



# **Modelling HIV Transmission and Treatment for US MSM to Estimate the Impact of HPTN 078 on HIV Incidence**

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**Imperial College London**  
**London, UK**  
**14<sup>th</sup> June 2016**

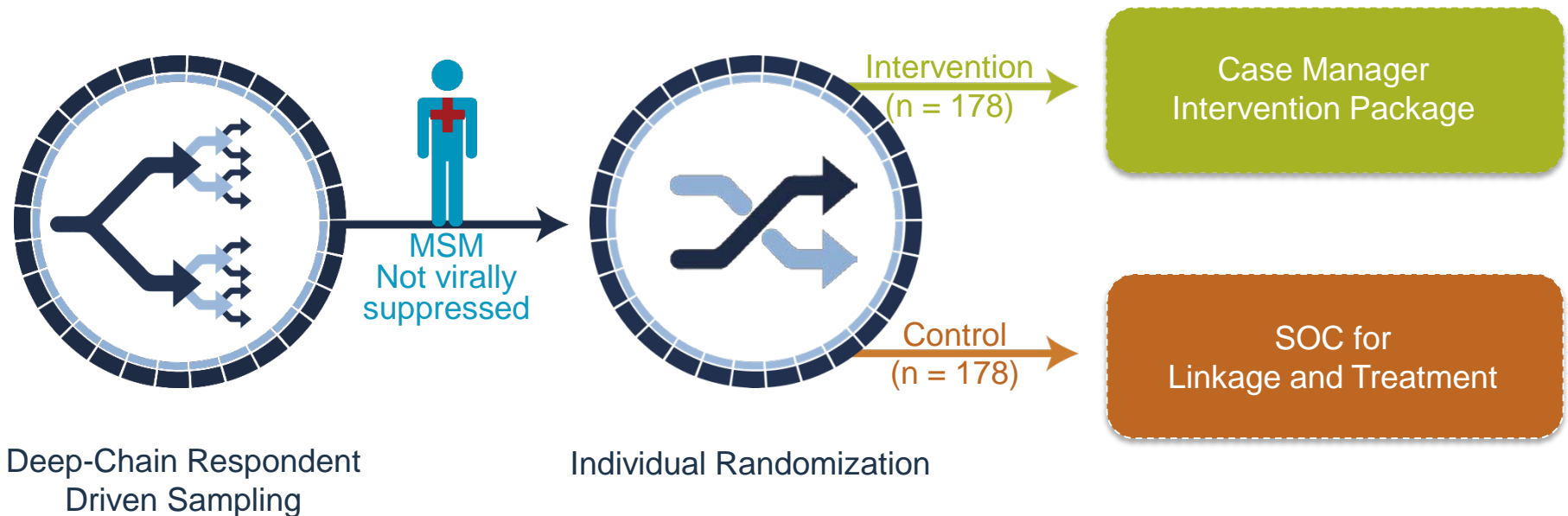
## **Enhancing Recruitment, Linkage to Care and Treatment for HIV-Infected Men Who Have Sex with Men (MSM) in the United States**

Protocol chair: Chris Beyrer

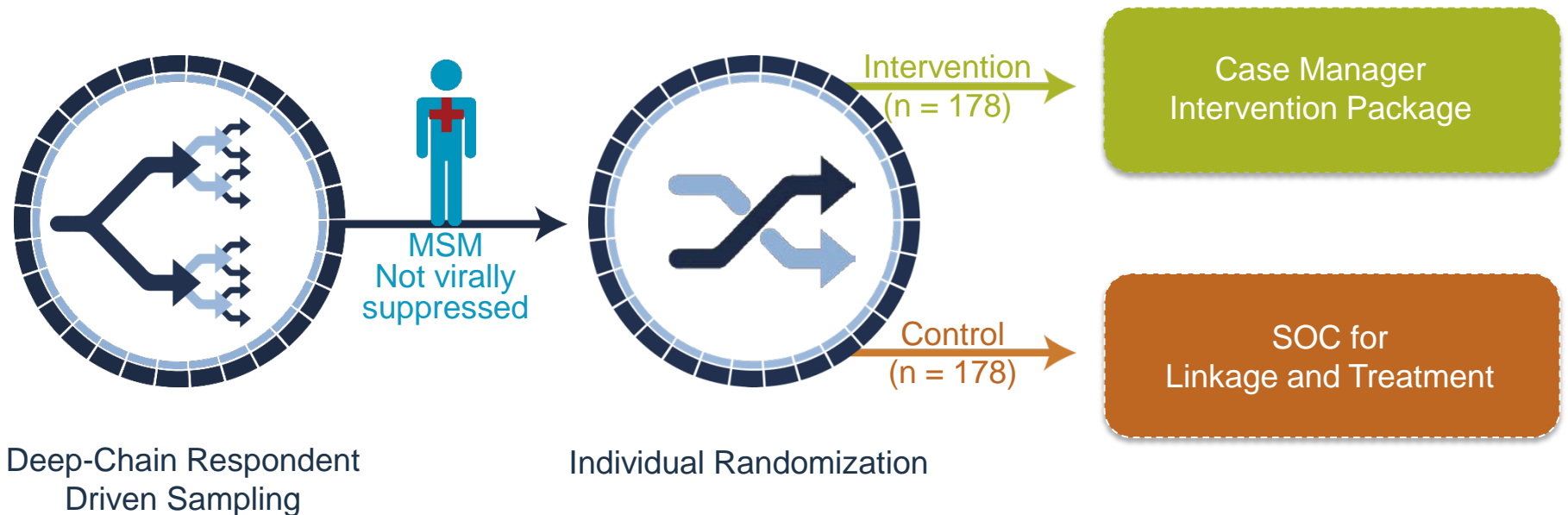
Protocol co-chair: Robert Remien

Trial sites: Atlanta GA, Baltimore MD,  
Birmingham AL, Boston MA

## Enhancing Recruitment, Linkage to Care and Treatment for HIV-Infected Men Who Have Sex with Men (MSM) in the United States



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**Modelling:** predict population-level HIV incidence reduction

**Before**

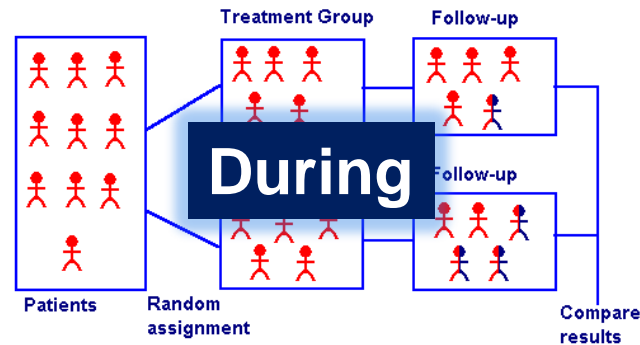
**Protocol design  
Questionnaires**

**Model development  
Data analysis  
Model calibration**

**Initial analyses**

**After**

**Final  
impact  
analysis**



**Before**

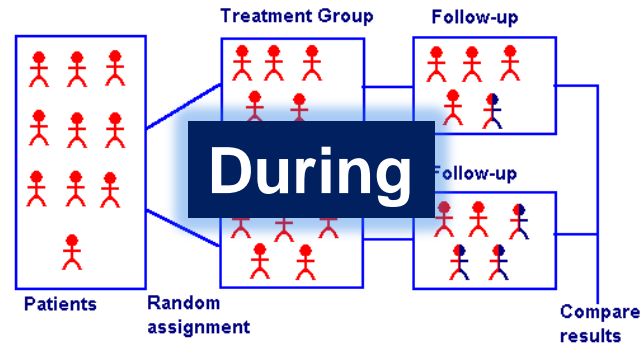
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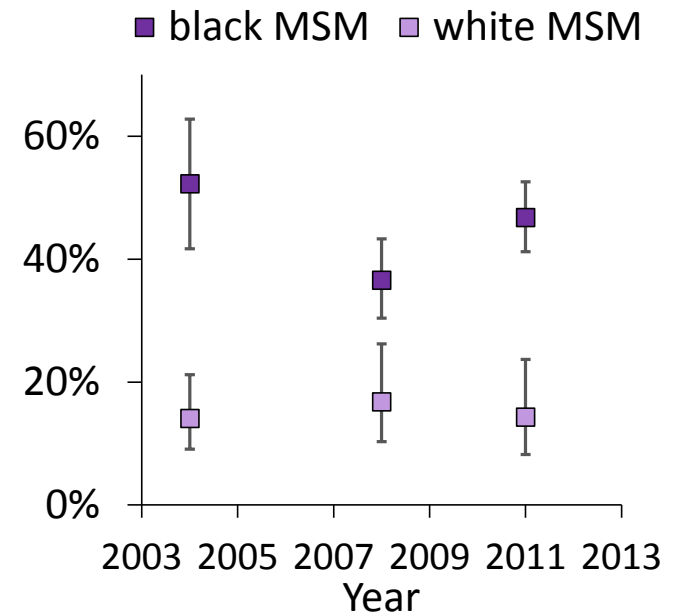
**After**

**Final  
impact  
analysis**



- HIV prevalence among MSM: 41% 2011, 31% 2014 (NHBS)
- Higher HIV prevalence among black MSM than white MSM
- Levels of viral suppression among MSM: 24% 2011, 31% 2013 (Maryland Health Dept)

## HIV prevalence by race Baltimore MSM



NHBS data

# Model development and calibration

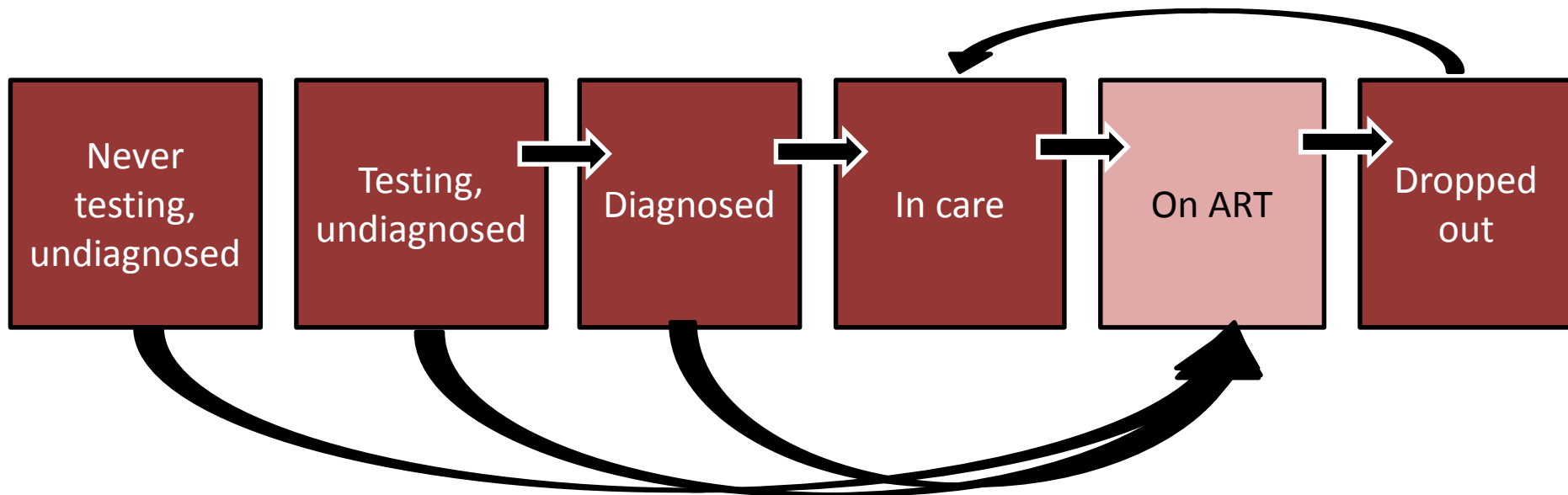
## Stages:

- Model design, coding and development
- Finding model inputs (parameters) and calibration data
  - Review of data
  - Data analysis
- Calibration of model to data



- HIV disease progression: CD4 decline by viral load
- Risk groups: age (<25, 25+) x race (black, white)

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- Care cascade:



# Model inputs (parameters)

Domain	Examples	Data source
<b>Disease progression</b>	<ul style="list-style-type: none"> <li>• Initial CD4 and viral load distribution</li> <li>• HIV-related mortality</li> <li>• CD4 progression rates</li> </ul>	Published studies: cohorts in North America and Europe
<b>Infection probabilities</b>	<ul style="list-style-type: none"> <li>• Per-sex-act transmission probability</li> <li>• Relative infectiousness different disease stages</li> </ul>	Published studies: meta analyses, study of Australian MSM
<b>Intervention efficacy</b>	<ul style="list-style-type: none"> <li>• Reduction in HIV transmission risk: condoms, ART</li> </ul>	Published studies: clinical trials, meta-analyses
<b>Sexual risk behaviour</b>	<ul style="list-style-type: none"> <li>• Number and type of partners</li> <li>• Condom use</li> <li>• Age and race of partners</li> </ul>	NHBS surveillance data, <i>078 trial</i>
<b>Intervention behaviour</b>	<ul style="list-style-type: none"> <li>• HIV testing</li> <li>• Linkage/dropout from HIV care</li> <li>• ART linkage and dropout</li> </ul>	NHBS surveillance data, clinical cohorts, state health department data, <i>078 trial</i>

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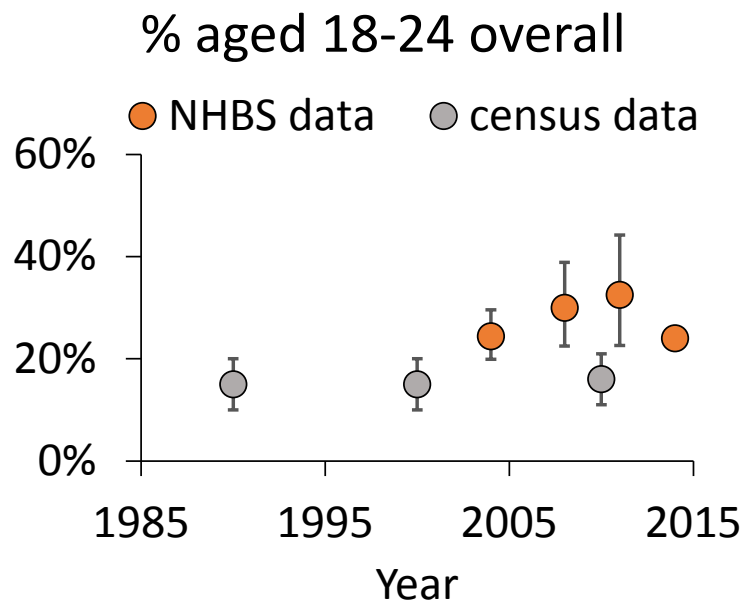
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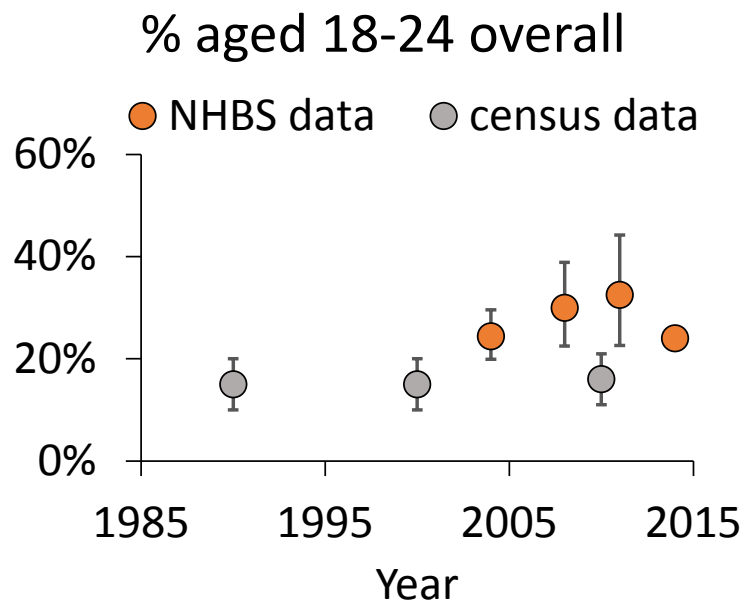
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- Ensure that model outputs can reproduce observed data:
  - HIV prevalence trends - by age and race (NHBS)
  - MSM demography (NHBS, census)
    - Age and race
  - Viral suppression level (NHBS, Maryland Health Dept, CDC national estimates)

## Uncertainty around MSM population demography



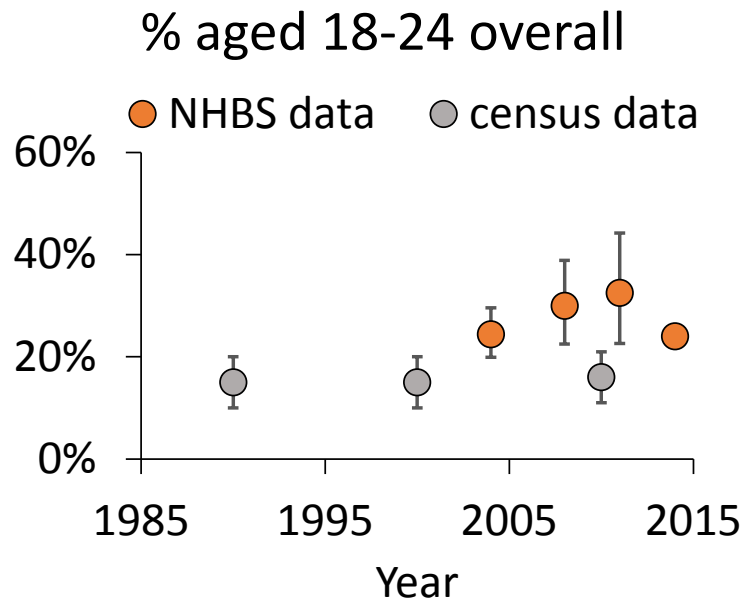
## Uncertainty around MSM population demography



**Dealt with: fitted to 2  
different scenarios**

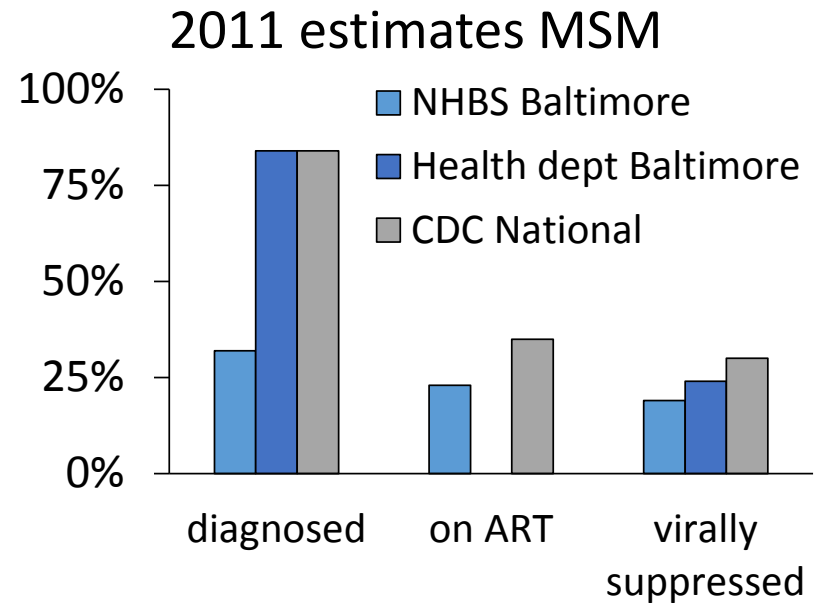


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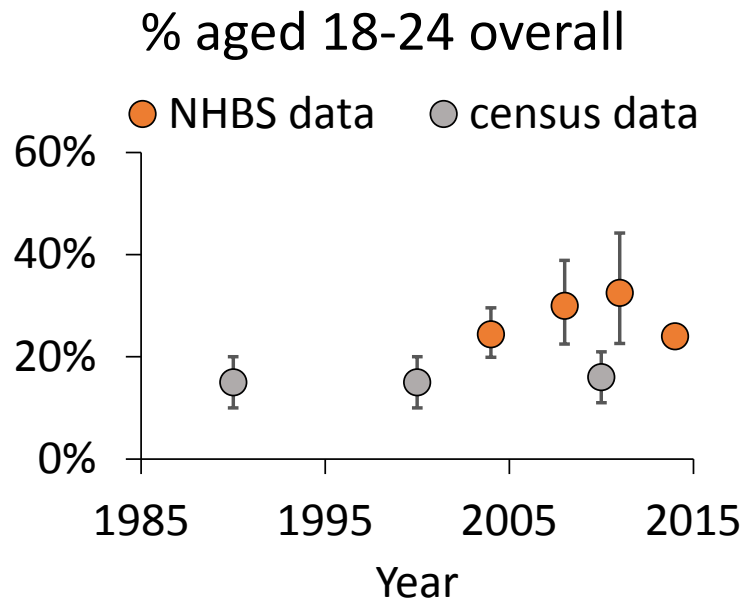


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## Uncertainty in current level of viral suppression

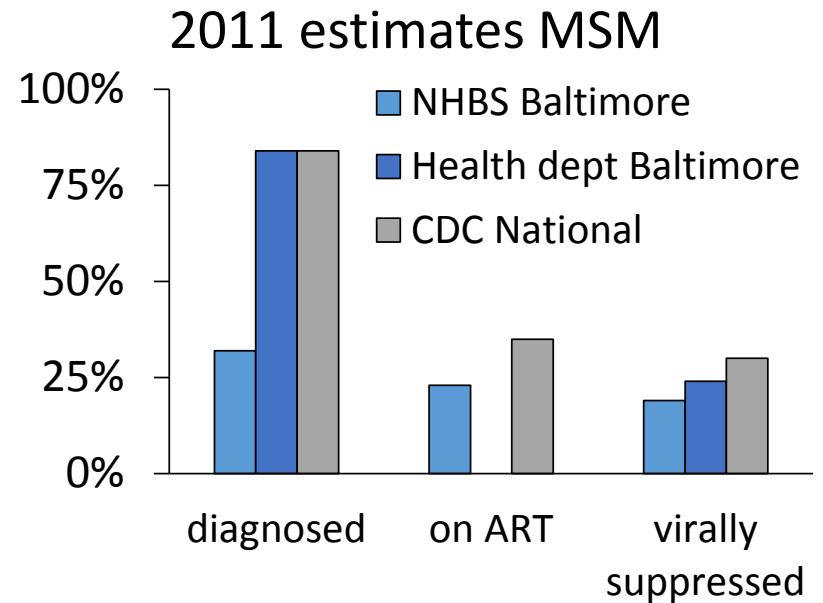


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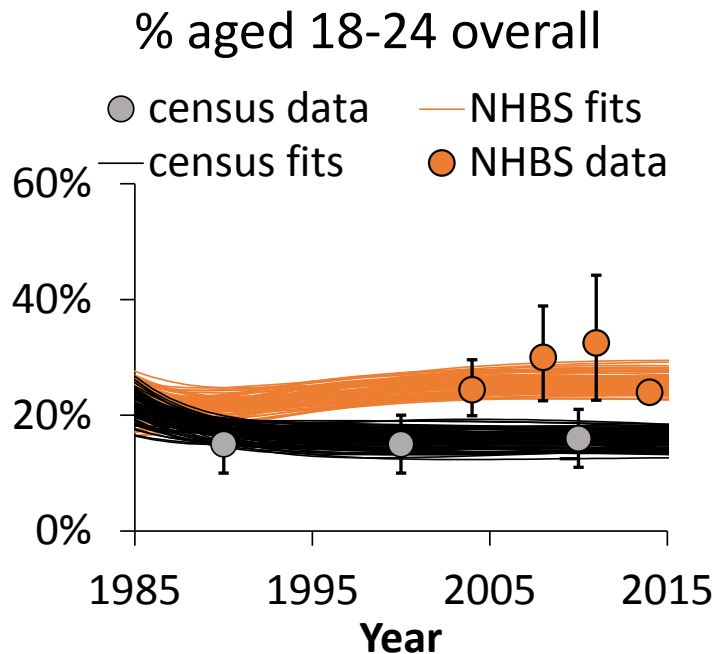
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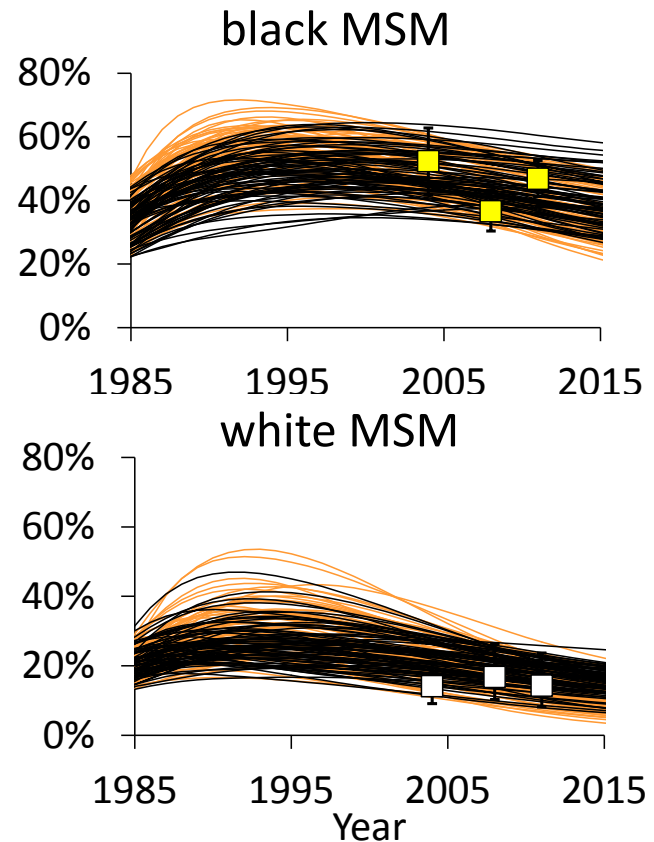
**Dealt with: wide uncertainty range**

Select combinations of inputs giving model outputs reproducing demography, HIV prevalence and viral suppression data

## Age



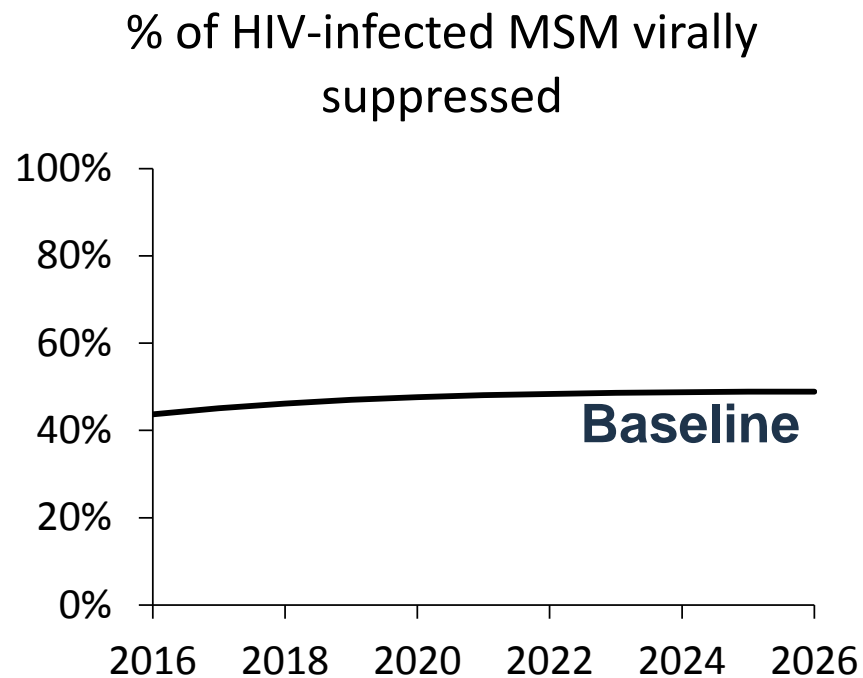
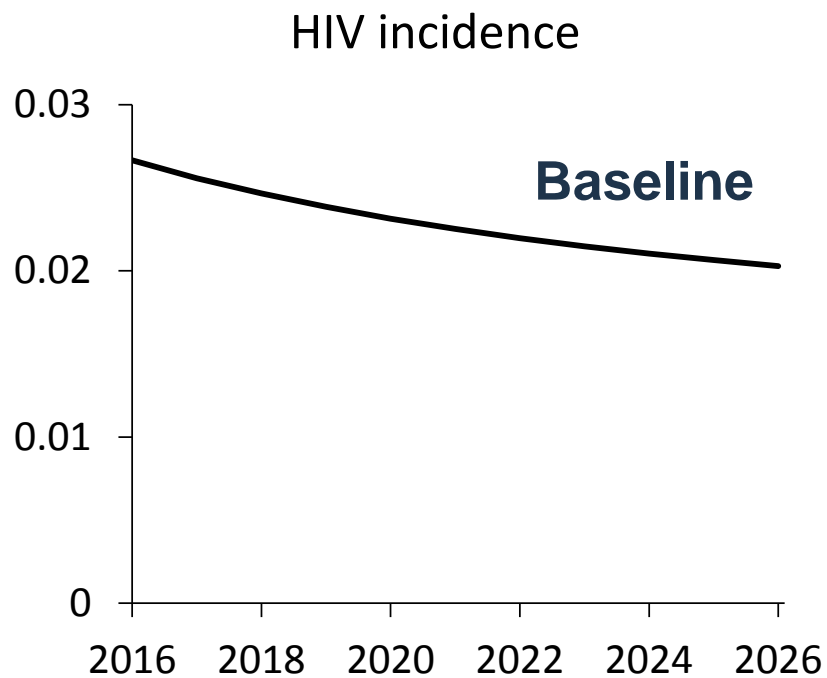
## HIV prevalence



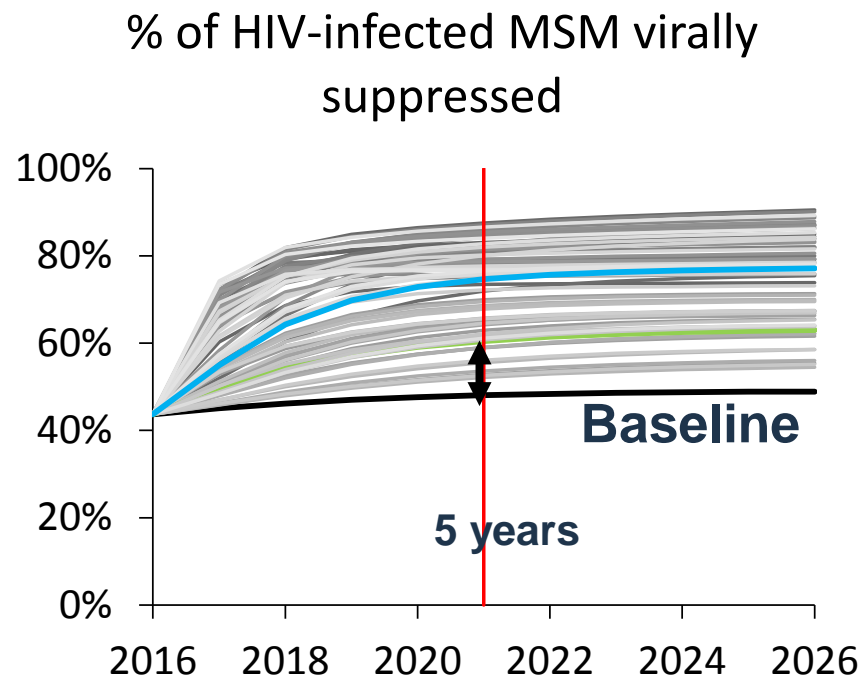
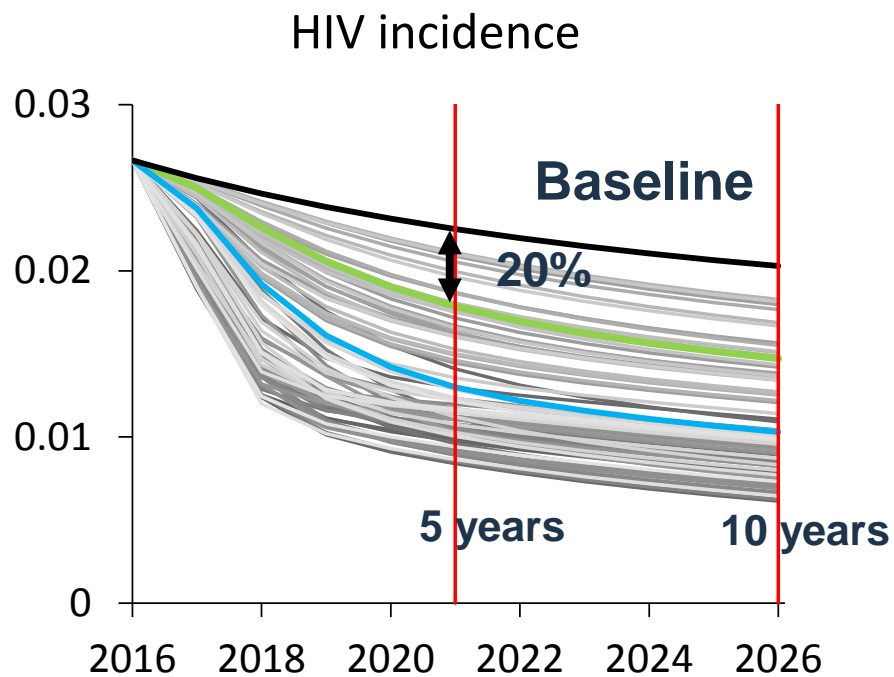
## Initial analysis

**What level of viral suppression must be reached to reduce HIV incidence among Baltimore MSM by 20% or 50% after 5 and 10 years?**

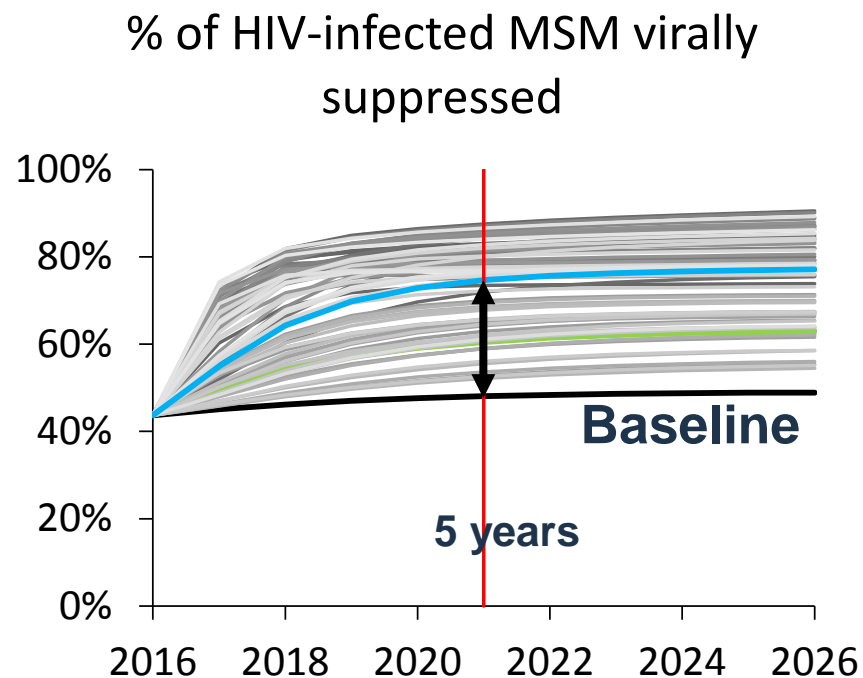
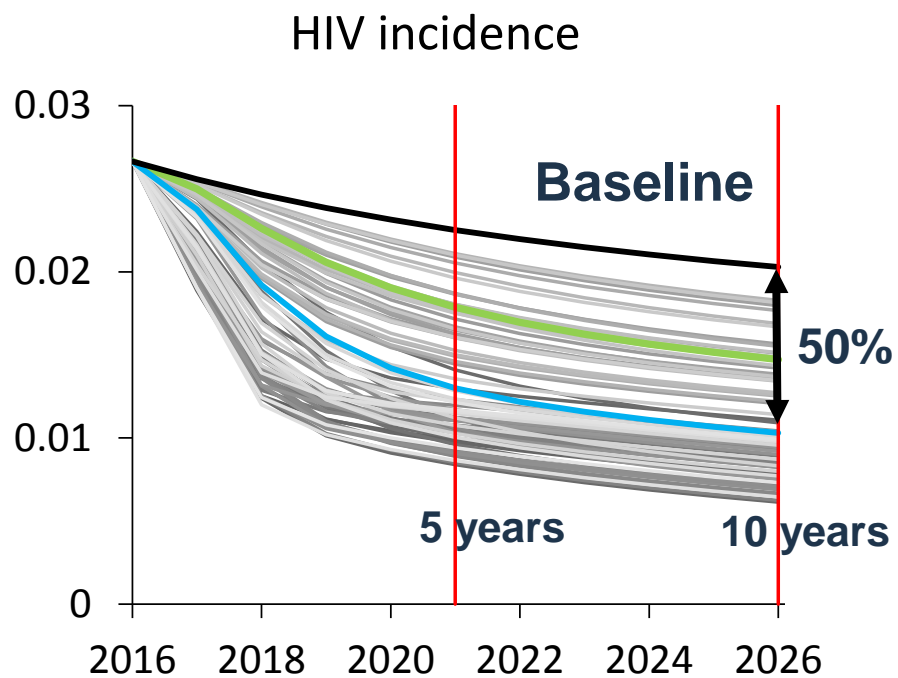
# Initial analysis – meeting incidence reduction targets



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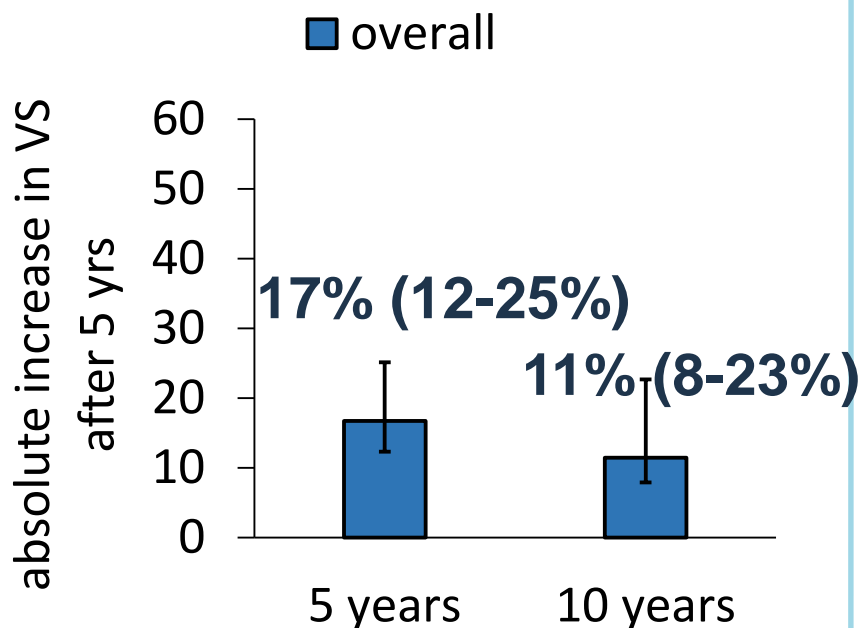


# Initial analysis – meeting incidence reduction targets



# Preliminary results: required increase in viral suppression level

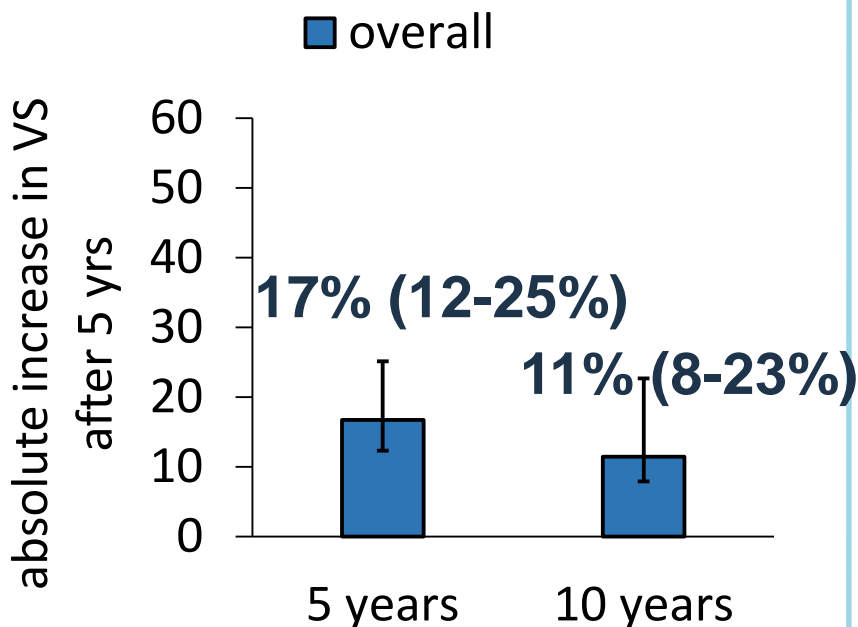
To reduce incidence by  
**20%**





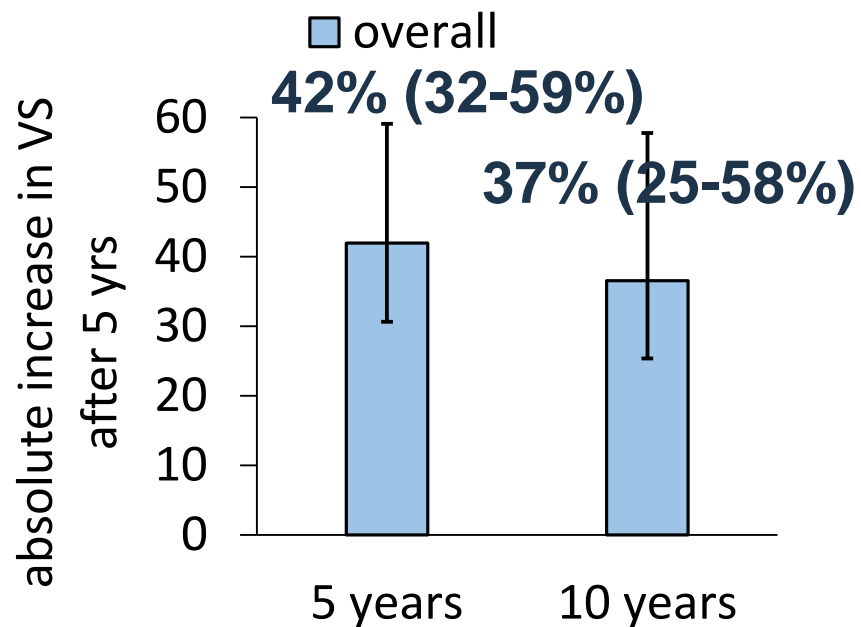
# Preliminary results: required increase in viral suppression level

To reduce incidence by  
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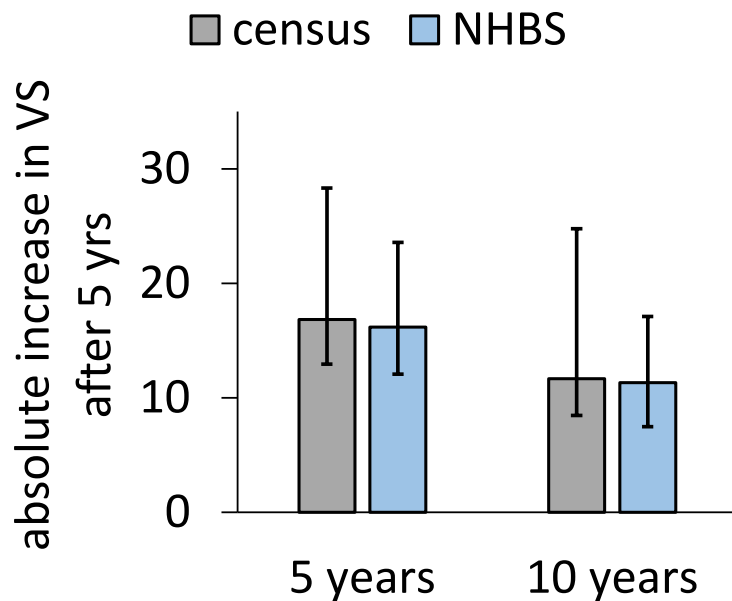


To reduce incidence by  
**50%**

**Could not be reached  
for 10% of fits**

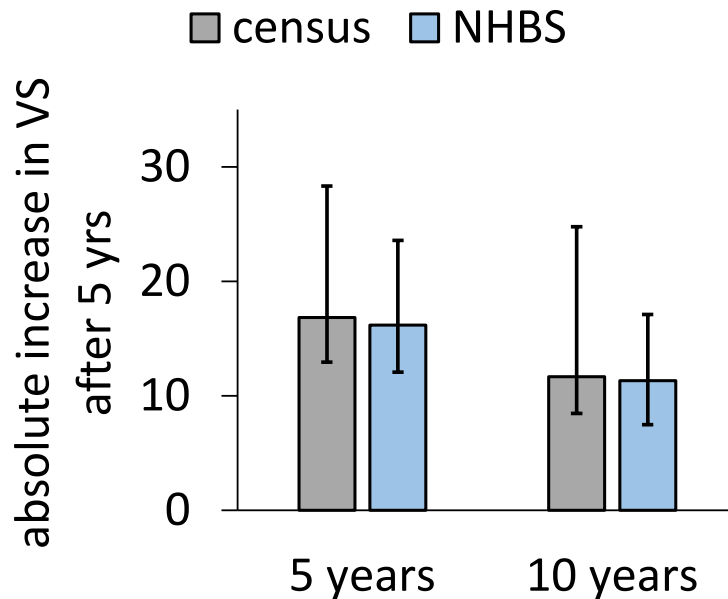


**To reduce incidence  
20%— by demography**

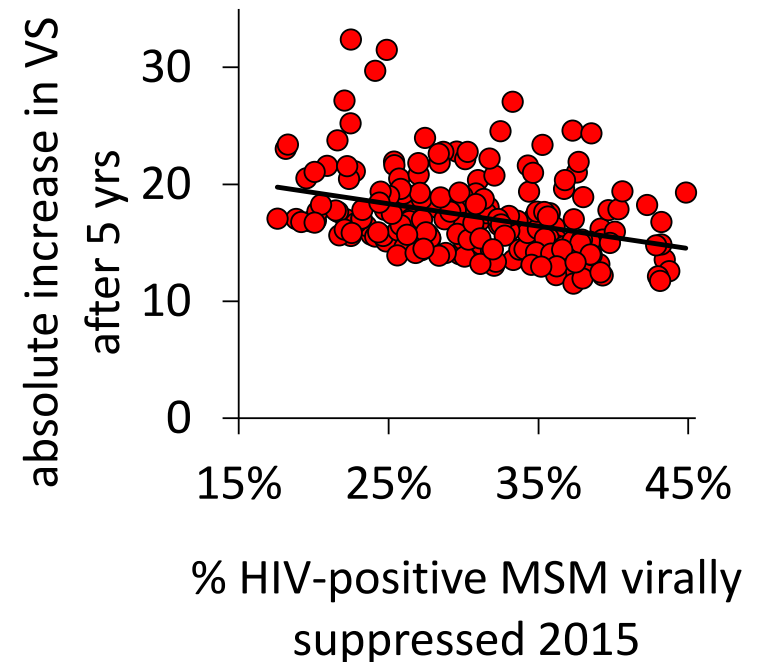


# Preliminary results: required increase in viral suppression level

To reduce incidence  
20%– by demography



To reduce incidence 20%–  
by initial viral suppression



- Large increases in viral suppression are needed to achieve moderate reductions in HIV incidence among Baltimore MSM, especially short-term
- Results are robust to uncertainty in MSM demography
- Results are influenced by uncertainty in current levels of viral suppression

- Estimate how much individual intervention components - testing, linkage, ART initiation and retention - need to be increased to achieve this reduction in HIV incidence
- Estimate predicted impact upon HIV incidence of meeting UNAIDS and CDC targets for diagnosis, treatment and viral suppression
- Extend analysis to other HPTN 078 sites – Atlanta, Boston, Birmingham

## ACKNOWLEDGEMENTS

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**HPTN 078:** Chris Beyrer, Robert Remien, Protocol and site teams

**Imperial College London:** Anne Cori, Mike Pickles



HPTN

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