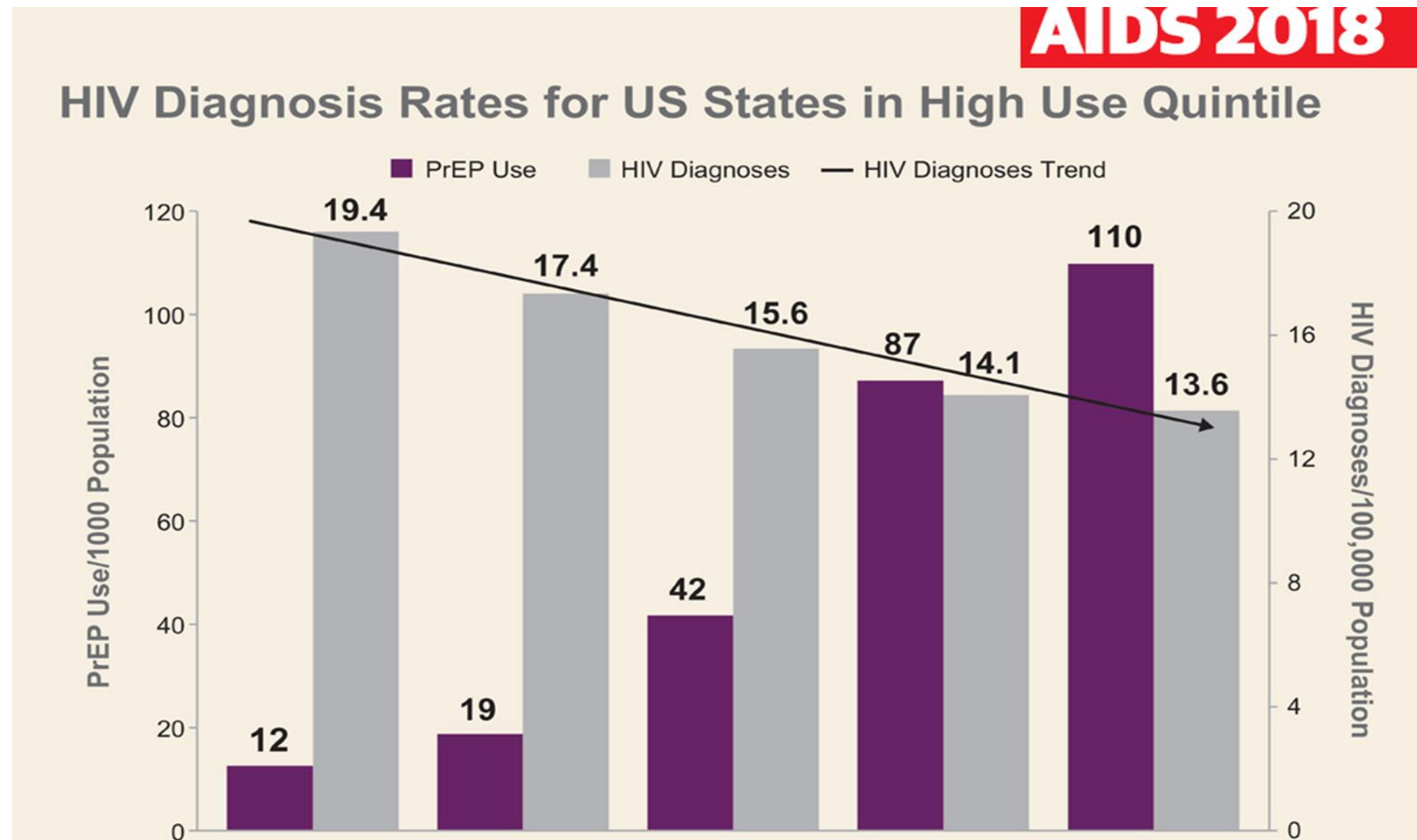
© 2019 American Medical Association. All rights reserved.

Downloaded from jamanetwork.com by guest on 03/05/2019

PrEP scales up, HIV incidence decline..



PrEP scales up, HIV incidence decline..



“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks



HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES



- **Funding:**



US National Institutes of Health – NIH & Gilead Sciences International Ltd.



- **Aims:**

- ❖ Determining the demographic and behavioral characteristics of MSM receiving PrEP
- ❖ Emphasizing the importance of linkage to care aimed at administering PrEP to 'high risk' HIV-negative MSM
- ❖ The collection of data regarding the early parameters of the PrEP cascade so that they can be used in PrEP effectiveness studies and models as a public health intervention

“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks



HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES



Method 1: “SOPHOCLES” program

Aim: Recruitment of 100 HIV-negative “high risk” MSM → PrEP

MSM recruitment procedure:

- ❖ Ath Checkpoint
- ❖ Respondent Driven Sampling
- ❖ Test for HIV
- ❖ Interview through structured questionnaire (max 1,5 hrs)
- ❖ Financial incentive
- ❖ MSM search period: 11/2016 – 04/2018



ΚΟΥΠΟΝΙΑ ΣΥΜΜΕΤΟΧΗΣ

Ελληνική Επιστημονική Εταιρεία Έρευνας του AIDS και
ΣΜΝ & Πανεπιστήμιο του Chicago
Πρόγραμμα SOPHOCLES - P4G
Κουπόνι συμμετοχής

ΑΑ κουπονιού: _____

Διεύθυνση κέντρου: Athens Checkpoint, Πιπτάκη 4,
Μοναστηράκι (δές χαρτί στο πίσω μέρος). ΠΑ 12μ-3μ
Πρεξ. λειτουργίας: ΔΕ-ΠΕ 4μ-7μ. (Μ. ΡΑΝΤΕΒΟΥ)
Τηλ. επικοινωνίας για ραντεβού: 6984 900 816
Μπορείτε να συμμετάσχετε με αυτό το κουπόνι μέχρι: _____

Ελληνική Επιστημονική Εταιρεία Έρευνας του AIDS και
ΣΜΝ & Πανεπιστήμιο του Chicago
Πρόγραμμα SOPHOCLES - P4G
Κουπόνι κινητρού

ΑΑ κουπονιού: _____

Διεύθυνση κέντρου: Athens Checkpoint,
Πιπτάκη 4, Μοναστηράκι

Τηλ. Επικοινωνίας για ραντεβού: 6984 900816

Μπορείτε να έρθετε στο κέντρο με αυτό το κουπόνι και αν
ανταποκρίνεστε στα κριτήρια συμμετοχής θα σας δοθούν:
• Ένα οικονομικό κίνητρο για τη συμπλήρωση ερωτηματολογίου
και έλεγχο HIV
• Το αποτέλεσμα της εξέτασης HIV

Το κουπόνι δε θα γίνεται δεκτό αν:

- Έχει συμπληρωθεί ο απαιτούμενος αριθμός ατόμων του προγράμματος
- Το κουπόνι είναι φθαρμένο και δε φαίνονται τα στοιχεία του
- Έχετε ξανασυμμετάσχει

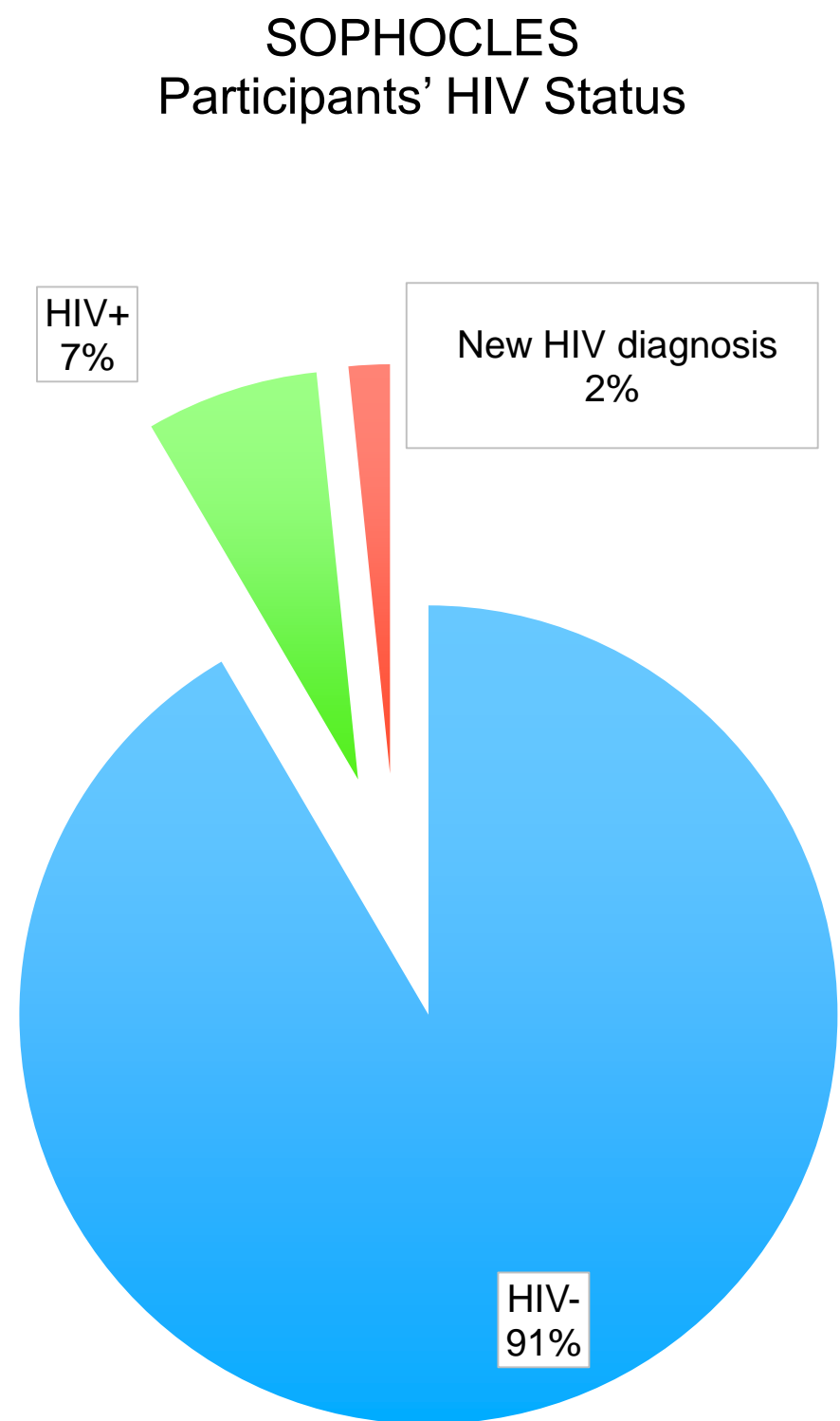
Μπορείτε να πάρετε το ποσό για κάθε άτομο που θα προσέλκυσετε στη μελέτη αν αυτό το άτομο συμπληρώσει το ερωτηματολόγιο και δώσει δείγμα αίματος

Το κουπόνι δε θα γίνεται δεκτό αν είναι φθαρμένο και δε φαίνονται τα στοιχεία του



Participants’ Demographics

- ❖ 308 participants:
 - 282 *HIV-*
 - 21 *HIV+*
 - 5 with *new HIV diagnosis*
- ❖ Greek origin: 91,2%
- ❖ Median age: 28,9 (8,2) yrs.
- ❖ Median no of yrs. of education (SD): 15,7 (2,5)
- ❖ 54 (19.4%) unemployed
- ❖ 40 (14.2%) bisexual sexual orientation



“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks



HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES



Participants' Behavioral & Psychosocial Characteristics

- ❖ 211 (74,8%) have been tested for HIV in the past year
- ❖ 71 (25,4%) reported an STI in the past year
- ❖ Median no (25o, 75o) of the size of their sexual network: 10 (3,30) persons in the last 6 months
- ❖ 84 (31,2%) reported symptoms of depression

- PrEP eligibility criteria were met by **129 / 282 (41.9%)**
 - **107** continued in the clinical trial

ΤΟ ΚΑΘΗΜΕΡΙΝΟ ΧΑΠΙ
ΠΟΥ ΜΠΟΡΕΙ ΝΑ ΕΜΠΟΔΙΣΕΙ
ΤΗ ΜΕΤΑΔΟΣΗ ΤΟΥ HIV

ΤΙ ΕΙΝΑΙ Η PrEP
ΠΡΟΛΗΠΤΙΚΗ ΘΕΡΑΠΕΙΑ ΜΕ TRUVADA
ΠΟΥ ΕΧΕΙ ΑΠΟΔΕΙΧΘΕΙ ΟΤΙ ΜΕΙΩΝΕΙ ΠΑΝΩ
ΑΠΟ 90% ΤΟΝ ΚΙΝΔΥΝΟ ΛΟΙΜΩΣΗΣ HIV

Είσαι HIV αρνητικός Άνδρας που κάνει Σεξ με Άνδρες (ΑΣΑ) και ισχύει κάτι από τα παρακάτω ή συνδυασμός αυτών:

- ❑ δεν χρησιμοποιείς πάντα προφυλακτικά;
- ❑ έχεις πολλούς συντρόφους;
- ❑ έχεις HIV θετικούς συντρόφους;
- ❑ είσαι εργαζόμενος στο σεξ;

Τότε μπορείς να συμμετάσχεις κι εσύ στο πρόγραμμα SOPHOCLES - P4G που στοχεύει να περιορίσει τη μετάδοση του HIV/AIDS και να λάβεις δωρεάν PrEP τουλάχιστον για ένα χρόνο.


Στην πρώτη φάση του προγράμματος περιλαμβάνεται:

- ❑ συμπλήρωση ερωτηματολογίου που αναφέρεται στη σεξουαλική δραστηριότητα και τη χρήση ουσιών
- ❑ HIV Test
- ❑ κίνητρα συμμετοχής 20€ & 10€ για κάθε έναν που θα προτείνεις και θα συμμετέχει στο P4G

Ath Checkpoint,
Πιττάκη 4, Μοναστηράκι

6984900816
(Μόρβα)

Διόρθωση από την Ελληνική Στατική Μείωση του AIDS και των Σεξουαλικά Μεταδιδόμενων Νοσημάτων σε συνεργασία με το Ινστιτούτο για Άρρωστους και το Ινστιτούτο για Σέξουαλ



“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks



HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES



Method 2: “P4G” (PrEP4Greece) clinical trial

❖ PrEP eligibility criteria

- HIV-
- HBV-
- No of sexual partners
- STIs
- UI
- PEP
- ChemSex

❖ Monitoring 1 yr.: 6 visits in total

Visit 0 - Screening

Visit 1 – Start of PrEP use

Visit 2 - 1 month after the start of PrEP

Visit 3 – 3 months after the start of PrEP

Visit 4 - 6 months after the start of PrEP

Visit 5 – 9 months after the start of PrEP

Visit 6 – 12 months after the start of PrEP

❖ Daily TDF/FTC (Truvada)

❖ Regular screening (HIV1, HAV, HBV, HCV, STIs)

❖ STIs treatment

❖ Vaccination planning

❖ Identification of potential side effects

❖ Renal function monitoring

❖ PrEP adherence monitoring

❖ Keeping of daily diary (e.g. sexual intercourse, drug use)

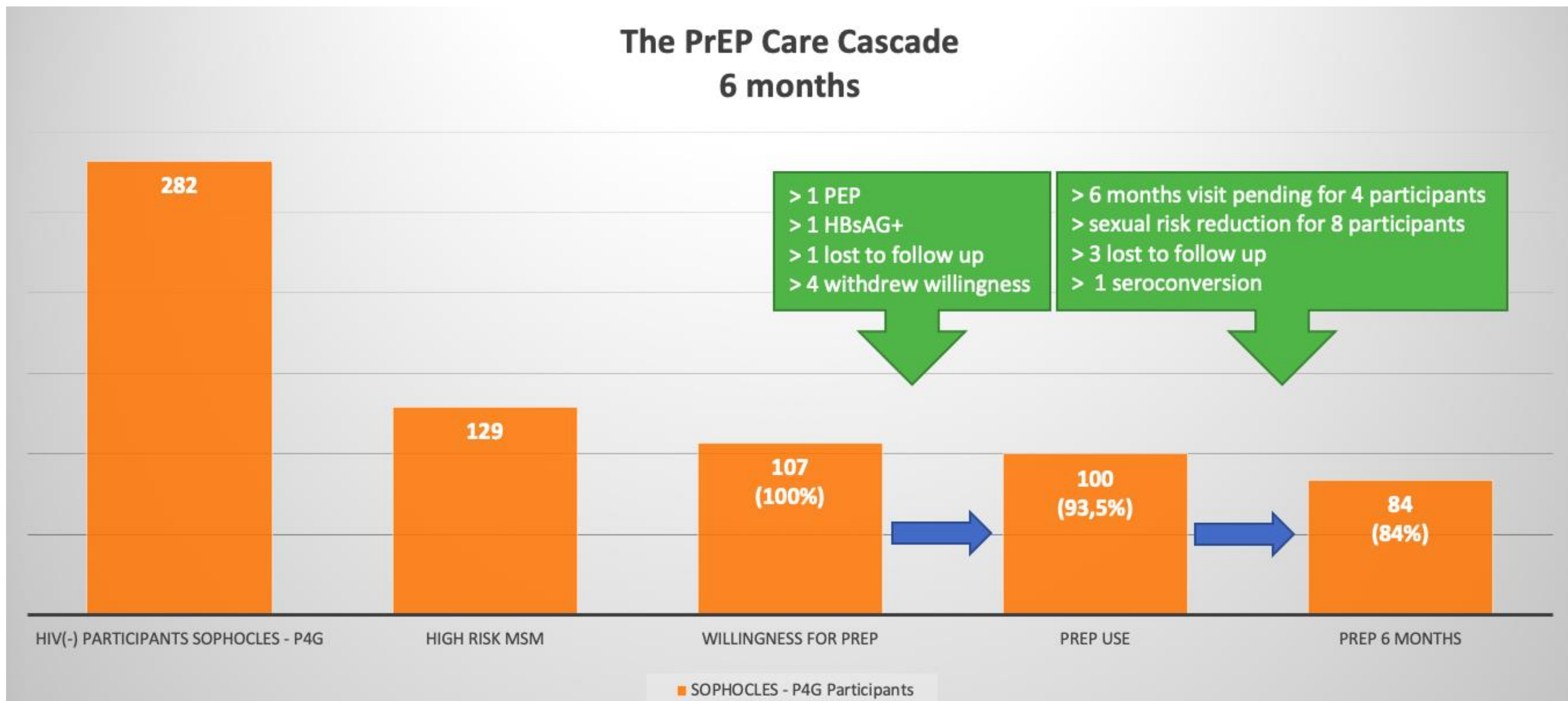
“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks



HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES



The PrEP Care Cascade 6 months



“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks



HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES



Results I, N = 84 Characteristics, Screening for PrEP

- ❖ Median age (SD:9,3): 33,5 yrs.
- ❖ Median no of yrs. of education (SD:2,4): 15,9 (majority: higher education)
- ❖ Full time employment: 56.1% (46/84)
- ❖ No of sexual partners: Median no (25o, 75o) of the size of their sexual network: 30 (15,60) people
- ❖ Participation in group sex: 96,4%
- ❖ Search of sexual partners through mobile apps: 64% (Grindr, Planet Romeo, Scruff)
- ❖ Drug use: 79,7%
- ❖ Chemsex (Crystal Meth, Meph, GHB/GBL, cocaine): 66,7%

“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks

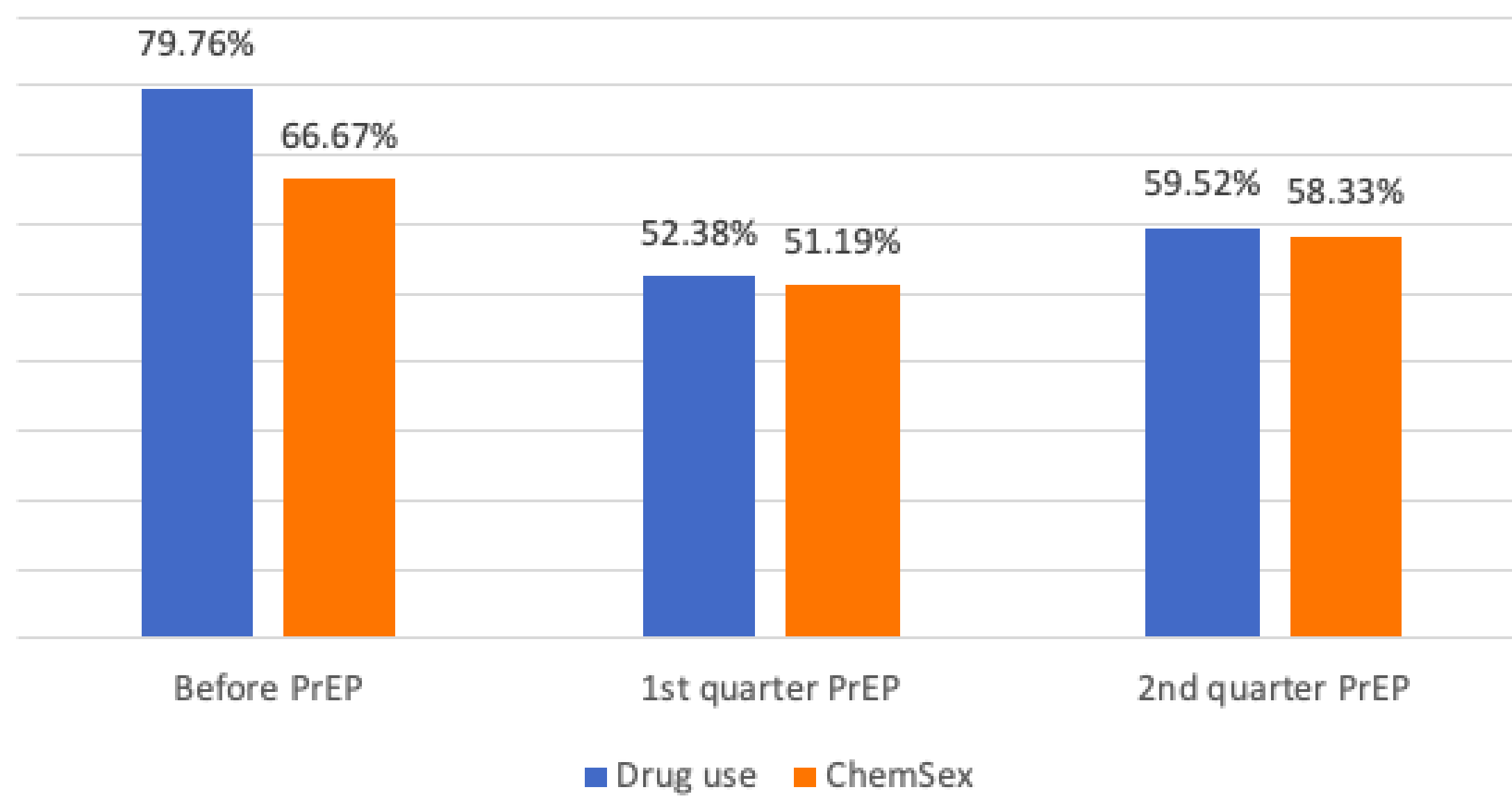


HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES

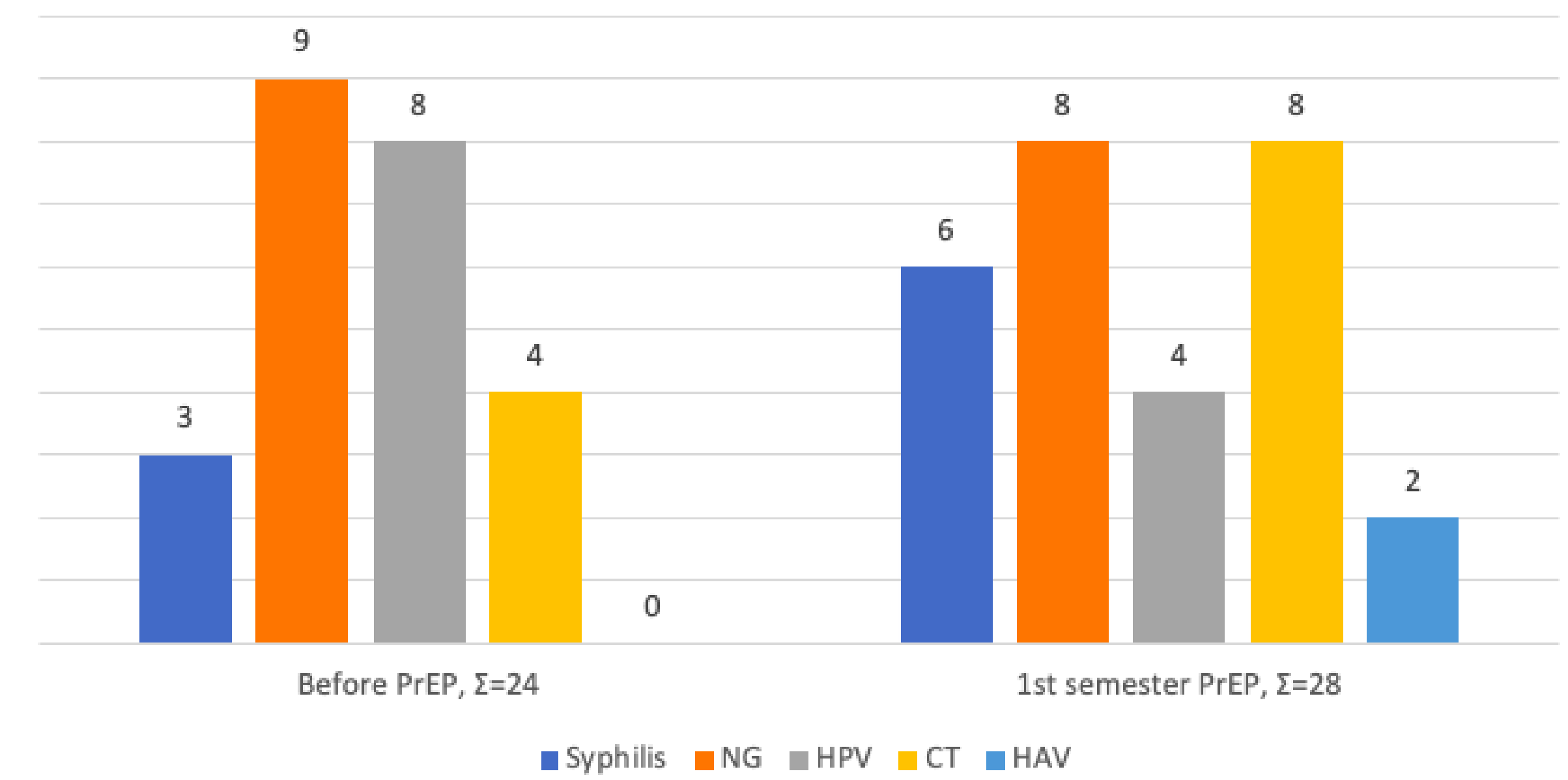


Results II, N = 84 6 months PrEP use

Participants' Behavioral Characteristics



Participants' Behavioral Characteristics





HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES



Results II, N = 84
6 months PrEP use

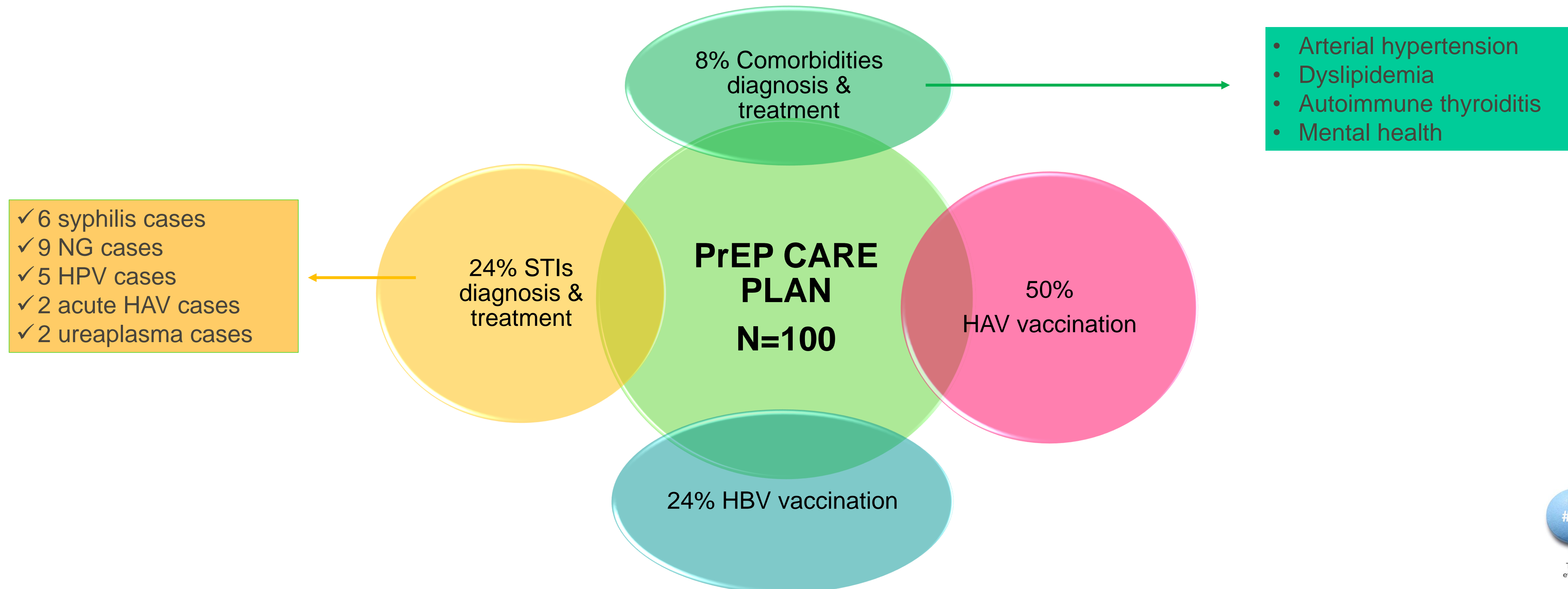
PrEP adherence: 96%, Stable in both quarters

	1 st quarter Median no (25o, 75o)	2 nd quarter Median no (25o, 75o)	p value
% UAI	91,7% (62.4% - 100.00%)	97,4% (78.1% - 100.00%)	p=0.009
UAI [Passive] (times)	5,5 (2 - 11.5)	8 (2 - 22)	p<0.001
UAI [Top] (times)	8,5 (2 - 20)	14 (5 - 28)	p<0.001
N sexual partners (individuals)	26 (17.5 - 35.5)	19,5 (14 - 39)	p=0.007

“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks



Results IV, N = 100 6 months PrEP use



“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks



HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES



Conclusions

- ❖ Adoption of a PrEP administration program for both primary and secondary STI and HIV transmission prevention
- ❖ The creation of special sexual health structures through which PrEP will be available
- ❖ Collaboration with the community in the design and implementation of HIV prevention programs
- ❖ *74 PrEPers completed the program..*
- ❖ *Implementation of PrEP in Greece seems that it is not associated with an increase in high-risk behaviors and the frequency of STIs*
- ❖ *Excellent PrEP adherence*



**HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES**



THE UNIVERSITY OF
CHICAGO



CHECKPOINT
prevention and testing centers

PositiveVoice
people+HIV

News travel fast and demand is increasing



“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks



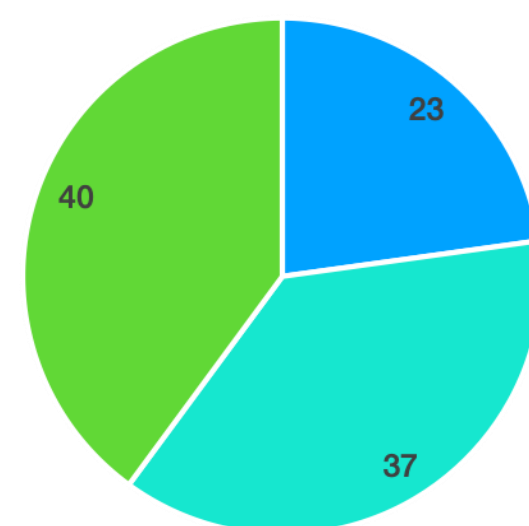
HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES



Knowledge is increasing...

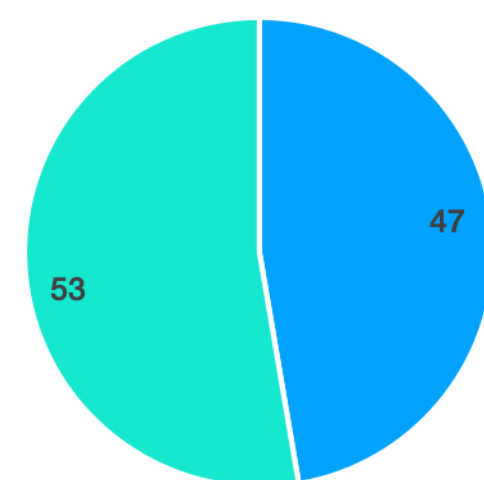
2016

Γνώση PrEP



■ Ναι ■ Όχι ■ ΔΡ/ΔΑ

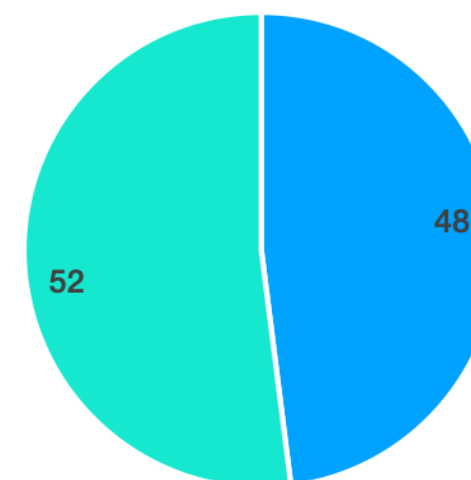
Ενδεχόμενο λήψης PrEP



■ Ναι ■ Όχι

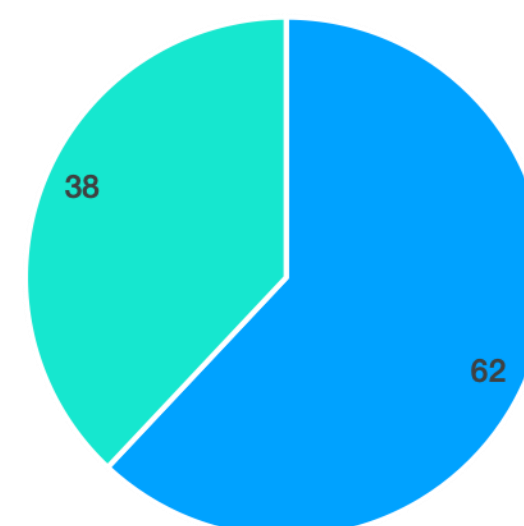
2017

Γνώση PrEP



■ Ναι ■ Όχι

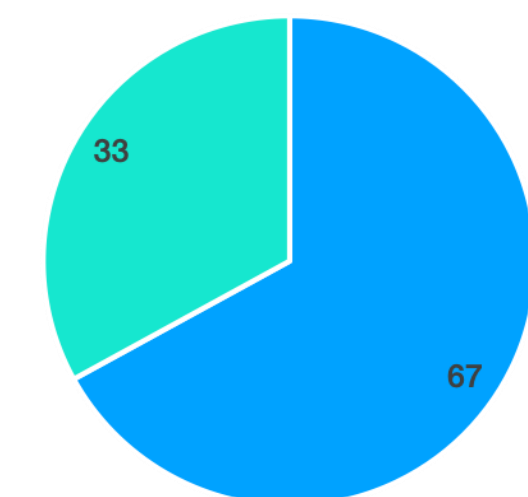
Ενδεχόμενο λήψης PrEP



■ Ναι ■ Όχι

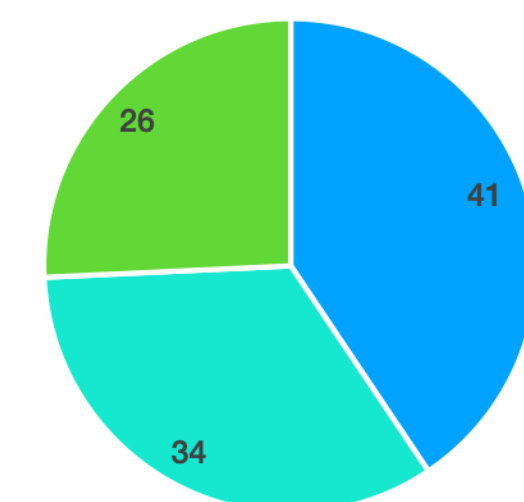
2018

Γνώση PrEP



■ Ναι ■ Όχι

Ενδεχόμενο λήψης PrEP



■ Ναι ■ Όχι ■ Υπό προϋποθέσεις

“SOPHOCLES - P4G”: Targeted administration of PrEP to HIV+ networks



HELLENIC SCIENTIFIC SOCIETY
FOR THE STUDY OF AIDS
AND SEXUALLY TRANSMITTED DISEASES



‘Give the power to the people, put the pill in their palms’

Prof. Sheena McCormack

(IAS, Paris 2017)



<https://youtu.be/0Py3ldwm9c7e-6252>



Summit 2019

Warsaw, Poland | 10-12 October

“SOPHOCLES – P4G”

The experience of the first interventional implementation PrEP pilot program in Athens

Sophocles Chanos
Checkpoint Head