

News etter

Hong Kong Society for HIV Medicine
香港愛滋病醫學會

Issue 8 August 2021



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MESSAGE FROM PRESIDENT

As of 4 August 2021, Hong Kong has recorded a total of 11,997 Coronavirus Disease 2019 (COVID-19) cases and 212 deaths. Many countries worldwide have reported resurgence of COVID-19 cases.

Hong Kong Society for Infectious Diseases and our society have issued a Joint Statement on COVID-19 Vaccination in People Living with HIV. We recommended people living with HIV (PLHIV) to receive COVID-19 vaccines, regardless of their CD4 count, because the potential benefits outweigh the potential risks. There is currently no evidence that the vaccines caused more side effects in PLHIV. There is no interaction between the vaccines and antiretroviral therapy (ART) too. If PLHIV have other co-existing medical conditions that are not under control, they are advised to discuss with their doctors if deferral of vaccination is needed.

Our society has signed up to support for undetectable equals untransmittable (U=U), along with around 1,000 organizations worldwide. Our U=U campaign was commenced since 2020. A new webpage on U=U was designed within our society website. We have also promoted the message to the public through social media like Facebook and Instagram. Between November 2020 and March 2021, we have released a total of 24 posts providing background

information of the U=U campaign, scientific evidence, importance of drug adherence, voice of PLHIV and their partners, etc. By reading these posts and messages, we wish that the public have better understanding of the treatment and prevention of HIV, as well as reducing stigma and discrimination.

On the other hand, international guidelines recommended all PLHIV should be informed that maintaining undetectable HIV RNA levels (viral load) with ART prevents sexual transmission of HIV to their partners.¹ PLHIV should also be informed that transmission is possible during periods of poor adherence or treatment interruption. Recently, a web-based, self-reported, cross-sectional survey of PLHIV was conducted in 25 countries between April 2019 and January 2020 (n=2389, response rate=58.6%).² Overall, only 66.5% of all PLHIV reported having discussed U=U with their health care provider (HCP). PLHIV who reported discussing with their HCP about U=U had more favorable health outcomes than those not informed of U=U, such as greater adherence, better viral control, optimal sexual health, and greater willingness to share HIV status with others. The authors concluded that U=U discussions with PLHIV should be considered as a standard of care to help improve health-related outcomes of PLHIV.



References:

1. Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV. Department of Health and Human Services.

Available at :
<https://clinicalinfo.hiv.gov/sites/default/files/guidelines/documents/AdultandAdolescentGL.pdf>

2. Okoli C, Van de Velde N, Richman B, et al. Sex Transm Infect 2021;97:18–26.

Wish you enjoy this issue of HKSHM Newsletter!

Dr MP Lee
 President, HKSHM

Activities of the Society

4th HKSHM Annual Scientific Meeting (January 2021)

The 4th Annual Scientific Meeting (ASM) of HKSHM was held successfully on 16th January 2021. This is the first virtual ASM organized by the Society.

After the welcome speech by Dr. MP Lee, the President of the Society, a short video on the U=U Campaign designed by the Society was presented in the ASM.



Hong Kong Society for HIV Medicine
4th Annual Scientific Meeting
 16th January 2021
<https://www.hkshmasm.com> Time: 13:45 – 17:30 (Hong Kong Time)

Programme

13:45 – 13:55 Welcome speech Dr. Man-Po LEE <i>President, Hong Kong Society for HIV Medicine</i>	15:40 – 15:50 Break
13:55 – 14:50 Slide show on U=U Campaign	15:50 – 16:50 The ART of weight change: What do we know? <i>(include 15 mins Q&A)</i> Dr. Graeme J. MOYLE, MD, MR BSL, Dip. CIM <i>Specialist in HIV Medicine, Director of HIV Research Strategy, Chelsea and Westminster Hospital, London, UK (Sponsored by Gilead Sciences)</i>
14:00 – 14:40 Expanding HIV testing for early diagnosis <i>(include 10 mins Q&A)</i> Dr. Ian WOOLLEY, MBBS FRACP DTMH MD <i>Deputy Director Infectious Diseases, Director HIV Medicine, Monash Health, Adjunct Associate Professor, Monash University, Melbourne, Australia</i>	16:50 – 17:30 Updates on STI screening and management <i>(include 10 mins Q&A)</i> Dr. King-Man HO <i>Specialist in Dermatology and Venereology</i>
14:40 – 15:40 Making a difference for the future of PLHIV <i>(include 15 mins Q&A)</i> Dr. Christine KATLAMA <i>Prof. of Infectious Disease, Head of the HIV Clinical Research Unit, Dept. of Infectious Disease Hospital Pitié-Salpêtrière, France</i>	

In the first session of the meeting, Dr. Ian Woolley from Australia delivered a talk on the measures to expand HIV testing in order to achieve early diagnosis. This was followed by Prof. Christine Katlama who shared the experience of drug-reduced strategies in the HIV management in France.



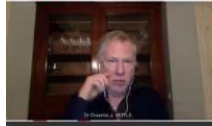
Dr. Ian Woolley



Prof. Christine Katlama



In the second part of the meeting, Dr. Graeme J. Moyle from United Kingdom gave a lecture on the hot topic of weight changes in PLHIV and discussed comprehensively the various factors associated with weight gain in the population.



Weight Change during HIV Treatment

Dr. Graeme J. Moyle

Finally, our local expert, Dr. Ho King Man updated us on STI screening and management.



Dr. Ho King Man

Live Webinar on “The Game Changer of HIV management” (Oct 2020)

In this scientific webinar co-organized by The Hong Kong Society for Infectious diseases (HKSID) and HKSHM, Dr. Vicente Estrada discussed the differences of darunavir among other protease inhibitors and the use of boosted darunavir containing single tablet regimen (STR), the first STR in the class of protease inhibitors, to manage HIV infection in various difficult scenarios.



Dr. Vicente Estrada

香港愛滋病醫學會 HONG KONG SOCIETY FOR HIV MEDICINE

香港感染及傳染病醫學會 HONG KONG SOCIETY OF INFECTIOUS DISEASES

INVITATION FOR SCIENTIFIC WEBINAR ON

THE GAME CHANGER OF HIV MANAGEMENT

OCTOBER 15, 2020 (THURSDAY)
7:00PM (HK TIME)

LIVE WEBINAR

<p>SPEAKER</p> <p>DR VICENTE ESTRADA</p> <p>Associate Professor of Medicine, Universidad Complutense de Madrid</p> <p>Head of HIV/Infectious Diseases Section, Hospital Clinico San Carlos</p>	<p>MODERATOR</p> <p>DR TSZ-SHAN KWONG</p> <p>Associate Consultant of HIV Clinical Service, Department of Medicine, Queen Elizabeth Hospital</p>	<p>PROGRAMME</p> <p>6:45PM Online login</p> <p>7:00PM Introduction & Lecture</p> <p>7:45PM Discussion & Closing</p>
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Upcoming HIV conferences...

- **18th European AIDS Conference**, 27-30 October 2021 | Online & London, United Kingdom
- **29th Conference on Retroviruses and Opportunistic Infections (CROI 2022)**, 12-16 February 2022 | Denver, USA
- **24th International AIDS Conference (AIDS 2022)**, 29 July - 2 August 2022 | Montreal, Canada



Action

U=U campaign

The Society has been launching a series of activities to promote the concept of U=U (Undetectable = Untransmittable)

「測不到 = 傳不到」. The background and basic knowledge of U=U were posted on the Facebook page of the Society.



An Instagram filter using the U=U glasses was also introduced and tried by many micro-influencers to share the idea of U=U. Booklets designed to disseminate the concept and importance of U=U in PLHIV are now under preparation and the electronic version will soon be available in the designated U=U campaign page of our website.

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U=U 運動背景

於2016年發起的U = U (Undetectable = Untransmittable) 「測不到=傳不到」運動，希望可以提高人們對使用藥物抑制製病毒與預防病毒傳播之間關係的認識。該運動有三個主要目標：

- 減少對愛滋病毒感染者污名化和歧視
- 減輕對接受愛滋病抗體測試有關的恐懼
- 增加感染者參與並持續使用雞尾酒療法的決心

U = U是一個簡單而有力的口號，目前已被全球102個國家、接近1,000個相關組織共享。

馬上試用

為什麼測不到便會傳不到

早前解說了什麼是「測不到=傳不到」(U=U)，但怎樣算是測不到呢？

原來愛滋病毒感染的測試包括抗體（用作確診）、CD4數值（用作評估免疫力）及病毒載量（用作監察治療效果）。當一個人感染愛滋病毒並接受有效治療時，它會降低血液中的病毒水平（病毒載量）。當水平低於可量度水平時，這就被稱為不可檢測的病毒載量，在醫學上也被稱為病毒抑制。香港大多數診所報告，如果病毒載量低於20-50 copies/ml，就無法檢測到病毒載量。

愛滋病測試

如果您對HIV呈陰性，可以採取措施助您繼續免受病毒感染。

如果您的HIV測試呈陽性，早期診斷和治療成效會更大。當您持續接受有效治療後，您不會將HIV傳染給伴侶。

哪裡可以進行HIV抗體測試？

除了私家或公立醫院和診所，您還可以進入以下連結了解在香港提供HIV抗體測試服務的機構：

<https://www.aids.gov.hk/english/hotline/main.html>
https://www.21171069.gov.hk/en/get_hiv_tested/services.html

有關同性或異性戀者數據

現今科學證明，如果愛滋病毒感染者保持持續檢測不到的病毒(測不到),即實際上沒有將愛滋病毒傳播給性伴侶的風險(傳不到),在2016發表的PARTNER1研究,對548對異性戀和340對男同志伴侶進行了為期三年的調查。愛滋病呈陽性伴侶必須接受高效藥物治療(俗稱雞尾酒療法)而且病毒載量須為無法檢測,另一個伴侶則必須為愛滋病呈陰性。經過超過58,000次的無保護的性行為後,愛滋病的傳播個案為零。



Recommendation on COVID-19 Vaccination in People Living with HIV

While there is no doubt that vaccination is a key strategy to control the COVID-19 pandemic, PLHIV may still have many questions about COVID-19 vaccination. Thus, HKSID and HKSHM have jointly issued a recommendation on COVID-19 vaccination in PLHIV.

English version:



COVID-19 Vaccination in People Living with HIV

People living with HIV (PLHIV) appear to be at increased risk for severe outcomes with COVID-19 compared with people without HIV. PLHIV with stable diseases have been included in the COVID-19 vaccine clinical trials but safety and efficacy data specific to PLHIV is yet to be available. Nonetheless, based on the safety profiles to date and the nature of the vaccines (non-live vaccines), there is no reason for additional concern at present. Given the potential benefits of COVID-19 vaccines outweigh the potential risks, it is recommended PLHIV, unless with contraindications, to receive COVID-19 vaccination for personal protection. PLHIV shall always discuss with his/her HIV physicians for advice whenever needed.

1. Should PLHIV receive COVID-19 vaccines?

Unless with contraindications, PLHIV, regardless of their CD4 count, are **recommended** to receive COVID-19 vaccination for personal protection from COVID-19 infection as the potential benefits outweigh the potential risks.

It is possible that the level of protection from COVID-19 vaccines will vary among PLHIV. It is advised that infection control practice in the COVID-19 pandemic such as wearing masks, hand hygiene, social distancing shall continue with COVID-19 vaccination at the moment.

2. Are COVID-19 vaccines safe for PLHIV?

The COVID-19 vaccines¹ currently provided by the Government's vaccination programme do not contain live or attenuated SARS-CoV-2 viruses thus cannot cause COVID-19. There is currently no evidence for more side effects in PLHIV. PLHIV should take into consideration factors including contraindications, such as allergic history and comorbidities, efficacy, personal choice etc. when opt for vaccination.

¹ For more information about the COVID-19 vaccines, please refer to the designated website of the COVID-19 Vaccination Programme at <https://www.covidvaccine.gov.hk/en/vaccine>.



If PLHIV have other co-existing medical conditions that are not under control, they shall discuss with their doctors first if deferral of vaccination is necessary.

3. Will COVID-19 vaccines affect antiretroviral therapy?

There is no known interaction between antiretroviral therapy and the COVID-19 vaccines so far. Thus antiretroviral therapy should be continued without interruption during the course of vaccination.

**By The Hong Kong Society for Infectious Diseases and Hong Kong Society for HIV Medicine
March 2021**

References:

1. US Department of Health and Human Services. Interim Guidance for COVID-19 and Persons with HIV. Accessed on 16 March 2021. Available at <https://clinicalinfo.hiv.gov/en/guidelines/covid-19-and-persons-hiv-interimguidance/interim-guidance-covid-19-and-persons-hiv>.
2. US Centers for Disease Control and Prevention. The Advisory Committee on Immunization Practices' Interim Recommendation for Use of Pfizer-BioNTech COVID- 19 Vaccine — United States, December 2020. Accessed on 16 March 2021. Available at <https://www.cdc.gov/mmwr/volumes/69/wr/mm6950e2.htm>.
3. HIV Medicine Association. COVID-19 Vaccines and People with HIV Frequently Asked Questions. Accessed on 16 March 2021. Available at <https://www.idsociety.org/globalassets/idsa/public-health/covid-19/covid-19-vaccineshiv-faq.pdf>.
4. British HIV Association. SARS-CoV-2 vaccine advice for adults living with HIV: British HIV Association (BHIV) & Terrence Higgins Trust (THT) guidance. Accessed on 16 March 2021. Available at <https://www.bhiva.org/SARS-CoV-2-vaccine-advice-foradults-living-with-HIV-plain-english-version-update>.
5. The Joint United Nations Programme on HIV/AIDS (UNAIDS). COVID-19 vaccines and HIV. Accessed on 16 March 2021. Available at https://www.unaids.org/sites/default/files/media_asset/covid19-vaccines-and-hiv_en.pdf.

**More information on COVID-19 vaccines and
vaccination booking:
<https://www.covidvaccine.gov.hk/en/>**



Chinese version:**愛滋病病毒感染者接種 2019 冠狀病毒病疫苗（新冠疫苗）事宜**

愛滋病病毒感染者如患上 2019 冠狀病毒病（COVID-19），有較高機會引致嚴重併發症。雖然還未有關於愛滋病病毒感染者參與新冠疫苗臨床測試的詳細數據，但由於現時可供使用的新冠疫苗皆為「非活疫苗」（non-live vaccine），加上現有關於疫苗的安全數據，因此病人對接種疫苗毋需有太大顧慮。由於接種疫苗預計的益處大於風險，除非有醫學上的禁忌症，學會建議愛滋病病毒感染者接種新冠疫苗以預防感染。接種疫苗前，病人亦可向主診醫生查詢。

1. 愛滋病病毒感染者應否接種新冠疫苗？

由於接種疫苗預計的益處大於風險，除非有醫學上的禁忌症，學會建議愛滋病病毒感染者不論 CD4 白血球的數值多少，均可接種新冠疫苗預防感染。由於疫苗在愛滋病病毒感染者身上產生的效能因人而異，因此接種疫苗後，仍需繼續維持各項感染控制措施，例如佩戴外科口罩、勤洗手、以及保持社交距離等。

2. 新冠疫苗對於愛滋病病毒感染者是否安全？

現時由本地疫苗接種計劃提供的疫苗，其成份由於並非使用存活的新型冠狀病毒，故此接種疫苗不會使人感染 COVID-19。此外，現時未有數據顯示愛滋病病毒感染者於接種疫苗後會產生更多副作用。

病人如有其他慢性疾病、藥物敏感等疑問，可先向主診醫生查詢是否適合或需要延遲接種疫苗。

3. 新冠疫苗會否影響抗愛滋病藥物治療？

疫苗跟抗愛滋病病毒藥物並沒有藥物交互作用（drug-drug interaction）。因此，愛滋病病毒感染者應在接種疫苗前後繼續服用藥物。

更多關於 2019 冠狀病毒病疫苗和預約接種資料：

<https://www.covidvaccine.gov.hk/zh-HK/>





香港愛滋病醫學會

HONG KONG SOCIETY FOR HIV MEDICINE

Membership registration form

Personal details

Prof/Dr/Mr/Mrs/Miss/Ms Surname: _____ First name: _____

Present appointment: _____

Institution: _____

Postal address: _____

Email address: _____@_____ Phone number: _____

Relevant HIV experience or work: _____

Membership category

Ordinary member: HKD200 per year or HKD2000 life membership

Eligibility: Medical practitioners who practices or are interested in HIV medicine.

Privilege: entitlement to vote, to hold office and to take part in all Society functions.

Associate member: HKD150 per year (no life membership)

Eligibility: Healthcare professionals other than doctors including nurses, pharmacists, medical laboratory technologists, occupational therapists, physiotherapists, clinical psychologists, dietitians who are involved or are interested in HIV medicine.

Privilege: entitlement to take part in all Society functions.

Affiliate member: no fees required

Eligibility: Non-healthcare professionals who are interested in HIV medicine

Privilege: receive news and updates from the Society, and participation in selected activities as decided by the council of the Society

Application proposed by HKSHM member: Name _____ Signature _____

Application seconded by HKSHM member: Name _____ Signature _____

Comments and suggestions

What do you expect from the Society (e.g. benefits, meetings, courses, education fund)?

Any other comments or suggestions for us to work on?

Date: _____

Data protection: Personal data provided by you will be used by the Hong Kong Society for HIV Medicine (HKSHM) only for the purposes of handling your application and activities related to HKSHM. Personal data in the application form, or copies of which, will be disclosed or transferred to parties relevant and necessary for the purposes as stated above only.

