HIV Incidence Rate and Predictors Among Gay and other Men who have Sex with Men (MSM) in Vancouver: Additional Benefit of an Administrative Health Data Linkage

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Background

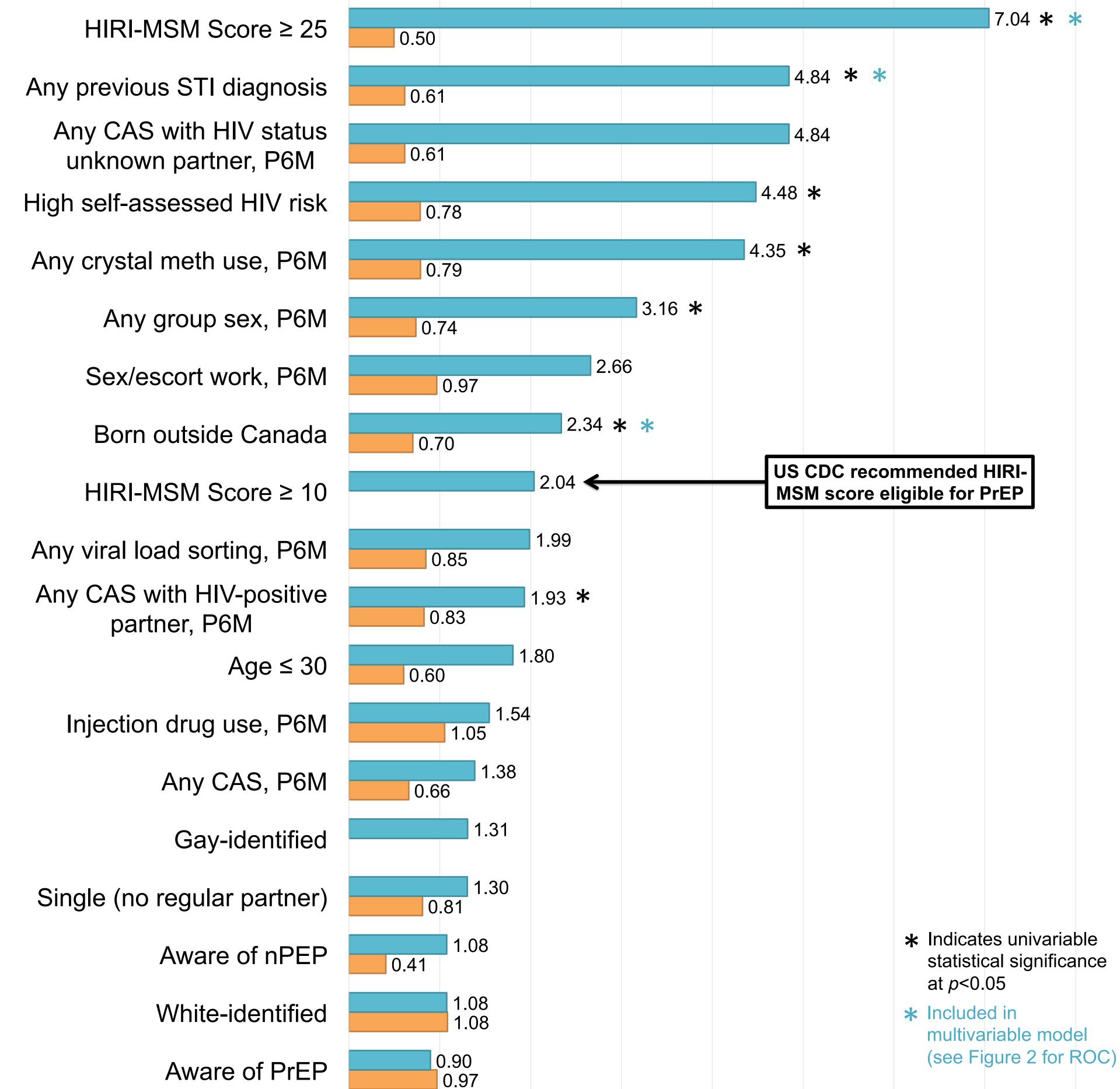
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- In British Columbia, the number of new HIV diagnoses among MSM has remained relatively stable for the past decade (~140-180 / year)
- We calculated HIV incidence rates and identified seroconversion predictors in a cohort study of MSM in Vancouver, British Columbia (BC)

Methods

Study Protocol & Participants:

• The Momentum Health Study is a prospective longitudinal bio-behavioural study MSM aged 16+ in <u>Metro Vancouver</u> recruited using <u>respondent-driven</u> sampling beginning February 2012.



- Participants completed in-person study visits every 6 months, which lasted ~90 minutes and included a computer-assisted self-interview (CASI) on demographics, sexual behaviour, substance use, and psychosocial attributes
- Each study visit includes nurse-administered HIV testing and specimen collection for HCV and syphilis serology.
- Participants also consented to data linkage with the BC Centre for Excellence in HIV/AIDS's databases containing all HIV viral load and treatment data
- Follow-up study visit data and database linkage to <u>August 31st, 2015</u> was used

Outcome:

 Seroconvertors were participants who tested HIV-negative at baseline, and 1) tested HIV-positive at a subsequent study visit, 2) tested HIV-positive at another testing source confirmed at a subsequent visit, or 3) had a detectable viral load or started antiretroviral treatment via the database linkage.

Explanatory Variables:

• Explanatory factors include <u>demographics</u> (age, sexual identity, race/ethnicity, relationship status, country of birth), behavioural risk (condomless anal sex (CAS), injection drug use, crystal methamphetamine use, group sex, sex/

escort work), risk assessments (self-perceived using a single item and the US CDC's HIV Incidence Risk Index for MSM (HIRI-MSM), which ranges from 0-45 with a cutpoint of ≥ 10 used to recommend PrEP), and <u>ARV-related factors</u> (PEP and PrEP awareness, viral load sorting)

Statistical Analysis:

- We calculated HIV incidence rates overall, by age-group, and using HIRI-MSM.
- We examined factors associated with HIV seroconversion using univariable and multivariable Poisson regression (adjusted for follow-up time).

Results

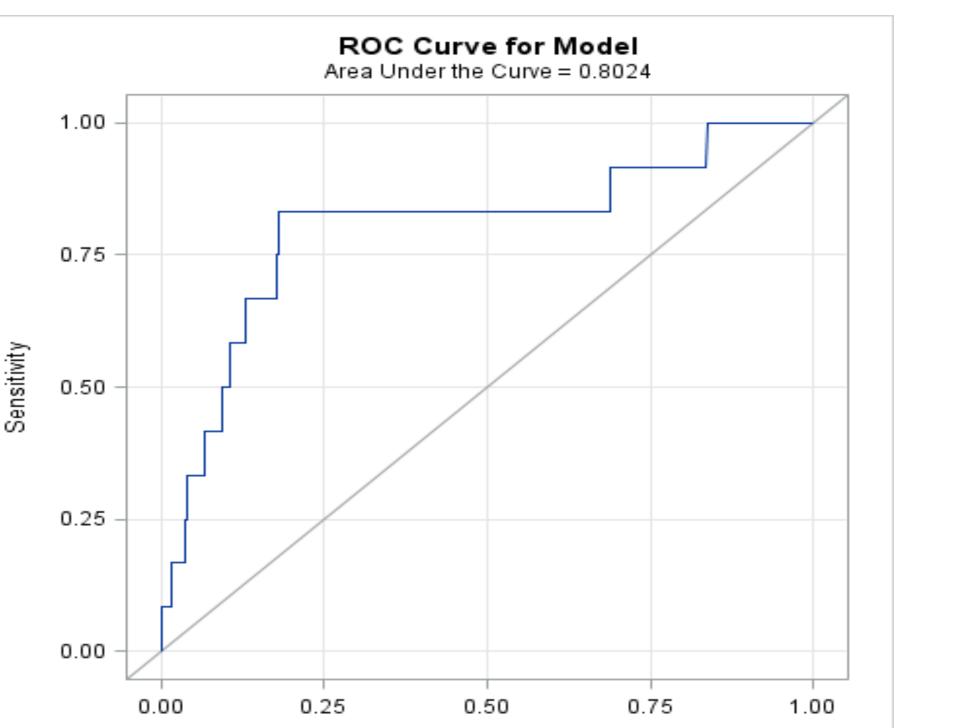
- A total of 497 MSM who tested HIV-negative at enrolment contributed a mean follow-up time of 2.23 years. Of 12 seroconversions recorded, 6 occurred during study follow-up and an additional 6 were identified through data linkage.
- HIV incidence rate was greater with the data linkage at 1.08/100PYs (95%CI: 0.62-1.90) compared with cohort data alone 0.79/100PYs (95%CI:0.35-1.76).
- HIRI-MSM score of ≥ 10 identified all HIV seroconversions for an incidence rate of 2.04/100PYs (95%CI:1.16-3.59); a HIRI-MSM cutpoint of \geq 25 captured 7 of 12 seroconversions for an incidence rate of 7.04/100PYs (95%CI:3.34-14.85).



HIV Incidence Rate / 100 person-years

Factor NOT Present Factor Present

Figure 1. Comparison of HIV incidence rates among MSM



Conclusions

Findings may help target combination HIV prevention towards MSM most likely to acquire HIV. Notably, high self/objective risk scores, prior STIs, and foreign born. Data linkage identified twice as many seroconversions than observational

cohort follow-up alone.

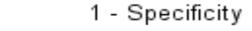
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S, Carey JW. Development of a clinical screening index predictive of incident HIV infection among men Acquir Immune Defic Syndr. 2012;60(4):421-427.

HIV incidence rates for factors of interest are shown in **Figure 1**. The final

multivariable model included three factors (see Figure 1 for *) and it's ROC is

shown in Figure 2, with an area under the curve of 0.8024.







Conflict of Interest Disclosure: "I have no conflicts of interest"

