

ACA NEWSFILE

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Editorial Board

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~ Calendar ~

- 49th CFA Meeting
13 December 2018
- 105th ACA Meeting
11 January 2019

HIV/AIDS Statistics in Hong Kong - Updated 30 September 2018

| | | Q3 2018 | | Cumulative (since 1984) | |
|----------------------------------|------------------------------------|------------|-------------|----------------------------|--------------|
| | | <u>HIV</u> | <u>AIDS</u> | <u>HIV</u> | <u>AIDS</u> |
| Sex | Male | 133 | 25 | 7,788 | 1,627 |
| | Female | 23 | 9 | 1,755 | 332 |
| Ethnicity | Chinese | 110 | 23 | 6,602 | 1,504 |
| | Non-Chinese | 37 | 11 | 2,700 | 455 |
| | Unknown | 9 | 0 | 241 | 0 |
| Route of Transmission | Sexual Contacts | 112 | 33 | 7,501 | 1,723 |
| | - <i>Heterosexual</i> | 29 | 15 | 3,182 | 1,033 |
| | - <i>Homosexual</i> | 66 | 12 | 3,813 | 576 |
| | - <i>Bisexual</i> | 17 | 6 | 506 | 114 |
| | Injecting drug use | 1 | 0 | 359 | 66 |
| | Blood/blood products recipients | 0 | 0 | 85 | 25 |
| Perinatal | 0 | 0 | 33 | 10 | |
| Undetermined | 43 | 1 | 1,565 | 135 | |
| Total | | 156 | 34 | 9,543 | 1,959 |



A Summary of the 104th ACA Meeting held on 12 October 2018

In search of an applicable model for pre-exposure prophylaxis (PrEP) in Hong Kong – lessons from piloting 2 PrEP studies

Prof LEE Shui-shan presented the background and preliminary findings of two local studies on PrEP (PrEP 1 and PrEP 2) conducted under the auspices of Stanley Ho Centre for Emerging Infectious Diseases, The Chinese University of Hong Kong.

The catchment of participants was from NGOs, three HIV clinics and through online recruitment. Apart from prescribing antiretrovirals for PrEP, condoms were regularly distributed to participants. Prof LEE considered building mutual trust relationship crucial in implementing the PrEP studies so that participants were willing to adhere to the protocols. The research team had maintained close monitoring of the participants by telephone follow-ups, emails and offering point-of-care tests to screen for sexually transmitted illnesses and HIV at the Research Clinic. Participants were informed of the results via phone as appropriate, without the need to re-attend clinic again.

The first study (PrEP 1) would be near completion by mid-2019 while the second study (PrEP 2) had already commenced in August 2018 and participants were being recruited. Prof LEE expected that full results would be ready in 2020.

Report of the Community Forum on AIDS

Members noted the summary report and discussions of the 48th CFA Meeting held on 14 September 2018. A summary of this CFA Meeting was contained in the ACA Newsfile (Vol. 25, No. 11 – November 2018).

A Summary of the 42nd Scientific Committee on AIDS and STI (SCAS) Meeting

The Chairperson referred members to the summary of the 42nd Meeting of SCAS held on 18 September 2018. DH briefed members on the major discussions.

Highlights of the 22nd International AIDS Conference (AIDS 2018), Amsterdam, Netherlands

DH introduced the highlights of the 22nd International AIDS Conference (AIDS 2018) held in Amsterdam, Netherlands on the topics of PrEP, HIV self-testing, and management of mental health and non-communicable diseases among people living with HIV (PLHIV).

From the experience of pilot studies and overseas experience, members noted that counselling and monitoring would be important where PrEP was used. Different options of financial arrangement might be considered in the way forward, including patient co-payment. Taking reference to HPV vaccines, the Government needed to consider several other factors before launching a public health programme, such as a comprehensive review of data from local research, availability of sexual health counselling services and other follow up support. The funding mechanism of a preventive programme should also be carefully considered.

Members welcomed more local implementation studies to gauge an appropriate service delivery model on PrEP. Different options of financial arrangement for PrEP might be considered in the way forward, including patient co-payment. In addition, the concept of a comprehensive sexual health model could be considered by stakeholders such as social hygiene clinics or NGOs. As some clients purchased PrEP from overseas, there is a need to enhance the capacity of public and private medical professionals and NGO staff by providing training in sexual health counselling and knowledge of risk compensation arising from PrEP use.

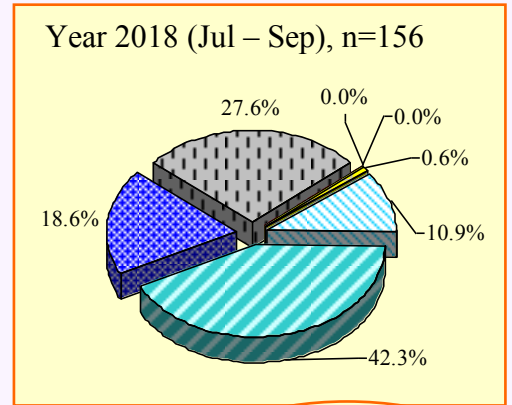
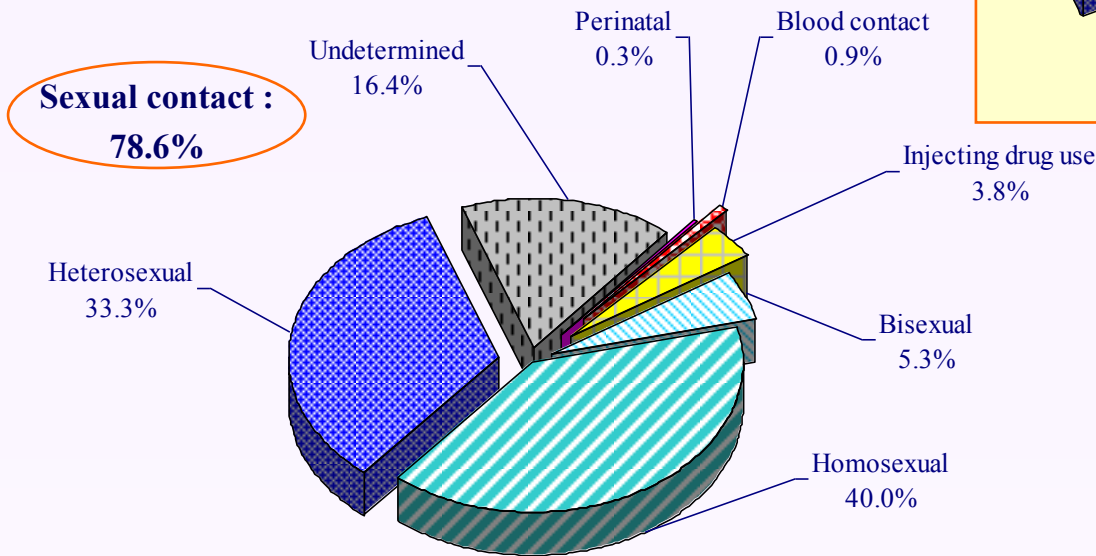
HIV treatment cascade 2016

DH presented the HIV treatment cascade 2016. Overall, the achievement of the 90-90-90 targets was 78.5%, 86.2% and 94.3% respectively. The first 90 was the proportion of PLHIV diagnosed, the second 90 was the proportion of PLHIV diagnosed being on antiretroviral therapy (ART) and the third 90 being the proportion of PLHIV on ART who achieved viral suppression. The limitations of the HIV treatment cascade include the relative lack of information on a certain proportion of cases, and the fact that the AIDS Epidemic Model currently adopted might not adequately adjust for mobile populations who had come to Hong Kong for HIV testing, tested positive but subsequently left. The number of PLHIV in Hong Kong might therefore have been overestimated.

DH was evaluating the use of a UNAIDS-supported modelling method called SPECTRUM as an alternative to the currently used model to estimate the number of PLHIV in Hong Kong. It was worth noting that UNAIDS would not publish countries' data generated by methods not validated by UNAIDS. Members supported the exploration for alternative to reconstruct the cascades.

HIV/AIDS Statistics

Routes of transmission of HIV infection
1984 – September 2018 (N=9543)



Note : The percentage may not add up to 100% due to rounding.

Annual HIV/AIDS Statistics

1984 – September 2018, Hong Kong (N=9543/1959)

