



HIV in Europe

Working Together for Optimal
Testing and Earlier Care

HIV IN EUROPE - WORKING TOGETHER FOR OPTIMAL TESTING AND EARLIER CARE

2009 Follow-up Meeting
2nd and 3rd of November 2009, The Nobel Forum, Stockholm

Conference Programme

www.hiveurope.eu



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HIV IN EUROPE – 2009 FOLLOW-UP MEETING STOCKHOLM

Dear Colleague,

On behalf of the HIV in Europe Steering Committee we would like to welcome you to The Nobel Forum in Stockholm, and to this pan-European meeting organised under the auspices of the Swedish Presidency of the European Union.

The HIV In Europe initiative has focused its activities on ensuring that HIV-positive patients enter care earlier in the course of their infection than is currently the case, and on investigating how the proportion of HIV-positive persons presenting for care as late presenters can decrease in the years to come.

The HIV in Europe initiative builds on a 'Call to Action' adopted at a pan-European conference in Brussels in 2007 gathering more than 300 key European advocates, clinicians and public health professionals. Based on this call to action, the European Parliament adopted the "Joint Resolution on HIV/AIDS: early diagnosis and early care" in November 2008.

The initiative provides a European platform for the exchange of experiences and knowledge on projects and initiatives designed to improve early diagnosis and care of HIV across Europe. The initiative is directed by a Steering Committee of independent interdisciplinary experts including representatives from patient advocacy groups, policy makers, health professionals and European public health institutions (WHO Europe, ECDC, EMCDDA). The initiative has developed concrete projects with the aim to improve the evidence base around optimal HIV testing and care. One of the goals of this meeting is to discuss the progress of these projects and future actions on both the clinical, advocacy and public health levels.

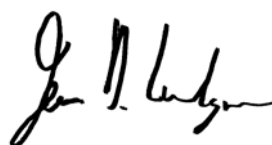
The four ongoing projects that will form the basis of the working group sessions on Monday, 2 November, are presented in depth in this programme. The purpose of these projects is to inform the political and public health debate with measurable results to inform policy-making in the area of early diagnosis and testing of HIV. The working group sessions on Monday morning will be followed by plenary sessions on Monday afternoon and Tuesday, with leading experts in the field and feedback from the four working groups.

We are looking forward to two days of discussions, innovative thinking and action, and political commitment.

On behalf of the Steering Committee of HIV in Europe,



Ton Coenen
Executive Director Aids Fonds
& Soa Aids Nederland
Co-chair HIV in Europe



Jens Lundgren, MD, DMSc
Professor University of Copenhagen Director,
Copenhagen HIV Programme
Co-chair HIV in Europe

HIV IN EUROPE - STEERING COMMITTEE

The Steering Committee is an independent group of HIV experts and is instrumental in helping achieve the aims and objectives of HIV in Europe.

The Co-Chairs



Ton Coenen
Steering Committee, AIDS Action Europe, Netherlands
Executive Director, STI AIDS, Netherlands



Jens Lundgren
Professor & Chief Physician,
University of Copenhagen & Rigshospitalet
Director, Copenhagen HIV Programme, Denmark

Members



Henrique Barros
National Coordinator of HIV/AIDS, Portugal



Nikos Dedes
Chair, Policy Working Group
European AIDS Treatment Group (EATG), Greece



José Gatell
Head, Infectious Diseases & AIDS Units, Clinical Institute
of Medicine & Dermatology, Hospital Clinic
Professor of Medicine, University of Barcelona, Spain



Brian Gazzard
Professor of Medicine, Imperial College School of Medicine
HIV Research Director, Chelsea & Westminster Hospital, UK



Igor Karpov
Professor, Department of Infectious Disease
Belarus State Medical University, Belarus



Jürgen Rockstroh
Professor of Medicine
University of Bonn and Head of an HIV outpatient clinic,
Germany



Jean-Luc Romero
President
Elus locaux Contre le Sida, France



Anders Sönnernborg
MD, PhD, Professor, Department of Medicine
Karolinska University Hospital, Sweden



Gregory Vergus
Regional Coordinator
International Treatment Preparedness Coalition, Russia



John de Wit
Professor of Sociology, Utrecht University
The Netherlands

Observers



**WHO Regional Office for Europe,
STI/HIV/AIDS Programme**
Represented by Smiljka de Lussigny,
technical and advocacy officer



**European Centre for Disease Prevention and Control
(ECDC)**
Represented by Marita van de Laar,
senior expert and programme coordinator



**European Monitoring Centre for Drugs and Drug
Addiction (EMCDDA)**
Represented by Lucas Wiessing,
epidemiologist, principal scientist



The Global Fund to Fight AIDS, Tuberculosis and Malaria
Represented by Dr Jeffrey V. Lazarus, senior specialist and
team leader

Meeting Objectives and Call to Action 2007

Below is the call to action that was released at the HIV in Europe Conference 2007.

The impact of late HIV diagnosis on individuals and healthcare systems is an urgent problem in Europe and Central Asia, compounded by rising numbers of people living with HIV;

Early testing and care is considered to be cost-effective and greater human productivity combined with fewer infections will aid in the future sustainability of healthcare systems;

At the same time, the enjoyment and protection of human rights for people living with HIV/AIDS and members of affected communities remains vitally important.

Against this background, representatives of the EU and UN institutions, national governments, policymakers, and healthcare providers as well as people living with HIV and their advocates, met in Brussels, Belgium, from 26 - 27 November 2007, for the Conference "HIV in Europe 2007" and agreed that all key groups must work together to help provide optimal testing conditions and grant earlier access to care for those infected with HIV.

We therefore call upon these relevant individuals and organisations across Europe and Central Asia to accelerate their response in working toward optimal testing and earlier care, and specifically to:

1. Acknowledge that earlier diagnosis and care is urgently needed to improve the lives of people living with HIV and reduce transmission.
2. Develop more precise estimates - size, characteristics, etc - of the undiagnosed population.
3. Communicate the benefits of earlier care and reduce perceived barriers to testing.
4. Implement evidence-based testing and treatment guidelines in every country.
5. Commit the necessary political, financial and human resources for their timely implementation.

Call to Action Update - HIV in Europe 2007-2009

What has the initiative accomplished since 2007?

To continue the momentum from the unprecedented collaboration of the HIV in Europe 2007 Conference, HIV in Europe outlined and moved forward on the activities for 2008 and 2009 which included:

- Publishing conference proceedings in the peer-reviewed journal HIV Medicine as a supplement in July 2008.
- A roundtable discussion in September 2008 at the European Parliament with the EU Health Commissioner and several senior European Parliament members. The outcome of the meeting was the formulation of a resolution, which was then adapted by the European Parliament on 19 November 2008.
- National HIV in Europe Conferences in several European countries, e.g. France and Portugal.
- National Testing Guidelines released in several countries including Italy, Holland and the UK.
- Call for collaboration on indicator diseases received overwhelming support with over 30 centres with 100 surveys applying to participate. Phase one of the project initiated to define which diseases are indicators of HIV.
- Support to "the People Living with HIV Stigma Index" implementation in three countries in the European region.
- Launched the first phase of a legal review of legislation in Europe that criminalises HIV.
- Collaboratively addressed a consensus process for reaching a uniform definition of a person presenting late for HIV care.
- Launched a collaborative project on data requirements and available methods for estimation of the number of undiagnosed HIV to inform policy and debate on a national and European level.
- HIV in Europe 2009 Follow-up meeting in Stockholm under the Swedish Presidency of the European Union.

Objectives of the HIV in Europe 2009 Follow-up Meeting

The Meeting has the following objectives:

- To inform leaders, including key policy makers and donors, as to increase their commitment to ensure that HIV infected patients enter care earlier in the course of their infection than is currently the case.
- To provide opportunities for multi-stakeholder dialogue to develop creative solutions to unresolved challenges in research and implementation of HIV policies and programmes to improve early diagnosis and care of HIV across Europe.
- To increase public awareness of the problems associated with late presentation for HIV care.
- To adopt a revised and renewed HIV in Europe Call to Action.
- To provide an overview of initiatives and best practices on optimal testing and earlier care.
- To discuss HIV in Europe ongoing projects, the outcome of which will be:
 - An inventory of methodologies that can be applied within a given geographical setting to assess the size of the infected but not yet diagnosed population.
 - Publication of paper describing the epidemiology of HIV presenters across the European continent from 2002-2008.
 - Publishing of the results of a survey assessing HIV prevalence for 8 indicator diseases across Europe to further inform the concept of indicator diseases guided testing.
 - Implementation of the Stigma Index in order to reduce barriers to testing and treatment.
 - Publication of study that will review legislation across the European Region that singles out criminalisation of HIV and other communicable diseases.

The HIV in Europe 2009 Meeting is held under the auspices of the Swedish Presidency of the European Union.



SUNDAY 1 NOVEMBER 2009

Venue: Clarion Hotel Sign, Östra Järnvägsgatan 35, Stockholm

17.00 – 18.45, WHO Regional Office for Europe working meeting on Regional HIV testing and counselling policy framework
19.00 – 21.00, HIV in Europe Welcome Reception

MONDAY 2 NOVEMBER 2009

Venue: Nobel Forum, Karolinska Institute, Nobels väg 1, Stockholm

TIME	SESSION	MODERATORS AND SPEAKERS
08.00 – 08.45	Registration	
08.45 – 09.00	Welcome and Introduction to working groups	Ton Coenen and Jens Lundgren, Co-Chairs of HIV in Europe
09.00 – 10.30	Working Groups A. Late Presenters and the Infected not yet Diagnosed Population B. HIV Indicator Diseases Across Europe C. The People Living with HIV Stigma Index D. Criminalisation of HIV	Andrew Phillips, Frank de Wolf Nathan Clumeck, José Gatell, Antonella d'Arminio Monforte, Brian Gazzard Julian Hows Matthew Weait
10.30 – 11.00	Coffee Break	
11.00 – 13.00	Working Groups – continued	
13.00 – 14.00	Lunch Registration	
OPENING SESSION		
14.00 – 15.00	Welcome to HIV in Europe 2009 Key note speech – Swedish Presidency of the European Union Key note speech – European Commission Welcome note from Karolinska Institute	Moderator: Anders Sönnberg Ewa Björting, Swedish Minister for Trade European Commission representative (tbc) Harriet Wallberg-Henriksson, Dean, Karolinska Institute
HIV IN EUROPE		
15.00 – 16.00	European Parliament Resolution on HIV/AIDS: early diagnosis and early care ECDC's role in the fight against HIV/AIDS in Europe Developing WHO EURO Regional T&C Policy framework HIV in Europe – call to action update	Moderator: Nikos Dedes Christofer Fjellner, European Parliament Marita van de Laar, ECDC Martin Donoghoe, WHO Europe Ton Coenen and Jens Lundgren, Co-Chairs of HIV in Europe
16.00 – 16.30	Coffee Break	
LATE PRESENTATION AND THE UNDIAGNOSED POPULATION		
16.30 – 17.30	Models of how to estimate the size of the infected not yet diagnosed pool of patients Methods for establishing the extent of HIV Epidemics and trends in Prevalence How to implement a consensus definition of "late presentation" Discussion	Moderator: Andrea Antinori Andrew Phillips, UCL Geoffrey P. Garnett, Imperial College London and UNAIDS José Gatell
19.30 – 20.00	Drinks – Clarion Hotel Sign	
20.00	Dinner – Clarion Hotel Sign	

TUESDAY 3 NOVEMBER 2009

MODERATORS AND SPEAKERS	
TIME	SESSION
8.30 – 8.45	Conclusions from Day 1
Moderator: Nathan Clumeck	
8.45 – 9.30	Indicator Disease Guided Testing
	Dutch (prevention and) Testing Guidelines
	EMCDDA: Guidance on Provider-initiated Voluntary Medical Examination, Testing and Counselling for Infectious Diseases in IDUs
09.30 – 10.00	Discussion
10.00 – 10.45	Panel Discussion on testing and late presentation among specific transmission groups
Moderator: Jens Lundgren Fabio Patrino, Ulrich Marcus, Julia del Amo	
Coffee Break	
10.45 – 11.15	BARRIERS FOR EARLIER TESTING
11.15 – 11.45	The Criminalisation of HIV infection - Overview of legislation in Europe
	The People Living with HIV Stigma Index
11.45 – 12.30	Discussion
12.30 – 13.30	Lunch
THE MOMENTUM ENSUED SINCE 2007 - THE NEED FOR POLITICAL ACTION?	
13.30 – 14.30	Feedback from HIV Europe Portugal 2009 Conference
	Feedback from HIV Europe France: the new recommendation from the French National Authority for Health
	Feedback from HIV Europe Spain: Late presenters and detection of PHI: A community approach
	Outlook on the Spanish EU Presidency 2010
Moderator: Marita van de Laar Luís Mendão, GAT Dominique Costagliola Ferran Pujol, Hispanosida Olivia Castillo Soria, Head, AIDS Plan Secretary, Ministry of Health, Spain	
HIV IN EUROPE – THE WAY FORWARD	
14.30 – 15.30	Summing Up and Conclusions
	Call to Action renewed
	Next Steps
Moderator: Anders Sönnberg Ralf Jürgens, rapporteur Ton Coenen and Jens Lundgren	
Coffee Break and End	
15.30 – 16.00	

WORKING GROUP SESSIONS

TIME: MONDAY 2 NOVEMBER 9:00 – 13:00 (COFFEE BREAK INCLUDED)

The working group sessions are designed around the ongoing HIV in Europe projects initiated after the Brussels conference in November 2007. The sessions will allow researchers, clinicians and other stakeholders involved in the projects together with external experts in the field to discuss progress. The sessions will focus on the project status, methodology, and how to launch and implement project results to improve policy and patient care. The sessions will be chaired by the project leads and will give room for discussions on the next steps, especially to releasing and implementing the project results. The conclusions and recommendations from the working groups will be presented during the plenary sessions.

A. Late Presenters and the Infected not yet Diagnosed Population

Venue: Asklepios Room, Administration Building, Karolinska Institute

Working group leads:

Frank de Wolf, Academic Medical Center Amsterdam

Andrew Phillips, UCL, UK

The Problem

HIV continues to be a major threat to the health of people living in Europe, as well as to future generations in the region. There are over 1 million people living with diagnosed HIV in Europe and probably at least an equal number undiagnosed. Estimation of the number of undiagnosed HIV is not straightforward. Multiple approaches are in current use in different countries, some based on making inferences from numbers of HIV and/or AIDS cases diagnosed, and others on extrapolation from data from HIV prevalence surveys. Many countries do not appear to generate any estimates. There is currently no consensus on what method(s) should be used, and hence also no consensus on which data countries wishing to make estimates need to collect. Crude approaches have put the total number of people with undiagnosed HIV in Europe at around 1.2 million but this figure is associated with considerable uncertainty.

Project Objectives and Status

As a starting point in tackling the problem of undiagnosed HIV in Europe, it is important that we develop clear guidance for countries on how to estimate the number of undiagnosed patients, and what data are needed to do this. Among countries that currently produce estimates of the number of undiagnosed people, most use only one approach. A more comprehensive and concerted approach could help all countries produce more robust estimates.

The session will in particular focus on the following questions;

- Defining late presentation – how to implement a common definition for Europe ?
- Approaches to estimating the size of the population of people with HIV who are undiagnosed - how can we clarify the area so that countries know what methods to use ?
- How can we encourage and facilitate improvement of surveillance systems so most European countries can make such estimates?
- Can we extend modelling of infected populations to understand more about the undiagnosed and/or to predict the effects of undiagnosed HIV on HIV transmission ?

B. HIV Indicator Diseases Across Europe

Venue: Wallenbergsalen (auditorium), The Nobel Forum

Working group leads:

Nathan Clumeck, CHU Saint-Pierre, Brussels, Belgium
 Jose Gatell, Hospital Clínic de Barcelona, Barcelona, Spain
 Brian Gazzard, Chelsea and Westminster Hospital, London, England
 Jens Lundgren, University of Copenhagen and Rigshospitalet, Copenhagen, Denmark
 Antonella d'Arminio Monforte, Clinica delle Malattie Infettive, Milan, Italy

The Problem

Most patients infected with HIV across the European continent remain undiagnosed; although this percentage varies markedly from 15-80% across the continent. Undiagnosed HIV is harmful to the person infected as appropriate health interventions are then delayed until the HIV infection is diagnosed. It is also detrimental to society as persons unaware of their HIV infection may transmit more frequently to others than persons that are aware of their HIV status.

Cost effectiveness analyses suggests cost savings if a population with a HIV prevalence of 1% or more are tested although this rate may be as low as 0.1%. However, there is very little – if any - evidence on HIV prevalence for various conditions and diseases in specific and easy to identify sections of society.

Project Objectives and Status

The concept of the indicator disease project was initiated at the HIV in Europe 2007 Conference as a result of discussions recognising that the current model of HIV testing happening in the US was at present not a suitable solution in Europe. A committee of experts, on behalf of the European AIDS Clinical Society (EACS), formed a working group around this issue and identified a model and proposed list of HIV indicator diseases to pilot in Europe.

In the pilot phase of the project launched in May 2009, eight indicator diseases have been identified to assess HIV prevalence. These included:

- (1) Presenting for care of a sexually transmitted disease (including gonorrhoea, syphilis and other ulcerative genital conditions and chlamydia),
- (2) Presenting for care of malignant lymphoma, irrespective of type,
- (3) Presenting for care of cervical or anal dysplasia or cancer,
- (4) Presenting for care of herpes zoster in a person younger than 65 years,
- (5) Hepatitis B or C virus infection (acute or chronic – and irrespective of time of diagnosis relative to time of survey),
- (6) Presenting with ongoing mononucleosis-like illness,
- (7) Presenting with unexplained leukocytopenia or thrombocytopenia lasting at least 4 weeks,
- (8) Presenting with seborrheic dermatitis / exanthema.

Enrolment of the 7500 patients has started and there are 18 centres in Europe involved. The aim is to complete 39 surveys (between 3-5 surveys per indicator disease). The project has received overwhelming support from centres around Europe and in the original call for proposals launched in May, over 30 centres with 100 surveys. The countries participating include: Austria; Belarus; Belgium; Bosnia; Croatia; Denmark; Germany; Italy; Netherlands; Poland; Spain; Sweden; UK; and Ukraine. The first phase is expected to be complete by mid 2010.

The working group session will allow participating sites to discuss progress and future directions of how to best use the surveys to guide the concept of HIV indicator diseases guided testing.

- How do we ensure that all health systems across Europe target persons presenting with an AIDS-defining disease for HIV testing?
- How do we establish HIV indicator disease guided testing as appropriate standard of care across Europe?
- What role should HIV in Europe play in identifying the target group for information and ensuring communication to this group?
- What is the link between current testing policies/guidelines and indicator disease guided testing?

C. The People Living with HIV Stigma Index

Venue: Seminarierum 1, The Nobel Forum

Working group lead: Julian Hows, GNP+

The Problem

One of the key results from the HIV in Europe meeting was that stigma is an important barrier for access to optimal testing and early care. There is fairly limited data available on stigma in the European region, neither on the extent to which stigma is present nor on the effect it has on access to testing and treatment. In order to reduce barriers to testing and treatment it's important to gather more precise data on both issues in order to base action on evidence.

In 2008 the Global Network for People Living with HIV/AIDS (GNP+), the International Community of Women Living with HIV/AIDS (ICW), the International Planned Parenthood Federation (IPPF) and UNAIDS presented 'The People living with HIV Stigma Index'. The Index aims to build the evidence base for understanding stigma and discrimination experienced by people living with HIV in different countries. Based on the results, the countries can define, identify the key problems, formulate policy, and take action. The organizations that have developed the Index will stimulate the roll out worldwide.

Project Objectives and Status:

HIV in Europe's stigma index project builds on this work and will roll out the stigma index in three countries in the European region. An advisory committee will advise the HIV in Europe steering committee on the countries to be selected and receive funding from HIV in Europe based on presented country plans.

Stigma and discrimination continue to be a critical barrier obstructing universal access to prevention, treatment, care and support. However much of what we know about the stigma attached to HIV, and resulting discrimination, is anecdotal or fragmented, and does not include the voices and perspectives of people living with HIV. The People Living with HIV Stigma Index is designed to fill this gap in our global understanding, and build an evidence base to inform policy and practice. One of the key results from the HIV in Europe meeting 2007 was the recognition that in the European region there is limited data available on the extent to which stigma is present or the effect it has on access to testing and treatment. The importance of gathering more precise data in order to base action on evidence was generally acknowledged.

The workshop session will explore the following areas:

- An introduction to the People Living with HIV Stigma Index – the rationale, process, methodology and questionnaire schedule.
- An overview of where the study is being implemented - 64 countries so far - and some of the lessons learnt.
- A discussion on how the PLHIV Stigma Index could best serve the needs of HIV in Europe in getting precise data and evidence on how stigma impacts on decisions about testing and treatment uptake in possibly 9* countries where HIV in Europe supports the implementation of such research – reviewing, questions, themes etc – and how these countries may be supported in dissemination of results and advocacy arising from the results.
- A discussion on how other countries** in the region could start the process of working with the INDEX.

*Belarus, Estonia, Georgia, Kazakhstan, Poland, Russia, Turkey, Ukraine, Uzbekistan

** Albania, Belgium, Greece and Portugal have all expressed a desire to be involved in the project – and there are possibly others interested.

D. Criminalisation of HIV

Venue: Cyber Room, Administration Building, Karolinska Institute

Working group lead: Matthew Weait, Birkbeck College, University of London

The Problem

In collaboration with representative HIV/AIDS organisations from a number of European countries (France, Netherlands, Sweden, Hungary, United Kingdom, Ukraine, Switzerland), this pilot project is the first stage of a critical analysis of current communicable disease legislation in Europe.

Across the world, states are deploying criminal law against people who transmit HIV to others, or who expose others to the risk of transmission (GNP+, IPPF). Long established and demonstrably effective methods of minimising the risk of onward HIV transmission using public health law have been supplemented, and in some cases overtaken, by the use of both general and targeted criminal justice legislation the preventive effectiveness of which has not been established but whose damaging consequences, both for those living with HIV and more generally, are widely accepted within the expert community (e.g. WHO, UNAIDS, IPPF, NAT, THT).

European states that are otherwise united in their commitment to the protection of human rights and the rule of law nevertheless diverge significantly in their approach to criminalisation.

Project Objectives and Status

Focusing primarily on criminal and public health legislation that addresses HIV and AIDS, the project has used primary and secondary materials (legal, policy and other), as well as a detailed questionnaire, in an attempt to gain as full a picture as possible of the extent to which the rights of those living with HIV and AIDS and other serious communicable diseases are being respected in the participant jurisdictions. An important element of the research is the use of a modified human rights audit methodology. Developed by the UN as a way of determining countries' compliance with international human rights norms and principles, this methodology makes it possible to "score" countries in respect of various criteria. The aim is to generate themes and questions that could inform any subsequent larger scale study, but also to produce a piece of coherent stand-alone research, grounded firmly in a rights-based analysis. Such an analysis, it is argued, is more likely to command respect and support from States – despite the relative independence and latitude States enjoy in matters of criminal justice and public health – because they are nonetheless signatories to the conventions and partners with the organisations (WHO, UNAIDS etc) that express these norms and principles. An additional important aim of the research is to identify areas where improvements – in knowledge, information and practice – can be made and human rights compliance enhanced.

The working group session will address the following key questions:

- How is information about the law communicated to people living with HIV and other serious STIs?
- What efforts have been made by advocacy and other organisations working on behalf of people living with HIV and other serious STIs to communicate the legal position to them?
- How can we best facilitate knowledge transfer about the law to people who need to know about it, in particular:
 - People living with HIV
 - Criminal justice professionals
 - Lawyers and representatives
 - Health care professionals
 - Policy-makers
- What opportunities exist in national jurisdictions to challenge laws and prosecution policies that are/may be having adverse public health effects?

PLENARY SESSIONS

2 NOVEMBER, WALLENBERGSALEN (AUDITORIUM), THE NOBEL FORUM

HIV in Europe

The session will 'set the stage' of the conference, providing background on the context in which the HIV in Europe initiative inscribes itself. The initiative was launched at a pan-European Conference in Brussels in November 2007 with the aim of strengthening European collaboration on earlier testing and optimal care. The 'call to action' sought to transform rhetoric into tangible commitments to action, calling upon member states and EU institutions to:

1. Acknowledge that earlier diagnosis and care is urgently needed to improve the lives of people living with HIV and reduce transmission.
2. Develop more precise estimates – size, characteristics, etc – of the undiagnosed population.
3. Communicate the benefits of earlier care and reduce perceived barriers to testing.
4. Implement evidence-based testing and treatment guidelines in every country.
5. Commit the necessary political, financial and human resources for their timely implementation.

Based on this 'call to action' of the conference, a Roundtable in the European Parliament in September 2008 resulted in the European Parliament adopting "The Joint Resolution on HIV/AIDS: Early Diagnosis and Early Care" in November 2008 which will be presented during the session. The resolution – adopted with a historic 97% level of support from Members of the European Parliament represents an important milestone, which strengthened institutional awareness for the need for action, and formally brought the issues of the need for improved early diagnosis to the attention of the European Commission, and governments of the EU member states.

After presentation of the Joint EP Resolution on early diagnosis and early care, the European Centre for Disease Control, observer to the HIV in Europe steering committee, will give an epidemiological update and outline the role of ECDC in earlier diagnosis of HIV across the European continent. WHO Europe will present their revised guidelines on testing and counselling to be released later this year. Finally, the Co-chairs of the HIV in Europe Steering Committee, Jens Lundgren and Ton Coenen will present how the HIV in Europe initiative is contributing to providing a solid evidence base and thus taking the call forward, providing an overview on the HIV in Europe initiative.

Moderator:



Nikos Dedes

Nikos Dedes has been involved in the HIV/AIDS field since 1995 and is currently the Chair of the Policy working group of the EATG (European AIDS Treatment Group), co-chair of the EU HIV/AIDS Civil Society Forum and co-chair of the Patients' and Consumers' Working Party at the EMEA. He is a member of the Steering Committees of the European Clinical Trials Network (NEAT) and member of the advisory boards of ECRIN (European Clinical Research Infrastructure) and the ECDC group to monitor the Dublin Declaration. Nikos advocates for universal access to prevention treatment and care for all people living in Europe and stresses the moral imperative for action to support those most severely affected by the HIV epidemic. He has initiated many projects promoting awareness, prevention and research on HIV in Greece and is a founding member of Positive Voice, a PLHIV organization based in Athens.

Speakers:

Marita van de Laar

Marita van de Laar is the programme coordinator for HIV/AIDS, sexually transmitted infections and viral hepatitis in the European Centre for Disease Prevention and Control (ECDC) in Stockholm. Before she joined ECDC 3 years ago, she worked at the National Institute of Public Health (RIVM) in the Netherlands, in charge of national surveillance of STI, HIV and hepatitis. She carried out numerous epidemiological studies on HIV, STI and hepatitis, from population-base case control studies on hepatitis B to gonococcal resistance patterns in the Netherlands. Marita van de Laar was trained as a biologist and got a PhD in epidemiology at the medical faculty in Amsterdam.

Martin Donoghoe

Team Leader, HIV/AIDS, TB plus team, WHO Regional Office for Europe



Ton Coenen, Co-Chair HIV in Europe

Ton Coenen has been the executive director of the Aids Fonds and STI Aids Netherlands since 2004. He is also a member of the steering committee of Aids Action Europe and board member of Icaso. Aids Action Europe is the Pan European NGO Partnership on HIV and AIDS that started in 2004. It is also the European partner of the International Council of Aids Service Organisations (Icaso). He started as a public health worker in a Municipal Health Service, became vice-director of the National Association for Municipal Health Services and later director of the Netherlands' Foundation for STI-control. He has a degree in Health Sciences and in Public Management.



Jens Lundgren, Co-Chair HIV in Europe

Jens Lundgren is Professor of Viral Diseases. He founded, and now heads, the Danish Centre for Viral Diseases and the Copenhagen HIV Programme (CHIP), based at the State University Hospital (Rigshospitalet) in Copenhagen and at the University of Copenhagen. Dr Lundgren is a member of the Executive Committee of the NIH/NIAID funded INSIGHT network (International Network for Strategic Initiatives in Global HIV Trials) and co-chair of the START study. He is Co-editor-in-chief of the journal "HIV Medicine", Chair of the Steering Committee for the "D:A:D study", and project leader of EuroSIDA.

Late Presentation and the Undiagnosed Population

Two issues remain in order to understand and address late presentation in the best possible way. Currently crude approaches have put the total number of people with undiagnosed HIV in Europe at around 1.2 million but this figure is associated with considerable uncertainty. No consensus on what method(s) should be used exists, and hence there is also no consensus on which data countries need to collect in order to make estimates. Multiple approaches used in different countries, some based on making inferences from numbers of HIV and/or AIDS cases diagnosed, and others on extrapolation from data from HIV prevalence surveys. Many countries do not appear to generate any estimates at all. Another shortcoming is the lack of a common definition of a late presenter. This session will discuss different methods of estimating the size of the undiagnosed population and how to reach a more systematic approach, methods for establishing the extent of HIV epidemics and trends in prevalence and how a consensus definition of a late presenter is implemented in Europe.

Moderator:



Andrea Antinori

Andrea Antinori is head of the III Division of Infectious Diseases, National Institute for Infectious Diseases "Lazzaro Spallanzani" IRCCS in Rome, and Director of the Clinical Department. He is member of the AIDS National Commission of the Italian Ministry of Health and of the Steering Committee of the Italian Society of Infectious and Tropical Diseases (SIMIT). He is scientific responsible of 25 Research Projects with assigned grants by the Italian National Institute of Health and the Ministry of Health on several aspects of HIV infection and antiretroviral therapy, principal Investigator in more than 60 Clinical Trials on HIV infection and Antiretroviral Therapy and scientific director of more than 15 National and International CME Meeting or Workshop on Antiretroviral Therapy. He is author of 335 scientific articles indexed by NCBI-PubMed of the National Library of Medicine-National Institute of Health (US).

Speakers:



Andrew Phillips

Andrew Phillips is Professor of Epidemiology at UCL and has worked in the HIV field over the past 20 years, working mainly on HIV observational cohorts and randomized trials. This began with work on describing the link between the CD4 count and risk of AIDS and other aspects of HIV natural history, and moved on to examining effects of antiretroviral therapy. Particular areas of interest have included virologic failure, drug resistance, adverse effects of ART, and the link between HIV and risk of non-AIDS diseases. He has also increasingly worked on simulation models of HIV in populations, including the undiagnosed, and applied these to both developed and developing country settings.



Geoffrey Garnett

Geoff Garnett is Professor of Microparasite Epidemiology at Imperial College London. His main area of research is the epidemiology and control of sexually transmitted infections. The development and analysis of mathematical models of the transmission dynamics of STDs provides a framework to analyse surveillance and survey data, and observational cohort studies. Prof. Garnett's main aims have been to develop and understanding of the patterns of sexual behaviour involved in STI spread and to understand the potential impact of behavioural and health care interventions. Recent work has focussed on the potential impact of HPV vaccines the epidemiological consequences of antiretroviral treatments and the evaluation of HIV Prevention programmes As Chair of the UNAIDS Reference Group on Estimates, Models and Projections Prof. Garnett has played a part in developing the methods used in HIV surveillance globally.



José Gatell

Dr. José M. Gatell is Senior Consultant & Head of Infectious Diseases & AIDS Units at the Hospital Clinic of Barcelona and Professor of Medicine at the University of Barcelona. Dr. Gatell has published more than 500 articles in international journals, is co-author of more than 50 books on infectious diseases and AIDS and principal author of several books including: A practical Guide to AIDS and A Practical Guide to Antimicrobial Therapy. His main research lines in the field of AIDS are clinical investigation of new antivirals, response to the treatment of patients in early stages of HIV-1 disease and immune reconstitution. Dr. Gatell has been (1997-99) President of the Spanish Society for Infectious Diseases and Clinical Microbiology (SEIMC) is the past president of the European AIDS Clinical Society (EACS) and is Associate Editor of several Spanish and international journals including Clinical Infectious Diseases, Antiviral Therapy, HIV Medicine, HIV Clinical Trials, J AIDS and Medicina Clinica. He was Co-Chair of the XIV International AIDS Conference in Barcelona in July, 2002, and of the X EACS Conference in Dublin in November 2005.

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Targeted Testing – Optimal Testing? Best practices

The session will discuss different approaches to how testing can be optimised to get more people diagnosed earlier in the course of their infection. From a clinical view, indicator diseases guided testing will be discussed as a novel method for optimal testing in Europe. From a political view, there will be a presentation of testing guidelines on national levels and testing guidelines focusing on specific transmission groups. It will be discussed how such guidelines – including indicator diseases guided testing – are implemented and monitored and what role national health bodies, European organisation, physicians and patient organisations should play in this respect.

Moderator:



Nathan Clumeck

Dr Nathan CLUMECK is Professor of Medicine and Infectious Diseases at the Free University of Brussels, Belgium. He is also head of the Department of Infectious Diseases of the Saint-Pierre University Hospital in Brussels. Dr Clumeck's academic and research interests include AIDS in Africa, heterosexual transmission of AIDS and treatment of HIV infection and related conditions. He is principal investigator or co-investigator in many multicentric clinical trials on antiretroviral therapy (new drugs, strategic trials). Dr Clumeck is a founding member and first chairman (from 1998 to 2002) of the European AIDS Clinical Society (EACS).

Speakers:



Brian Gazzard

Professor Brian Gazzard saw his first HIV positive patient in 1979. He has written 600 peer reviewed publications on the subject, he is currently the HIV Director at Chelsea and Westminster Hospital, he was previously the hospital's Clinical Director and is now its Research Director. He was given the DH award for outstanding achievement in 2003 and in the same year received the Terrence Higgins Trust award for clinical contributions to HIV.



Rebecca van Riel

Rebecca van Riel is senior policy adviser Sexual Health and Infectious Diseases at the Ministry of Health, Welfare and Sport of the Netherlands. The Dutch policy approach is aimed at safe, voluntary, respectful sex and is aimed at prevention of STI's and HIV/AIDS, sexual coercion and unintended pregnancies. The Dutch policy is based on 4 central policy values: autonomy, self-reliance, mutual understanding and respect, and the right to effective care.



Hans Blystad

Hans Blystad is a medical epidemiologist and acting director, Department of Infectious Disease Epidemiology, Norwegian Institute of Public Health. He is responsible for national surveillance and prevention strategies HIV and STIs in Norway. He is member of Barents HIV/AIDS Programme expert group, HIV/AIDS Expert Group of the Northern dimension partnership in Public health and Social well-being and national expert of drug related infectious diseases at European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). He has a special interest in HIV prevention among risk groups.

Panel Discussion on testing and late presentation among specific transmission groups

The panel discussion will focus on the problem of getting the relevant risk groups tested for HIV. It will include specific presentations on getting MSM, IDUs and the heterosexual population, with special attention to migration, diagnosed earlier. The discussion will include examples of specific interventions such as methadone programmes, venues or media such as Internet or gay bars for MSM and general population, with a specific focus on the situation in Eastern Europe.

- What are the specific problems of diagnosing and increasing testing in specific transmission groups (MSM, IDU, heterosexual population, and migrant populations)?
- What are the key groups in Europe who present late for care?
- Should interventions be focused on the most at-risk groups (MSM and IDU) rather than on the general population?

Moderator: Jens Lundgren, MD, DMSc, University of Copenhagen and Copenhagen HIV Programme

Panelists:



Fabio Patruno, Villa Maraini, Italy

Fabio V. Patruno is one of the founders of the Villa Maraini complex, Italian Red Cross, more than 30 years ago and, since then, he has continued to work with vulnerable people in various contexts such as community, drop in centers, prisons, hospitals, streets... Trained as a psychologist and psychotherapist he deeply believes in the value of team work. He is one of the promoters of the constitution of the Network of the Federation ERNA (European Red Cross Red Crescent network on HIV and AIDS and TB) in 1998. Elected Vice-Chair of the ERNA Board in 2003 and Chair in 2009 during the thirteenth Annual Meeting of the Network in Kyrgyzstan. Since 2004 he has worked in close cooperation with the Health Department of the IFRC organizing trainings in Villa Maraini in favour of RC/RC National Societies and other stakeholders willing to scale up actions on harm reduction.



Ulrich Marcus, Robert Koch-Institut, Germany

Dr. Ulrich Marcus is an epidemiologist in the Department for Infectious Diseases Epidemiology, responsible for analysis of HIV and syphilis reports (deputy director of HIV/STI/hepatitis B and C surveillance unit). He is the representative of the Robert Koch-Institut in the German HIV guideline writing committee and the German representative in the HIV/AIDS expert group of the Baltic Sea Task Force and the Northern Dimension Partnership. He acted as project leader of the KABAStI study (knowledge, attitudes and behaviour of MSM as to sexually transmitted infections) in 2006/07. He is member of the Social Sciences Advisory Board of the German HIV Competence Net and project leader of the EU-funded EMIS-project (European MSM Internet Survey), running since Mid-March 2009 until September 2011.



Julia del Amo, Institute of Health, Carlos III, Ministry of Science and Innovation, Spain

Julia del Amo is Medical Epidemiologist based at the Spanish National Center of Epidemiology, at the Instituto de Salud Carlos III in Madrid. Her area of interest is cohort studies of HIV-positive patients and she also has an interest in migrant's and ethnic minorities health problems.

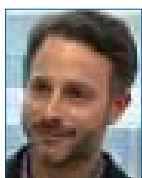
Barriers for Earlier Testing

The People Living with HIV Stigma Index provides a tool that will measure and detect changing trends in stigma and discrimination experienced by people living with HIV. In the initiative, the process is just as important as the outcome. It aims to address stigma relating to HIV while also advocating on key barriers and issues perpetuating stigma - a key obstacle to HIV treatment, prevention, care and support.

The criminalisation of disease exposure and transmission is an issue which requires critical analysis of law and legal principles and needs to be understood within the national policy context as a whole. The application of such a policy should be subjected to guiding principles with the aim of preventing transmission of diseases and respecting human rights. This requires contributions from all stakeholders to critically examine the impact of criminalisation of communicable disease and develop a policy that is acceptable to all groups as well as effective. But even more important is the question of whether policies that criminalise transmission or risk of transmission of a communicable disease are effective or have a detrimental effect, such as reducing the uptake of people tested.

The session will present and discuss the two ongoing projects supported by HIV in Europe aimed at reducing barriers to testing and treatment.

Moderator:



Jeffrey Lazarus

Jeffrey Victor Lazarus, PhD, MIH, MA, is the senior specialist, knowledge translation, at the Global Fund to Fight AIDS, Tuberculosis and Malaria. Until September 2009 he was the advocacy and community relations adviser at the Communicable Diseases Unit, WHO/Europe. He also holds a position as external lecturer in international health at the University of Copenhagen. Dr Lazarus is the author of more than 70 public health related publications including 35 peer-reviewed articles and 5 books.



Matthew Weait

Dr Matthew Weait studied law and criminology at the universities of Cambridge and Oxford and was called to the Bar of England and Wales in 1999. He is currently Reader in Socio-Legal Studies and Assistant Dean in the Law School at Birkbeck College, University of London. His research centres on the impact of law on people living with HIV and AIDS and he has published widely in this area. His book *Intimacy and Responsibility: the Criminalisation of HIV Transmission* was published by Routledge in 2007. Matthew has acted as a consultant on project for UNAIDS and the WHO.



Julian Hows

Julian Hows has been working as a programme officer with GNP+ (www.gnpplus.net) since April 2009. He has been involved in AIDS/HIV as a community activist, programme officer, outreach worker and CEO of several community based initiatives in the UK. His involvement in HIV has been since 1983 and in the Lesbian and Gay movement since the early 1970's. In recent years work has included "Criminalisation of HIV transmission in Europe: A rapid scan of the laws and rates of prosecution for HIV transmission within signatory States of the European Convention of Human Rights" available at www.gnpplus.net/criminalisation as well as working on issues of service delivery and rights for migrants, refugees and asylum seekers and 'substance' users within the UK as well as internationally. His current responsibilities at GNP+ include leading on work with the PLHIV Stigma Index.

The momentum ensued since 2007 – the need for political action?

This session of the conference will present some of the key national initiatives and meetings – in Portugal, France and Spain - that have ensued over the last two years resulting from the HIV in Europe 2007 conference, taking stock of the results of the various initiatives, including community lead initiatives that can be considered best practises in the field of early diagnosis of HIV. The session will be concluded by a presentation on the ongoing efforts in the field that is taking place in Spain, the country to hold the next presidency of the EU, and provide an opportunity to discuss which political actions the expert audience present would welcome to see happening in order to sustain the political momentum ensued, and to take the initiative forward during the Spanish Presidency.

Moderator: Marita van de Laar, ECDC

Speakers:



Luis Mendao

Luís Mendão is currently President of GAT - Pedro Santos, an NGO founded in 2001 and working in the dental care HIV/AIDS. He is also the founder and integrates the Board of Directors of the Anti Prohibitionist Association (SOMA-APA). He represents Portugal in the Civil Society Forum on HIV/AIDS at the European Commission and is a member and Vice-Chair of the European AIDS Treatment Group (EATG) and a member of the Steering Committee of HIV PORTUGAL. In the last six years, he has been community consultant assessor of WHO Europe on issues related to injecting drug users, HIV-positive people, co-infection HIV/HCV, surveillance and testing. In 2007, he organized the European conference on "The right to prevention and treatment of HIV/AIDS for migrants and minorities in Europe: a community perspective", with the support of 34 civil society organisations, WHO-Europe, IOM, ILO, UNAIDS and EMCDDA. Luís Mendão was diagnosed with HIV and HCV in 1996.



Dominique Costagliola

Dominique Costagliola, PhD, Senior Researcher at the Institut national de la santé et de la recherche médicale (INSERM) heads the Unit U943 on Clinical epidemiology, therapeutic strategies and virology in HIV infection at INSERM and Université Pierre et Marie Curie (UPMC) in Paris, France. She is a member of the French working group on management of HIV infected patients, the Scientific Board of the International Workshop of HIV Observational Databases, and several ANRS (Agence Nationale de la Recherche sur le SIDA et les hépatites virales) boards. She is the Principal Investigator of the French Hospital Database on HIV (FHDH ANRS CO4) and one of the two vice-chairs for COHERE, a consortium of European HIV cohorts. She also heads one of the monitoring and statistical data analysis centres for ANRS trials and cohorts. Her main fields of competence include biostatistics, epidemiology, including pharmacoepidemiology, clinical trials and modelling applied to HIV infection, haemophilia, drugs and viral safety of blood transfusion. Dr. Costagliola has extensively studied the effects of antiretroviral therapy in HIV-infected patients, resistance to ARVs and AIDS and severe non-AIDS morbidity in HIV patients, in particular cancers and myocardial infarction. She has published over 290 articles.



Ferran Pujol

Ferran Pujol is the Executive Director of Projecte dels NOMS-Hispanosida, one of Spain's most important HIV/AIDS community-based organisations, and founded by him in 1993. He is also the cofounder in 1998 of ATOS (Association for Organ Transplants to persons living with HIV), an organisation that promoted organ transplant program access for people with HIV and VHC coinfection, resulting in the first liver transplant in 2002. In 2003 he implemented the 20th October as The National HIV test Day in Spain. His latest project has been the implementation in 2006 of BCN Checkpoint, a community based centre of HIV detection for MSM. He is a member of the EATG and of the Spanish Community Advisory Board (CACSIDA), as well as the Spanish representative of the HIV/AIDS Civil Society Forum (CSF), an informal advisory body to the European Think Tank on HIV/AIDS.



Olivia Castillo Soria, Head, AIDS Plan Secretary, Ministry of Health, Spain

Dr Olivia Castillo Soria is a specialist in Public Health for the United Kingdom and a Spanish Health National Doctor. She is head of the Area of Prevention and Coordination in the AIDS National Plan Secretary, where she develops and implements the prevention activities in the Multisectorial AIDS Plan for 2008–2012. During her professional career, she has been working in the Directorate of Public and Foreign Health in the Ministry of Health and Social Policy and in the International Relations Sub-Directorate.

HIV in Europe – way forward

Based on the previous sessions, this section of the conference will present the result of the conference including the interdisciplinary workshops to the plenary, sum up the main findings of the projects and present the next steps of the HIV in Europe initiative. Furthermore, a renewed “call to action” will spell out the specific political support and action on member state and European level needed to ensure coherent and evidence-based policymaking and implementation on HIV early diagnosis and care throughout the European Union.

Moderator:



Anders Sönnberg

Anders Sönnberg is Professor of Infectious Diseases and Clinical Virology at Karolinska Institute, Stockholm. He has been clinically and scientifically active in the field of HIV since 1983. He is director of the Swedish InfCare HIV cohort and of the Swedish Reference group for Antiviral Therapy.

Speakers:

Ralf Jürgens, rapporteur

Ton Coenen and Jens Lundgren

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