

Eradicazione dell'HCV nelle
persone con HIV in Italia.
Sfide e opportunità
negli MSM:
l'osservatorio del
BLQ Checkpoint

21 settembre 2018
Sandro Mattioli – Plus Onlus



Disclosure

- Cepheid sponsored my presence at IUST conference.
- ViiV Healthcare sponsored my presence at IAC 2018

Plus received grants from the following companies:

- ViiV Healthcare
- AbbVie
- Gilead Science
- Johnson&Johnson

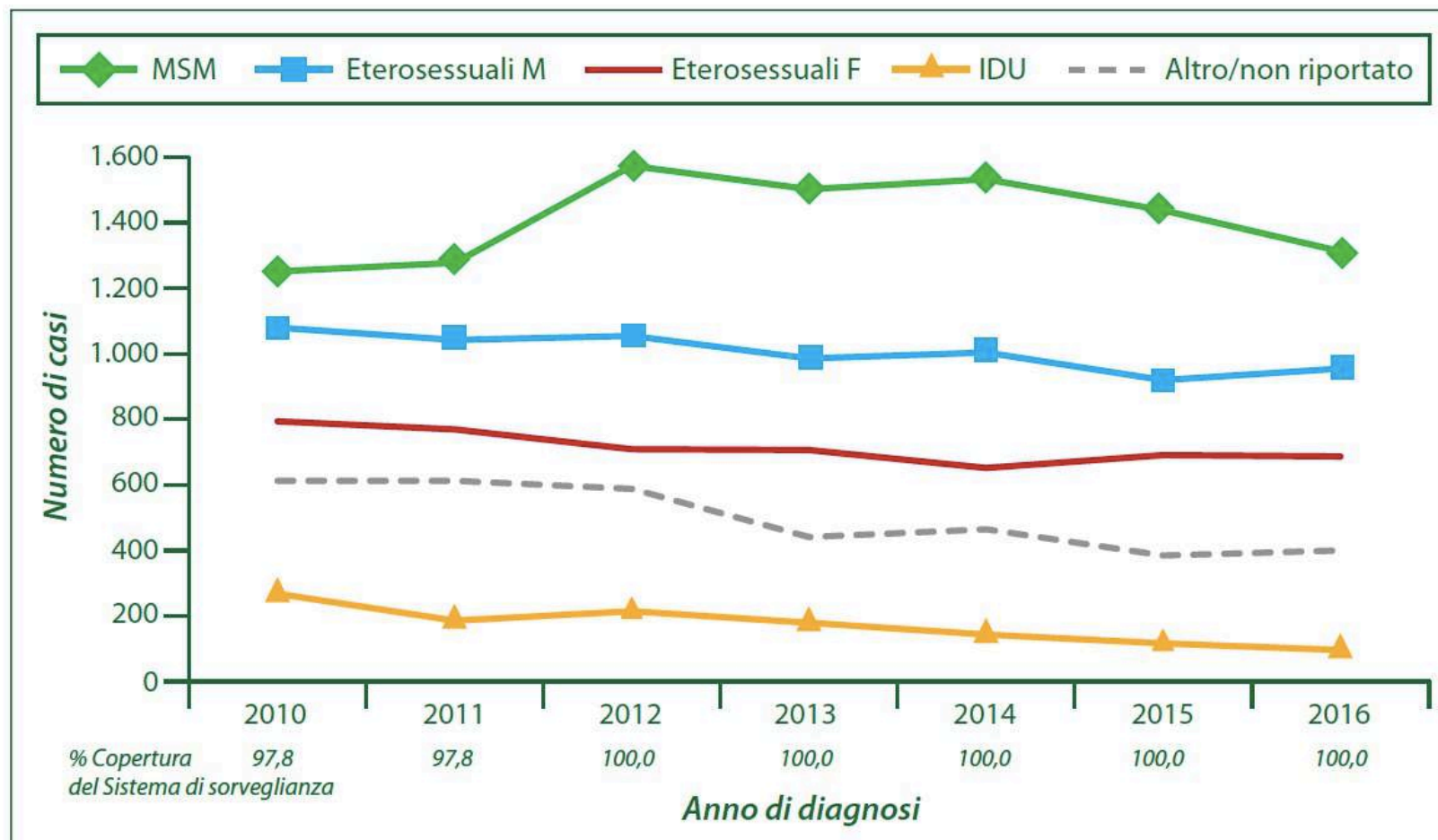
BLQ Checkpoint: the first italian community based center

- Opened in June 2015
- Made possible thanks to an agreement between the Municipality of Bologna, the local health authority and Plus that manages it
- With the support of the Emilia-Romagna Region (?)



The “case” of men having sex with men

Number of new diagnoses of HIV infection by transmission and year of diagnosis (2010-2016)



Traditional test activity at BLQ Checkpoint

- Rapid HIV test (Alere Determine™ HIV-1/2 Ag/Ab Combo – capillary sampling test)
- Rapid HCV test (OraQuick® HCV Rapid Antibody Test – saliva)
- Rapid test for Syphilis (Alere Determine™ Syphilis – capillary sampling test)
 - Results: 20 minutes
 - Free access on reservation: Tuesday and Thursday 18-21
 - Free, anonymous, confidential
 - Peer Counseling (pre and post test)





USERS DATA

January 2017- December 2017

Total tests performed	1767
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Average time per HIV test (2 testing points)	40 min
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1 minute HIV test (Biolytical) c/o Black Sauna
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Total accesses	1140
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First time	963
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Only counselling	1
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HIV test	979
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HIV 1min.	38
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HCV test	568
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HAV-VAC	176
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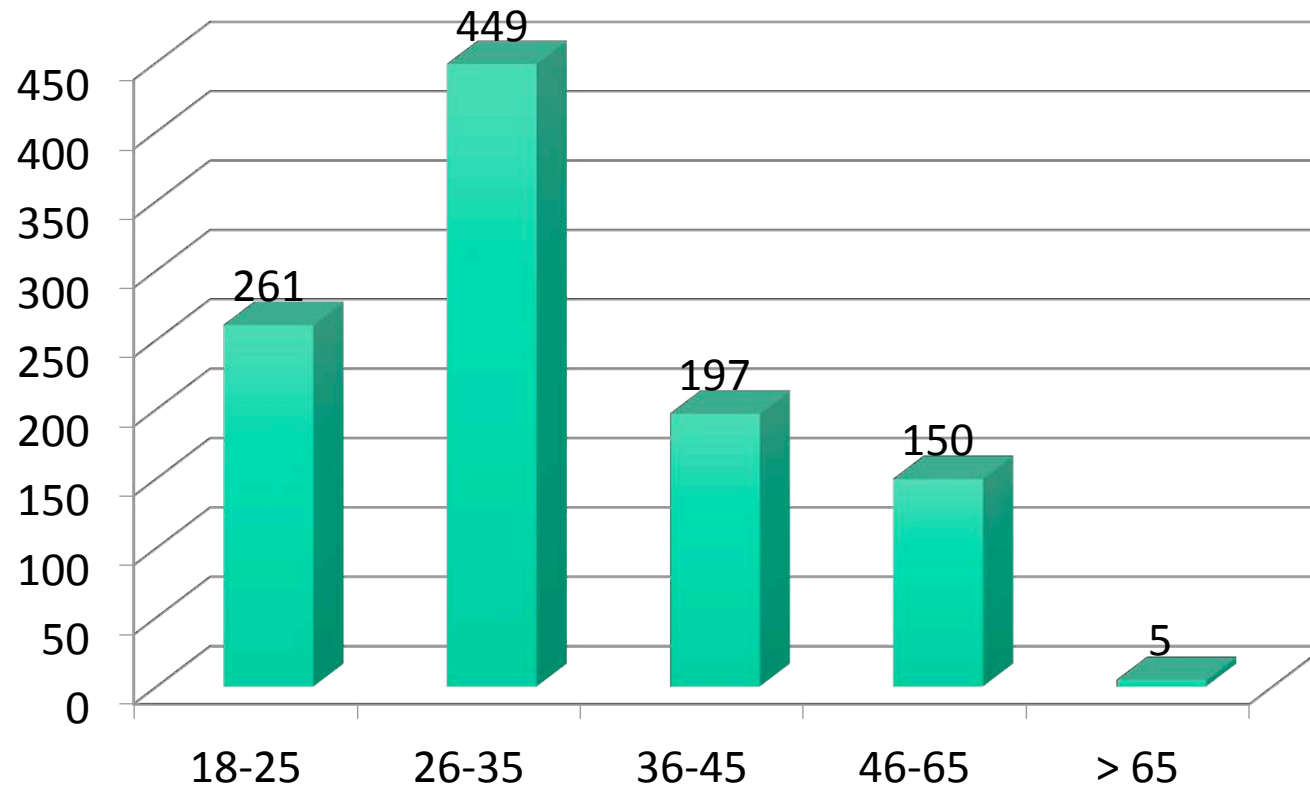


PERSONE LGBT
SIEROPOSITIVE
ONLUS

USERS DATA

January 2017- December 2017

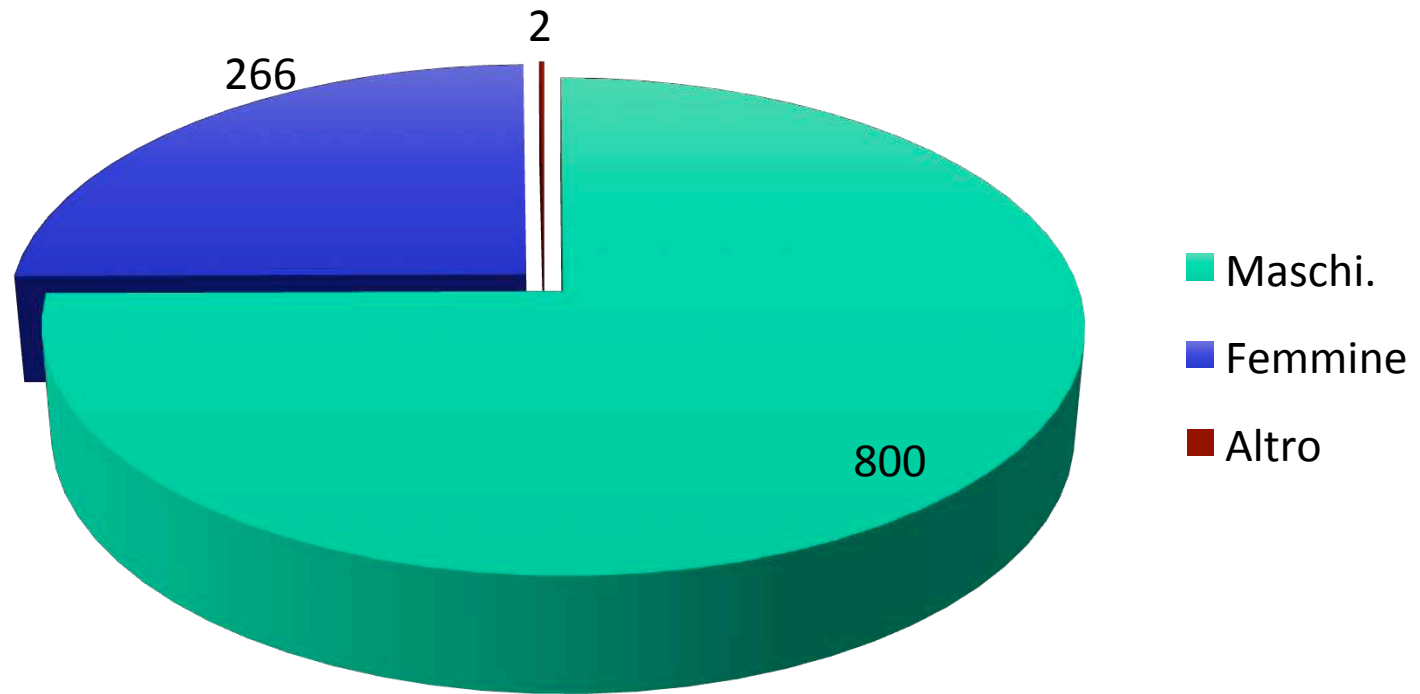
Age



USERS DATA

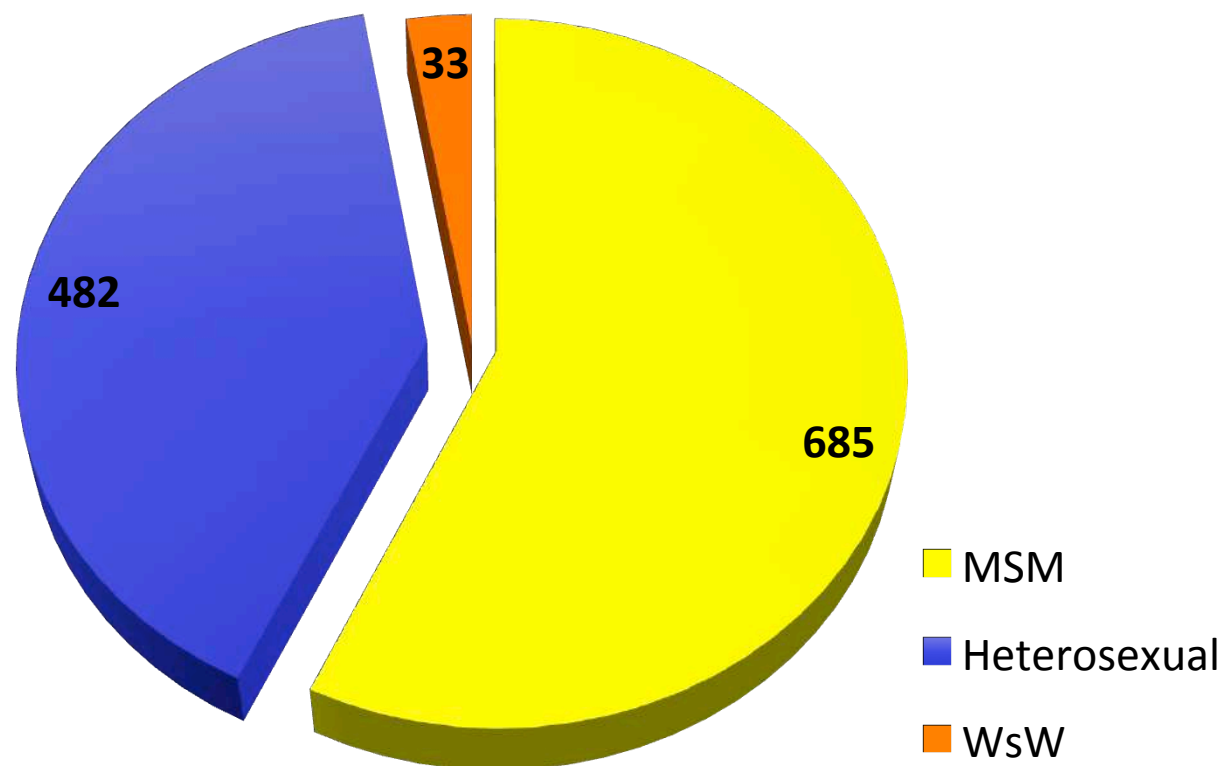
January 2017- December 2017

Gender



01 gennaio 2017 – 31 dicembre 2017

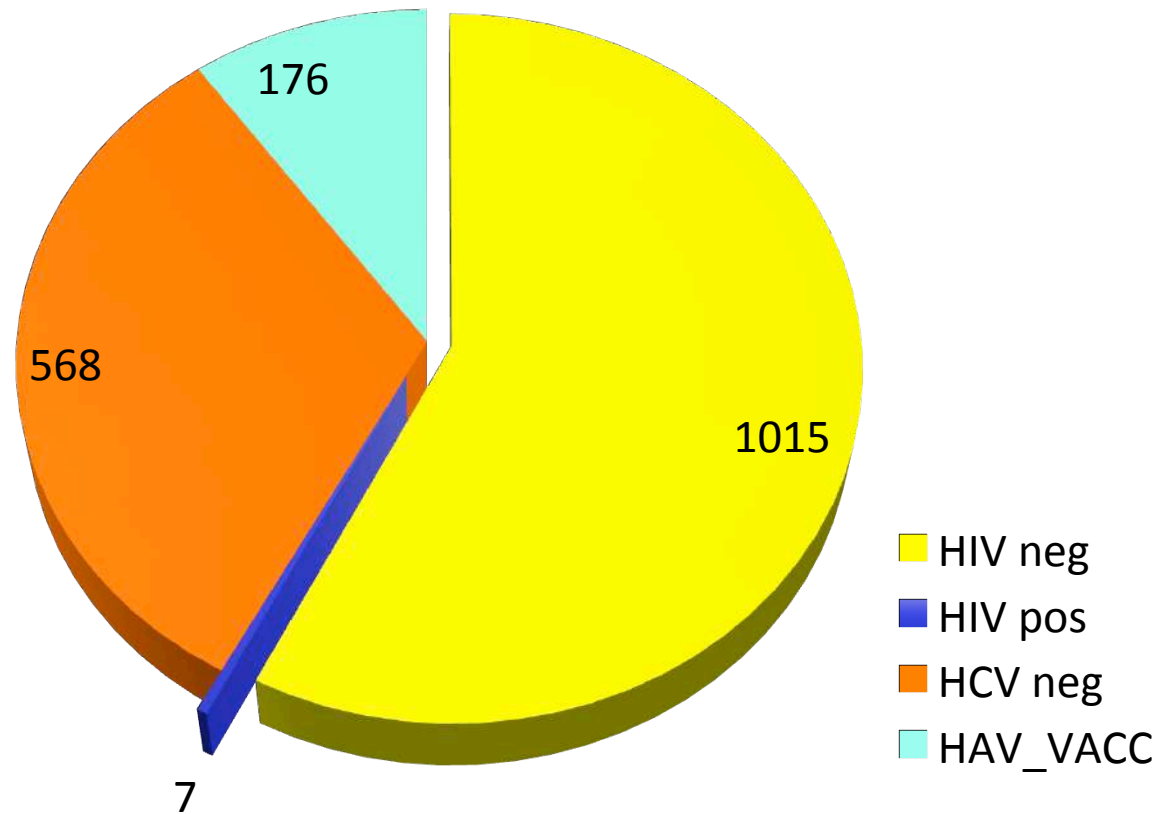
Sexual Orientation



USERS DATA

January 2017- December 2017

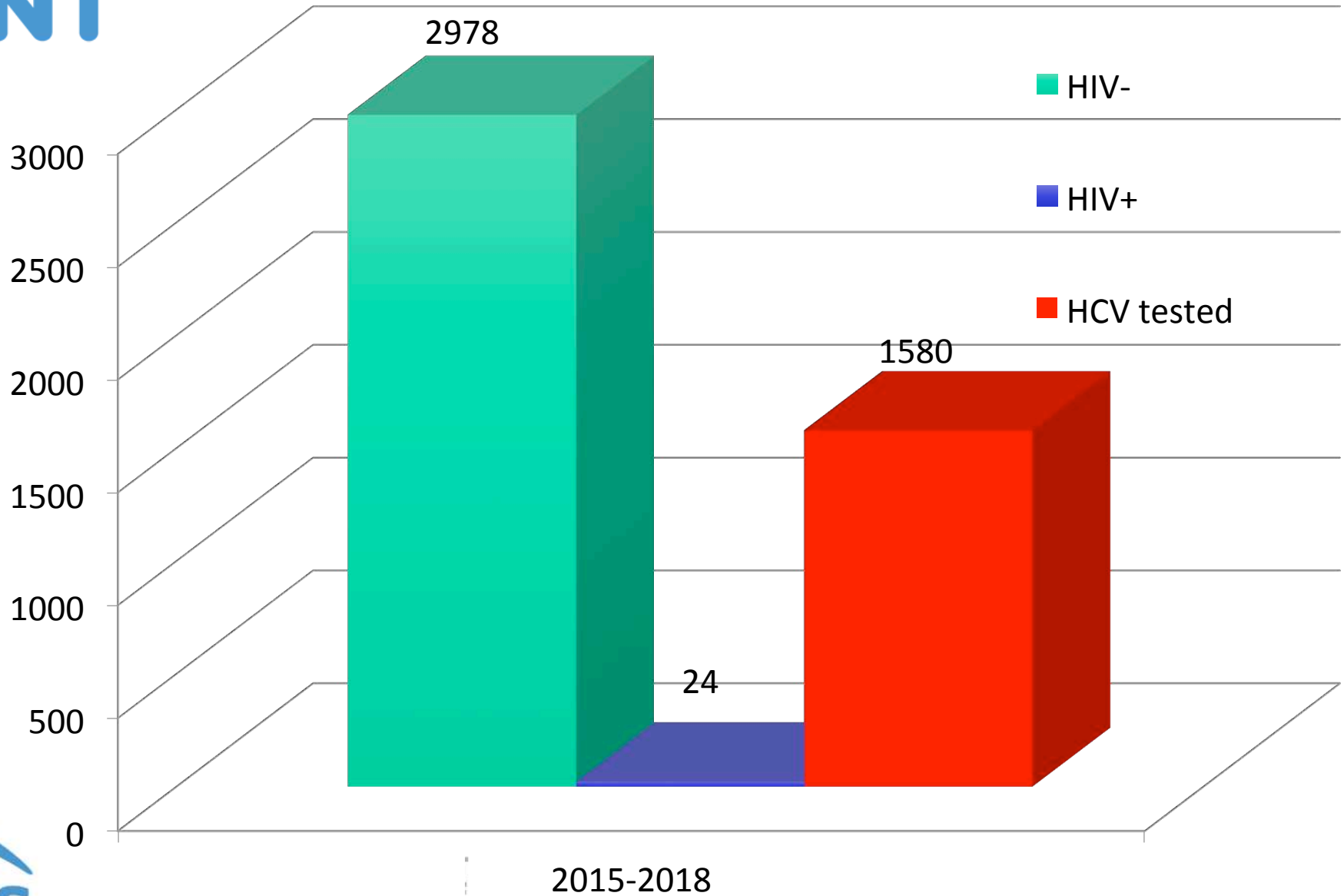
TEST PERFORMED



USERS DATA

tests

From 15 September 2015* to 31 July 2018



Sex Check

Clinical study outside the clinic

Synopsis

Title	“SEX CHECK” - Risk evaluation of acquiring HIV and other STD in the MSM and Transgender target population
Objectives	<p>Primary objective: evaluation of risk behaviour by administration of a questionnaire.</p> <p>Secondary objectives:</p> <ul style="list-style-type: none">• to determine prevalence of common STIs (Hepatitis C, Chlamydia infection, gonorrhoea, syphilis) in the target population;• to determine incidence of new HIV and STIs infections in these subjects, evaluated every 3 months during a period of 1 year• to evaluate the percentage of subjects modifying their risk class during 1 year of observation.
Study design	Monocentric, interventional, exploratory study without medicine, in collaboration with “Sant’Orsola Hospital”.

Feel
sex
CHECKED

PrEP

HAI FATTO SPORT ESTREMO DI RECENTE?

LA PrEP PUÒ PROTEGGERTI DALL'HIV SE TI CAPITA DI NON USARE IL CONDOM

BLQCHECKPOINT

Sex Check – Tests

Xpert® HCV VL Fingerstick - RUO kits

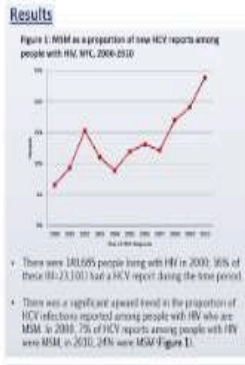
- Venous and capillary EDTA whole blood
- Definitive results in ≤ 60 minutes
- Eliminates need for confirmatory testing allowing single visit, test and treat algorithm



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*Forward looking statement, expected availability Q3 2018. Pending CE registration.

So could MSMs HIV+ not be affected by hepatitis C?



Acute HCV in HIV+ MSM

Multiple reports of increasing acute HCV
 - majority lacking classical risk factors

- 49 cases from 2000-2008 in Amsterdam
 - 58% with seroconversion within 12 months

- Ongoing sexually transmitted HCV 4d outbreak in Paris

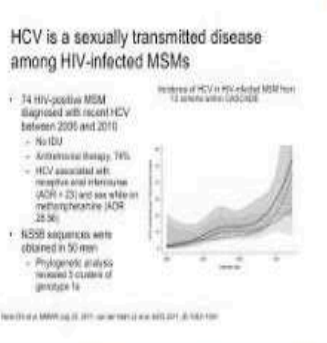
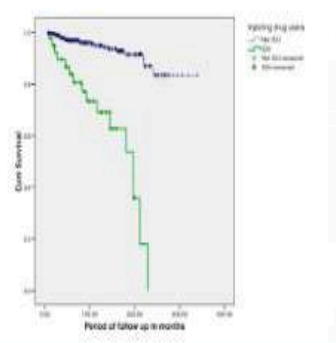
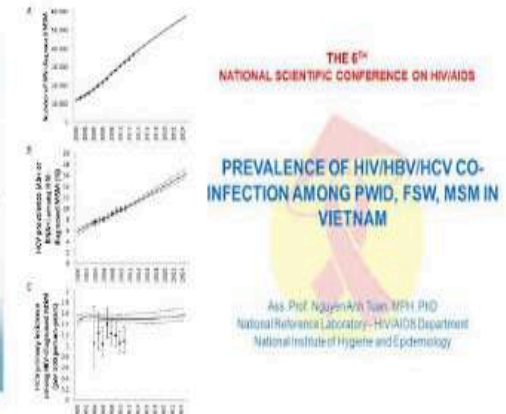
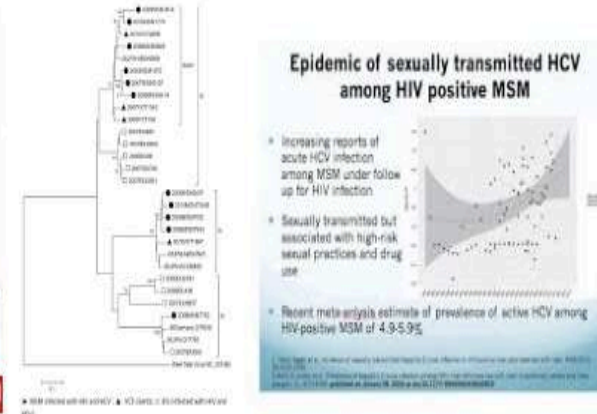
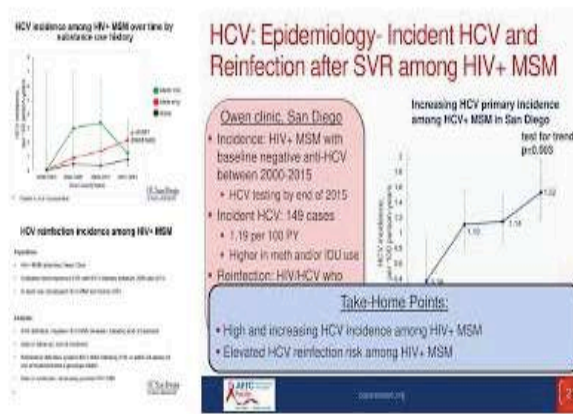
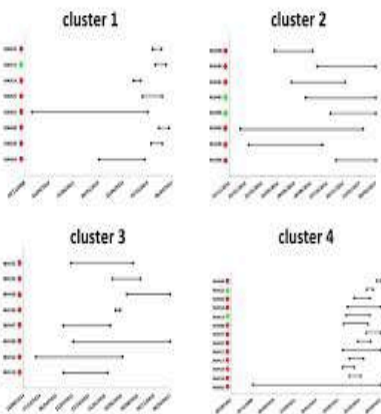
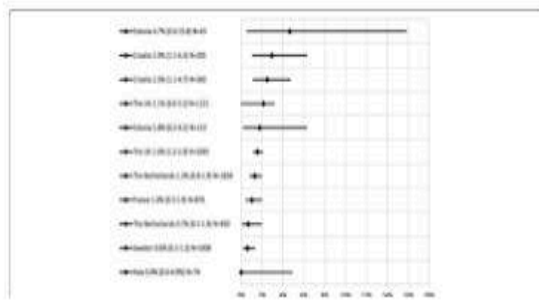
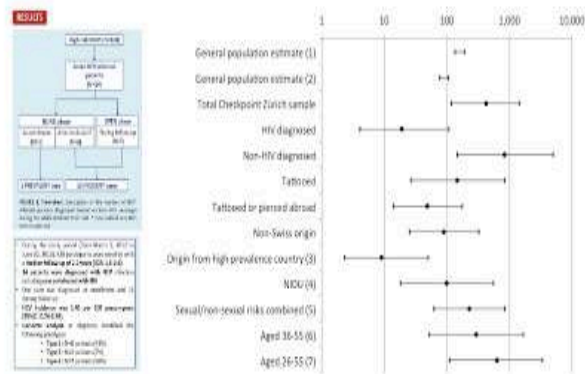


Table 1. Factors associated with hepatitis C virus seroconversion (after adjustment) in studies of HIV-positive MSM, with attributable risk percentages.

Ref.	Behavior	Adjusted measure of association (95% confidence interval)	APR	or exposure to controls	PAR%
Farrar et al. (18)	Receptive anal intercourse without a condom, with ejaculation	21 (2.2-243.8)	93.7%	23.0%	23.0%
Scheidt et al. (14)	Sexual partners with bleeding frequent receptive fisting and/or gloves or gloves (hand)	4.2 (1.2-15.8)	81.9%	4.5%	3.9%
Wardle et al. (20)	Receptive anal sex	2.1 (1.3-3.3)	52.4%	11.0%	36.7%
Farrar et al. (18)	Sex while high on methamphetamine	28.6 (1.8-443.0)	76.5%	4.0%	3.9%
Scheidt et al. (14)	Use of quality lubricated drug (cocaine, amphetamine, benzoin and so on)	3.2 (1.1-9.6)	69.2%	12.1%	36.7%

PAR%, population attributable risk percentage.

Fist and ChemSex Parties...

We are getting ready



Special thanks

a special
thanks to
our
wonderful
team of
volunteers
– including
doctors
and nurses



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