## The cascade of care: how to make predictions for the early steps?

Ard van Sighem

Ülkemizde HIV Epidemiyolojisinin Güncel Durumu ve Önleme Stratejileri KLİMİK Derneği HIV/AIDS Çalişma Grubu

Istanbul, 14 October 2017



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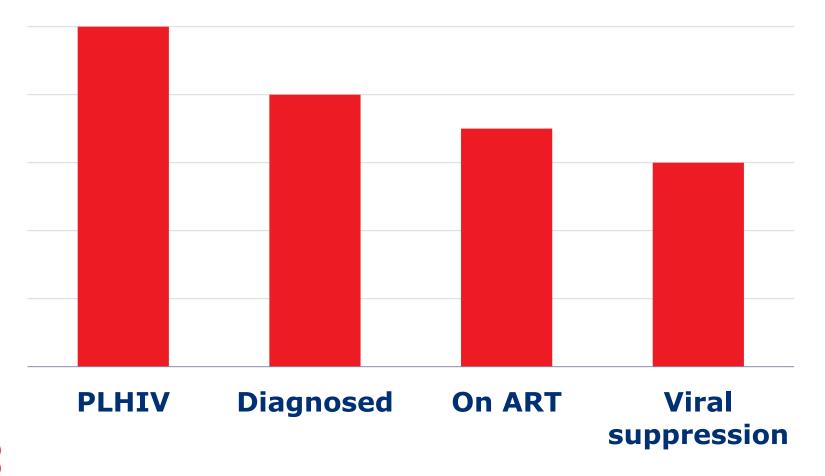


### **Outline**

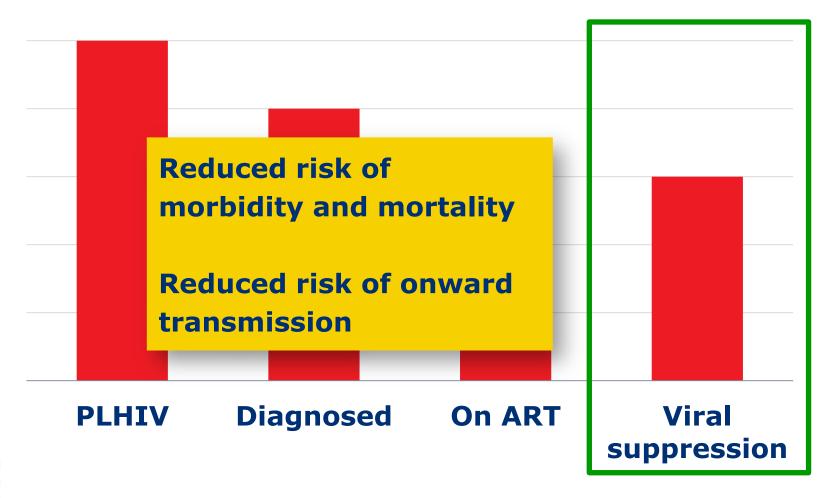
- Continuum of HIV care
- Estimating the number of people living with HIV



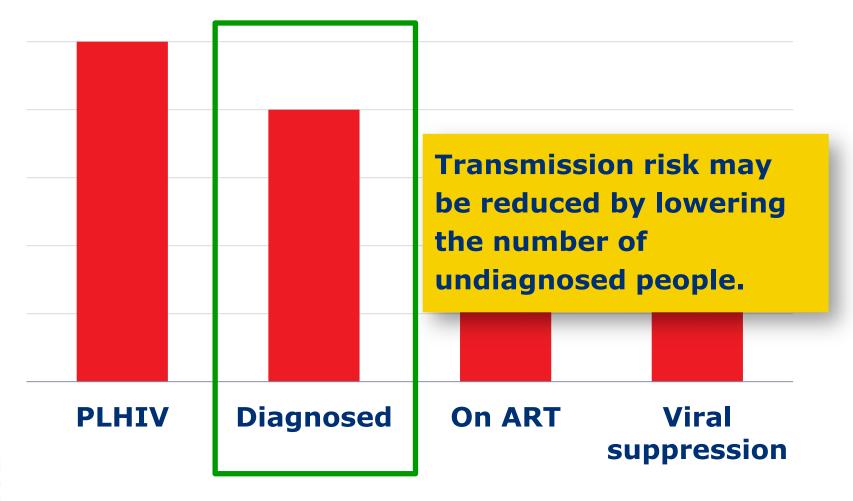








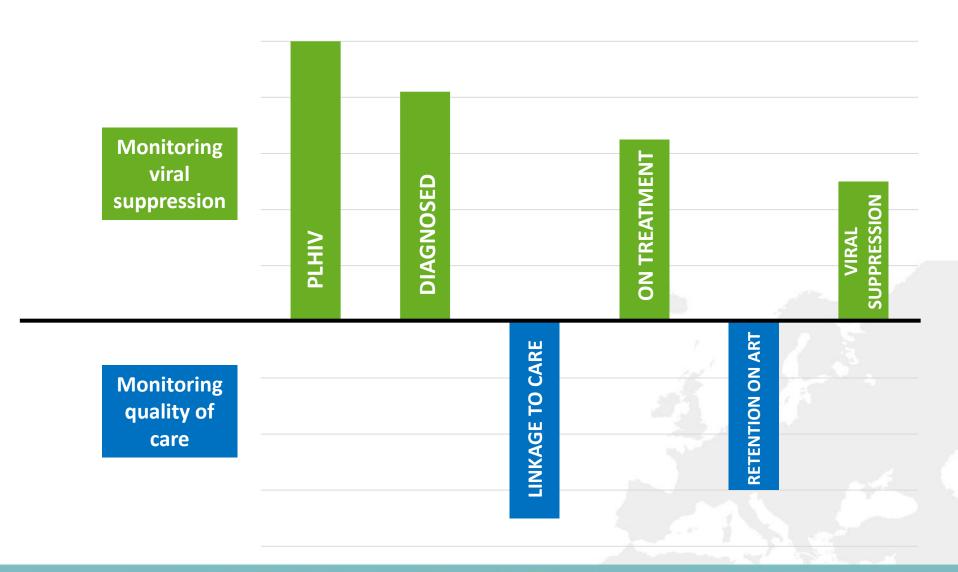






## Monitoring a 4-point continuum





### **UNAIDS 90-90-90 targets**

**Target 1** 

**Target 2** 

Target 3

**Target 4** 

90%

of all



living with HIV

**DIAGNOSED** 

90%

of all



diagnosed with HIV

**ON ART** 

90%

of all



on ART

VIRALLY SUPPRESSED 73%

of all people living with HIV

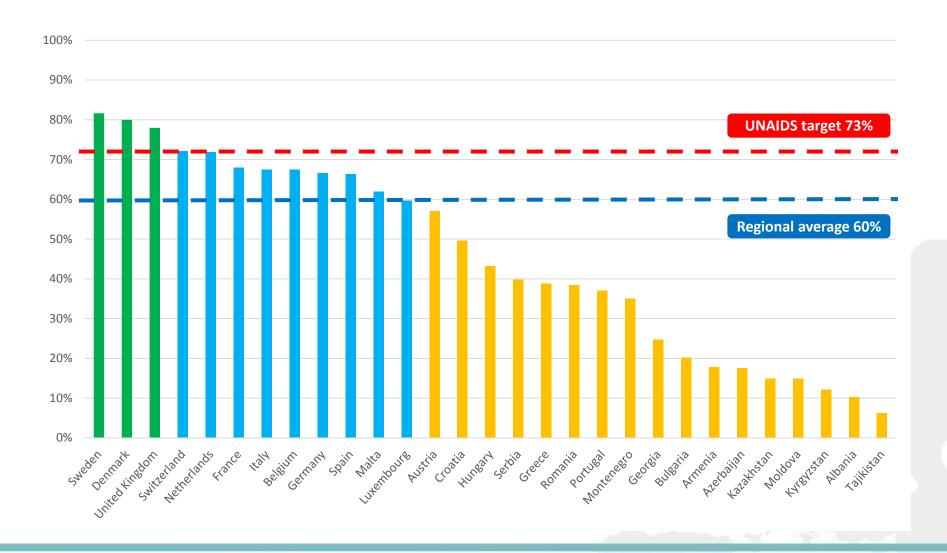
VIRALLY SUPPRESSED



## **Progress toward achieving the 90-90-90:**

Target 4: 73% of all PLHIV virally suppressed (n=29/55)

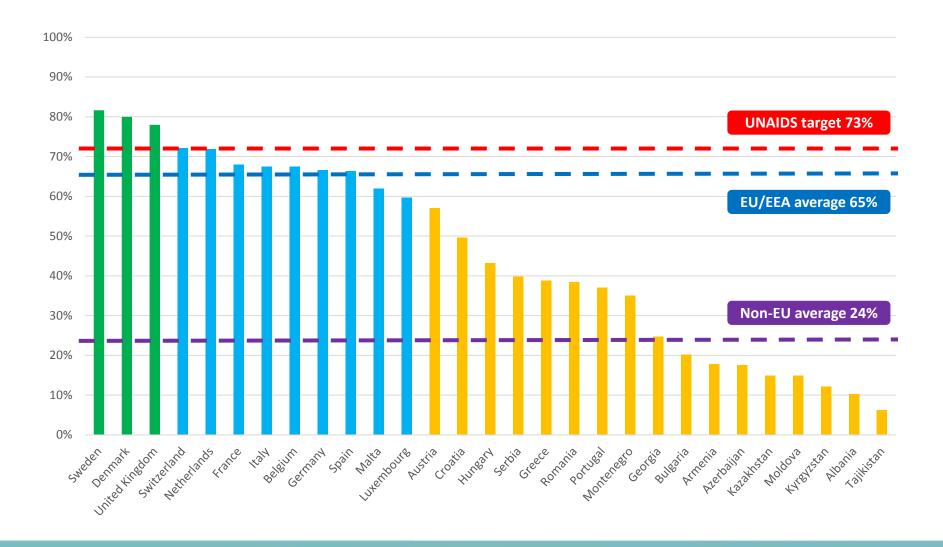




## **Progress toward achieving the 90-90-90:**

Target 4: 73% of all PLHIV virally suppressed (n=29/55)





## How close is Europe to reaching the 90-90-90 targets?

Target 1 Target 2 Target 3 Target 4 73% of all of all of all **\*** \* \* \* \* \* **\*** \* \* \* \* \* **\*** \* \* \* \* \* \* of all people living with HIV on ART living with HIV diagnosed with HIV VIRALLY VIRALLY SUPPRESSED DIAGNOSED **ON ART** SUPPRESSED 60% 88% 77% **75% OF ALL PLHIV VIRALLY** 

**SUPPRESSED** 

**ARE VIRALLY** 

**SUPPRESSED** 

**ON ART** 

**DIAGNOSED** 

#### **Towards standardised definitions...**

- Limited consistency in methods and definitions used to construct the stages in the HIV care continuum.
- Difficult to compare and combine results across countries.

## Towards standardized definitions for monitoring the continuum of HIV care in Europe

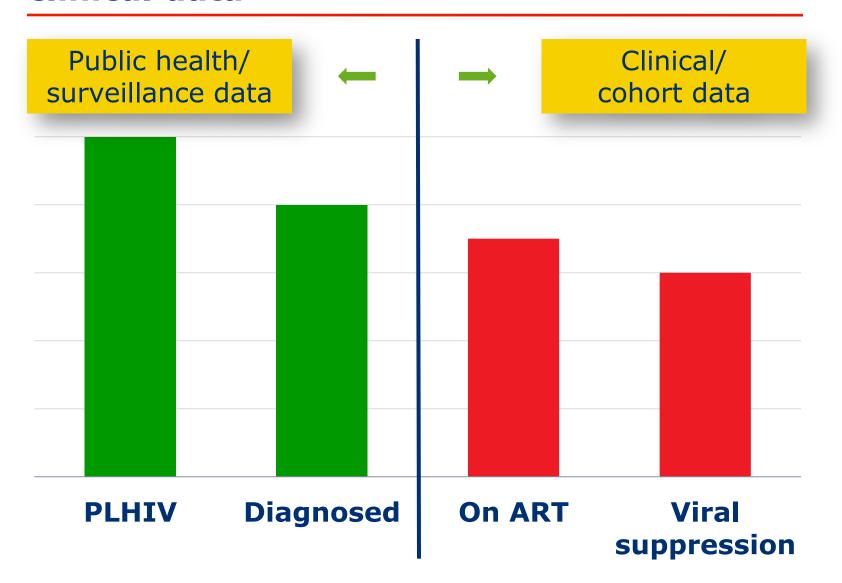
Annabelle J. Gourlay<sup>a</sup>, Anastasia M. Pharris<sup>b</sup>, Teymur Noori<sup>b</sup>, Virginie Supervie<sup>c</sup>, Magdalena Rosinska<sup>d</sup>, Ard van Sighem<sup>e</sup>, Giota Touloumi<sup>f</sup> and Kholoud Porter<sup>a</sup>

AIDS 2017, 31:2053-2058

Keywords: continuity of patient care, epidemiologic measurements, epidemiological monitoring, Europe, HIV infections, public health surveillance, sustained virologic response



## **Bringing together HIV surveillance and clinical data**





## EuroCoord/ECDC collaboration on estimating the continuum of care

- ECDC project with UCL & EuroCoord on estimating the continuum of care using <u>surveillance</u> and <u>cohort</u> data
- Using standard definitions and high quality data sources

#### The HIV continuum of care in European Union countries in 2013: data and challenges

Annabelle Gourlay<sup>1</sup>, Teymur Noori<sup>2</sup>, Anastasia Pharris<sup>2</sup>, Maria Axelsson<sup>3</sup>, Dominique Costagliola<sup>4</sup>, Susan Cowan<sup>5</sup>, Sara Croxford<sup>6</sup>, Antonella d'Arminio Monforte<sup>7</sup>, Julia del Amo<sup>8</sup>, Valerie Delpech<sup>6</sup>, Asunción Díaz<sup>8</sup>, Enrico Girardi<sup>9</sup>, Barbara Gunsenheimer-Bartmeyer<sup>10</sup>, Victoria Hernando<sup>8</sup>, Sophie Jose<sup>1</sup>, Gisela Leierer<sup>11</sup>, Georgios Nikolopoulos<sup>12,13</sup>, Niels Obel<sup>14</sup>, Eline Op de Coul<sup>15</sup>, Dimitra Paraskeva<sup>13</sup>, Peter Reiss<sup>16,17</sup>, Caroline Sabin<sup>1</sup>, André Sasse<sup>18</sup>, Daniela Schmid<sup>19</sup>, Anders Sonnerborg<sup>20</sup>, Alexander Spina<sup>19</sup>, Barbara Suligoi<sup>21</sup>, Virginie Supervie<sup>4</sup>, Giota Touloumi<sup>22</sup>, Dominique Van Beckhoven<sup>18</sup>, Ard van Sighem<sup>16</sup>, Georgia Vourli<sup>22</sup>, Robert Zangerle<sup>11</sup>, Kholoud Porter<sup>1</sup> and the European HIV continuum of care working group

1 University College London, London, UK; 2 European Centre for Disease Prevention and Control, Solna, Sweden; 3 Public Health Agency of Sweden, Solna, Sweden; 4 Sorbonne Universites, UPMC Univ Paris 06, INSERM, Institut Pierre Louis d'Epidemiologie et de Sante Publique (IPLESP UMR\_S 1136), Paris, France; 5 Statens Serum Institut, Copenhagen, Denmark; 6 Public Health England, London, UK; 7 ASST Santi Paolo e Carlo University Hospital, Milan, Italy; 8 Centro Nacional de Epidemiologia, Instituto de Salud Carlos III, Madrid, Spain; 9 Istituto Nazionale Malattie Infettive 'L. Spallanzani, Roma, Italy; 10 Robert Koch Institute, Berlin, Germany; 11 Medical University Innsbruck, Austria; 12 Medical School, University of Cyprus, Nicosia, Cyprus; 13 Hellenic Center for Disease Control and Prevention, Amarousio, Greece; 14 Rigshospitalet, Copenhagen University, Copenhagen, Denmark; 15 National Institute for Public Health and the Environment, Bilthoven, Netherlands; 16 Stichting HIV Monitoring, Amsterdam, Netherlands; 17 Academic Medical Center, Amsterdam, Netherlands; 18 Scientific Institute of Public Health, Brussels, Belgium; 19 Austrian Agency for Health and Food Safety, Vienna, Austria; 20 Karolinska Institutet and Karolinska University Hospital, Stockholm, Sweden; 21 National AIDS Unit, Istituto Superiore di Sanita, Rome, Italy; 22 Medical School, National and Kapodistrian University of Athens, Greece.

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Number of words: abstract (250), manuscript (3071)

Tables (3), Figures (1), Supplementary file (1)

Key words: HIV infection; continuum of care; surveillance; cohort analysis; antiretroviral therapy

40 word summary: Definitions for a four-stage continuum of HIV care were standardised and applied to HIV surveillance and national cohort data in 11 European Union countries. These countries are nearing the UNAIDS 90-90-90 target, although reducing the proportion undiagnosed remains challenging.

# Surveillance and cohort leads in participating countries

Country	Surveillance leads	Cohort leads
Austria	Daniela Schmid	Robert Zangerle
Belgium	Andre Sasse/Dominique Van Beckhoven	Andre Sasse/Dominique Van Beckhoven
Denmark	Susan Cowan	Niels Obel
France	Florence Lot/Francoise Cazein	Dominique Costagliola/Virginie Supervie
Germany	Barbara Bartmeyer	Barbara Bartmeyer
Greece	Georgios Nikolopoulos	Giota Touloumi
Italy	Barbara Suligoi	Antonella d' Arminio Monforte/Enrico Girardi
Netherlands	Eline Op de Coul	Peter Reiss/Ard van Sighem
Spain	Mercedes Diez/Asuncion Diaz	Julia Del Amo/Vicky Hernando
Sweden	Maria Axelsson	Anders Sönnerborg
<b>United Kingdom</b>	Valerie Delpech	Caroline Sabin

# Surveillance and cohort leads in participating countries

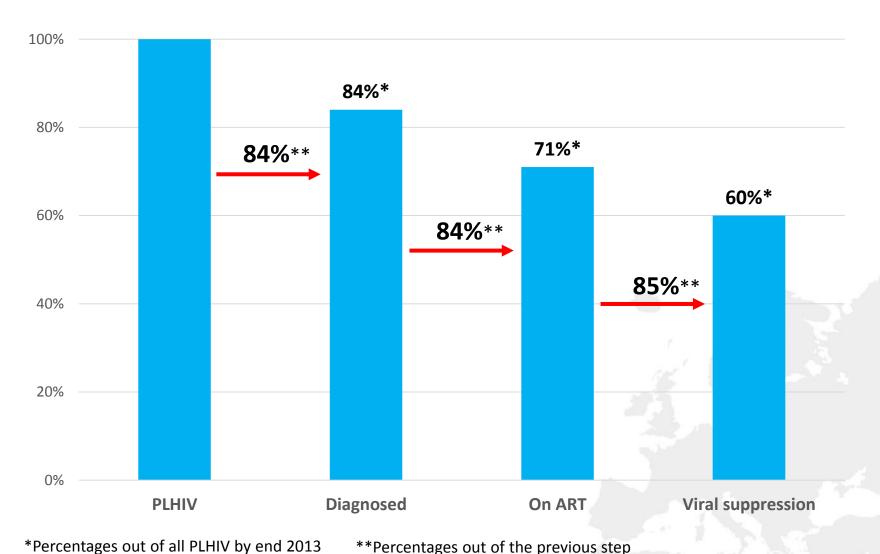
Country	Surveillance leads	Cohort leads
Austria	Daniela Schmid	Robert Zangerle
Belgium	Andre Sasse/Dominique Van Beckhoven	Andre Sasse/Dominique Van Beckhoven

- These 11 countries have a combined population of 378.6 million (74% of the EU population)
- The estimated number PLHIV in these 11 countries is 670 000 (≈80% of all PLHIV in the EU/EEA)

United Kinadom	Valorio Dolpoch	Carolina Sahin
United Kingdom	Valerie Delpech	Caroline Sabin

# HIV continuum using standardised definitions and surveillance/cohort data





Gourlay A, Noori T, Pharris A *et al.* The HIV Continuum of Care in European Union Countries in 2013: Data and Challenges. *Clin Infect Dis* 2017; 64(12):1644-56.

## **Estimating the number of people living** with HIV



## Key information for public health monitoring and planning

#### **Burden of HIV:**

- How many people are living with HIV?
- What is the corresponding need for treatment?
- How many are unaware of their infection?

#### **Current trends:**

- How many people newly acquire HIV each year?
- What is the time between infection and diagnosis?

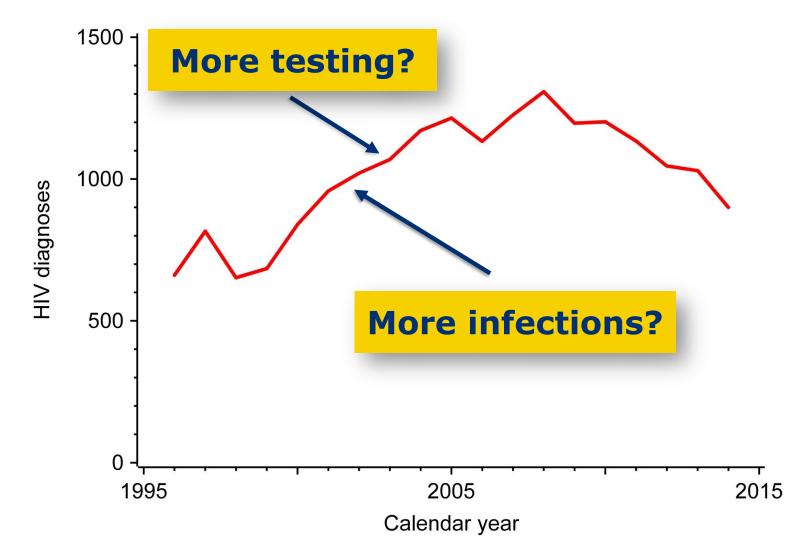


### **Challenges in concentrated epidemics**

- Estimation methods based on HIV prevalence surveys are less useful in Europe where data are often lacking.
- However, many countries have strong surveillance systems for HIV and AIDS diagnoses:
  - HIV diagnosis is only a proxy for HIV infection.
    - Infection with HIV does not always lead to sufficiently specific symptoms at the time of infection.
    - As a result, diagnosis of HIV is not always close to the time of infection.
  - No direct information on the undiagnosed population.
  - Changes over time in annual number of diagnoses do not necessarily reflect changes in number of infections.



### Challenges in concentrated epidemics





### **ECDC HIV Modelling Tool**

- New tools for HIV estimates are available that use data on HIV and AIDS diagnoses:
  - CSAVR in Spectrum
  - ECDC HIV Modelling Tool
- ECDC HIV Modelling Tool estimates\*:
  - annual number of newly acquired HIV infections
  - time between infection and diagnosis
  - size of undiagnosed population, stratified by CD4 cell count
- Only need routinely collected data on HIV and AIDS, annually reported by many countries to The European Surveillance System (TESSy).



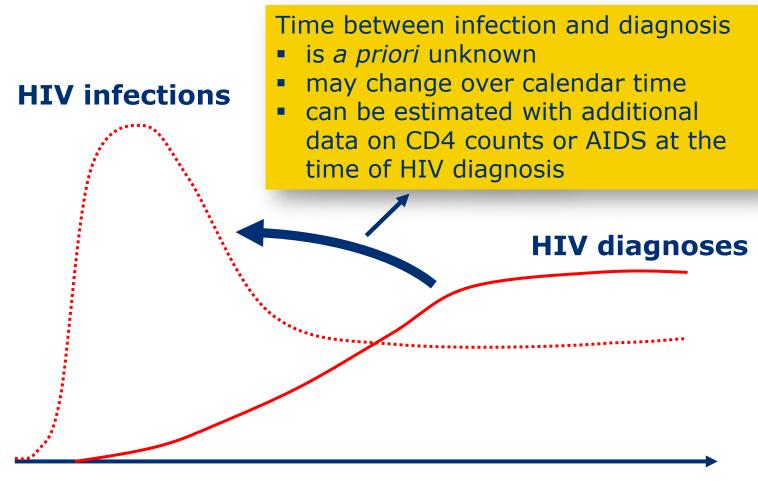
### **Back-calculation**





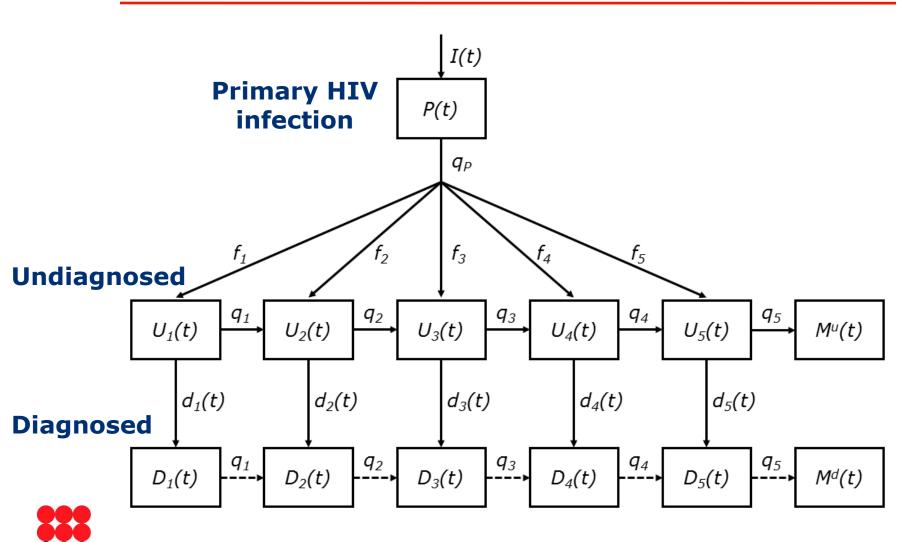
**Calendar year** 

#### **Back-calculation**

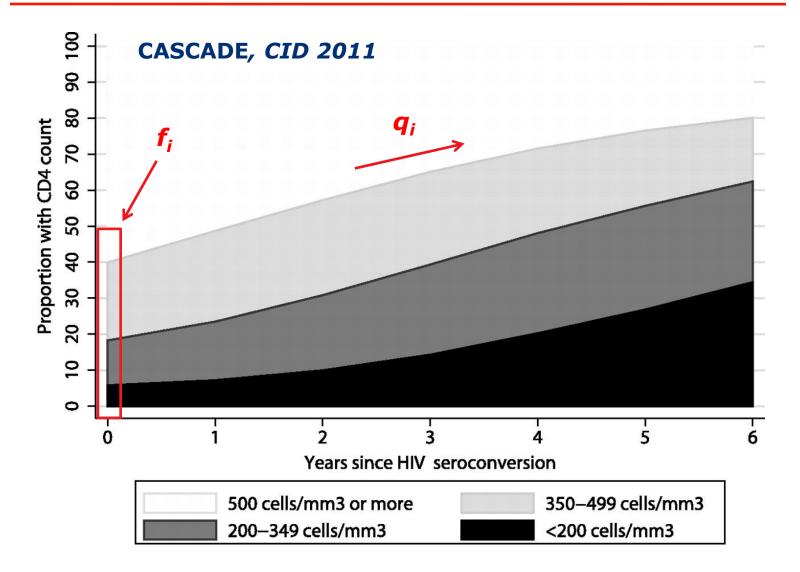




## **Incidence Method – underlying model**

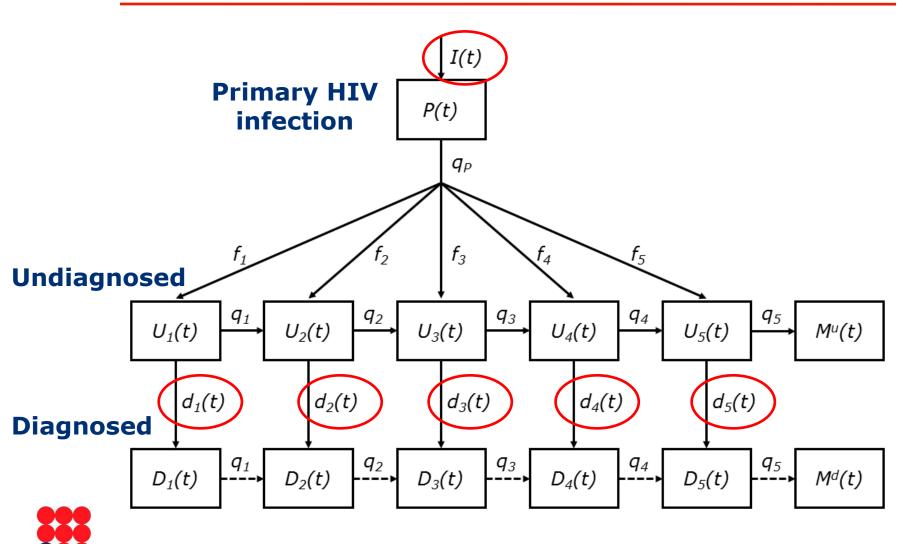


## Disease progression $(q_i \text{ and } f_i)$





## **Incidence Method – underlying model**



## **Data requirements**

Data item	Remark
HIV diagnoses	assume complete
- HIV/AIDS	assume complete
- CD4 count in people without AIDS	optional; assume unbiased sample
AIDS diagnoses, total	before 1996
Key populations	optional
All-cause mortality	optional; used to determine number living with HIV



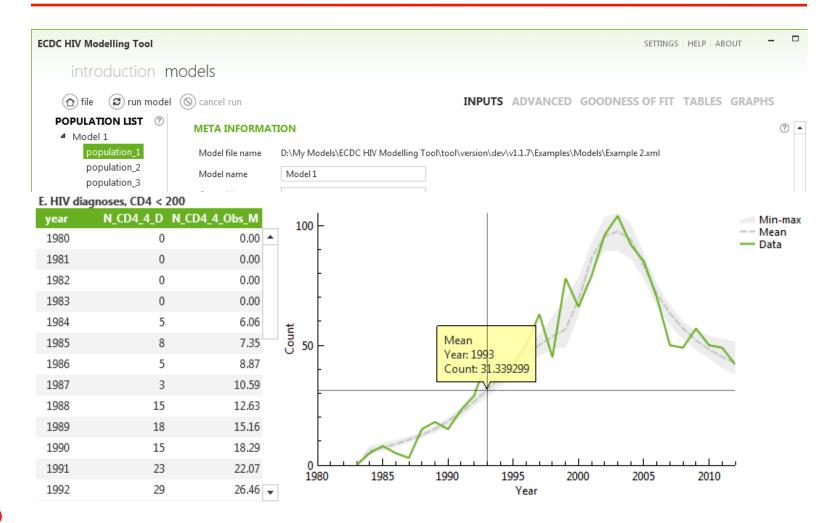
Data items need to cover the entire HIV epidemic

#### **Data structure**

year	pop_1	pop_2	pop_3	pop_4
1984	34	11	2	7
1985	24	8	2	9
1986	22	6	7	18
1987	18	3	17	12
2011	57	1	128	140
2012	55	1	137	151



### **ECDC HIV Modelling Tool**





### **ECDC HIV Modelling Tool**

#### **Advisory Team**

Fumiyo Nakagawa Daniela De Angelis Matthias Egger Frank de Wolf Christophe Fraser Andrew Phillips

ecdc.europa.eu/en/publications-data/hiv-modelling-tool

#### **Tool developer**

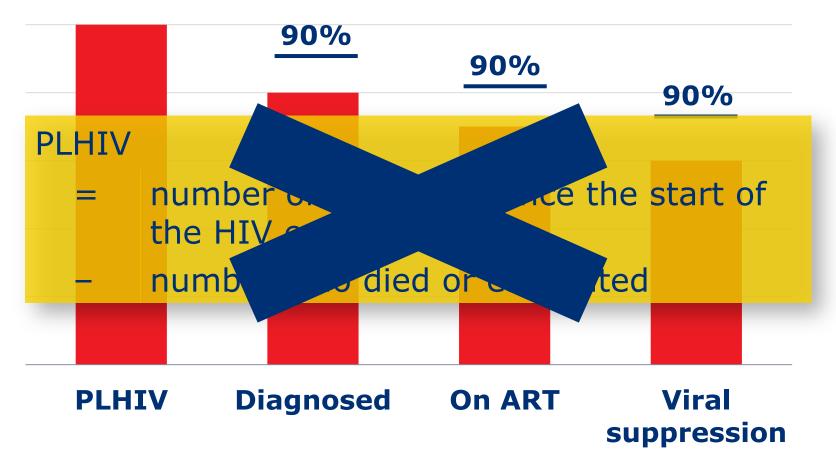
Daniel Lewandowski

#### **ECDC Team**

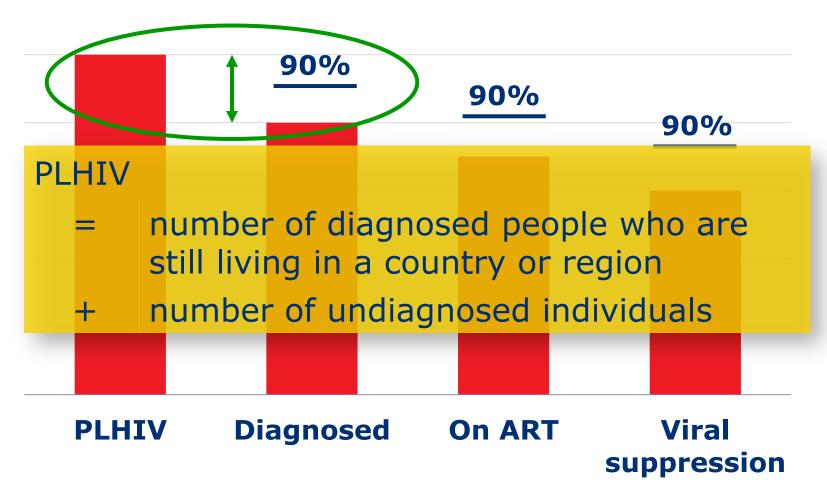
Chantal Quinten
Anastasia Pharris
Andrew Amato-Gauci





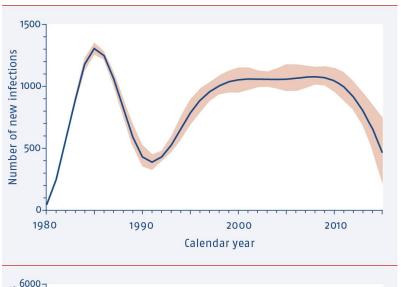




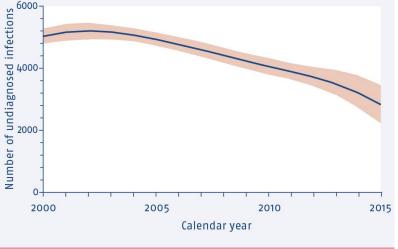




## **People living with HIV – the Netherlands**



**HIV** infections



**Undiagnosed** 



ATHENA 2016

## **People living with HIV – the Netherlands**

22 900 PLHIV in 2015

20 083 people diagnosed (and linked to care)

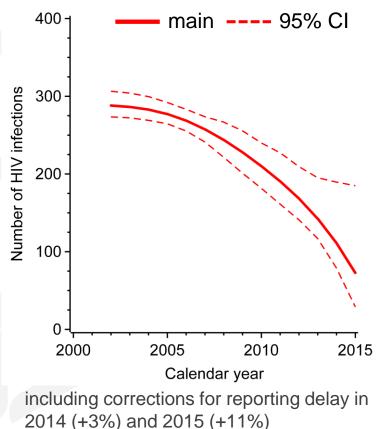
2 800 people with undiagnosed HIV





## **PLHIV - Amsterdam**

#### Newly acquired HIV infections



 70 (95% CI, 30 – 180) new HIV infections in 2015.

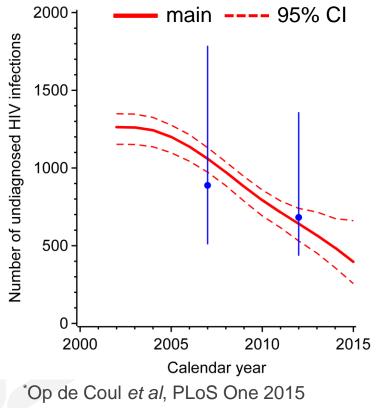
Average time from infection to diagnosis:
2.9 (2.3 – 3.7) years.

HIV Transmissie Eliminatie AMsterdam HIV Transmission Elimination AMsterdam



## **PLHIV - Amsterdam**

### Undiagnosed HIV infections



- 400 (95% CI, 260 660)
   people living with HIV
   were still undiagnosed
   by the end of 2015.
- Consistent with earlier estimates\*.
- 6150 PLHIV in 2015.

HIV Transmissie Eliminatie AMsterdam HIV Transmission Elimination AMsterdam

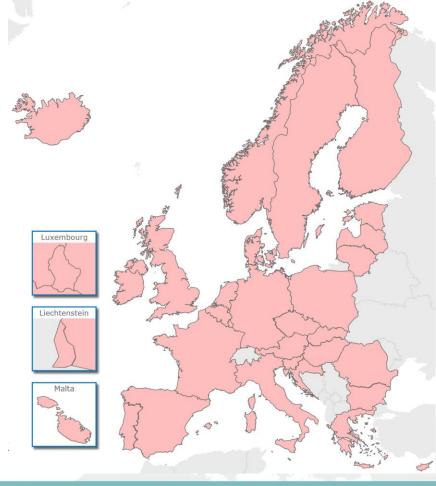
## People living with HIV – EU/EEA



 Each year, ca. 30 000 people are newly diagnosed with HIV in the European Union/European Economic Area (EU/EEA).

 122 000 people living with HIV (PLHIV) estimated to be undiagnosed in 2015, or 15% of all PLHIV<sup>1</sup>.

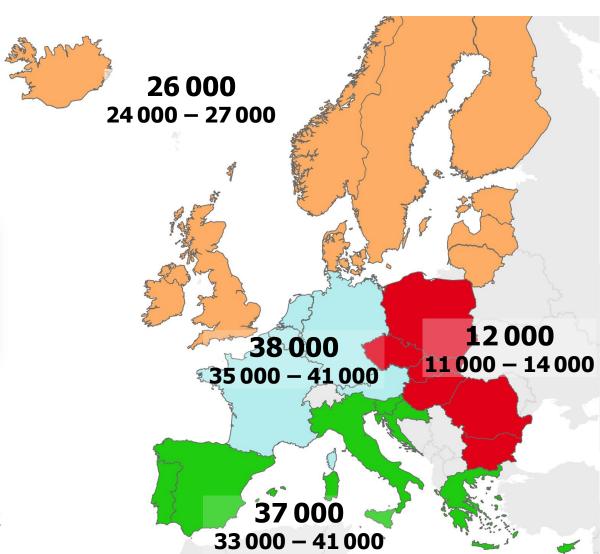
 Aim: estimate number undiagnosed by sub-region and stratified by CD4 cell count.



## People living with undiagnosed HIV 2015



EU/EEA total 120 000 114 000 - 126 000

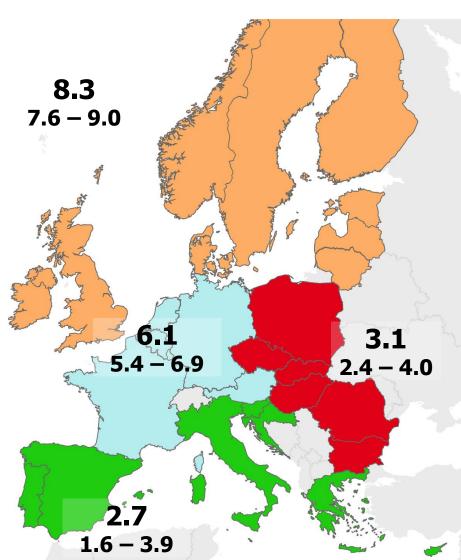


## Infection rate per 100 000 population





5.3 4.9 – 5.9



# Time to diagnosis and CD4 cell distribution in undiagnosed PLHIV

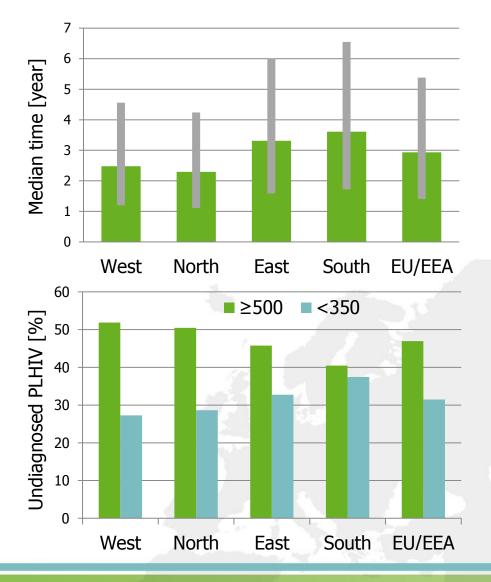


## Time to diagnosis

EU/EEA	
2.9 year	IQR, 1.4 - 5.4

### CD4 distribution

EU/EEA	
≥500	47%
<350	31%



#### **Conclusion**

- ECDC HIV Modelling Tool can be used in the estimation of the first step of the continuum of HIV care:
  - Annual number of newly acquired HIV infections.
  - Undiagnosed population.
  - Total number of people living with HIV.
  - Time to diagnosis.
- Only need routine surveillance data.
- ECDC tool works on local, national, and regional level.
- Annual number of HIV infections can be imported into Spectrum to obtain additional information on the HIV epidemic.





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