

***The Amsterdam Case study, Fast Track Cities conference,  
Sevilla, October 2022***

**Elske Hoornenborg, Head of the Center for Sexual Health of  
the Public Health Service of Amsterdam**



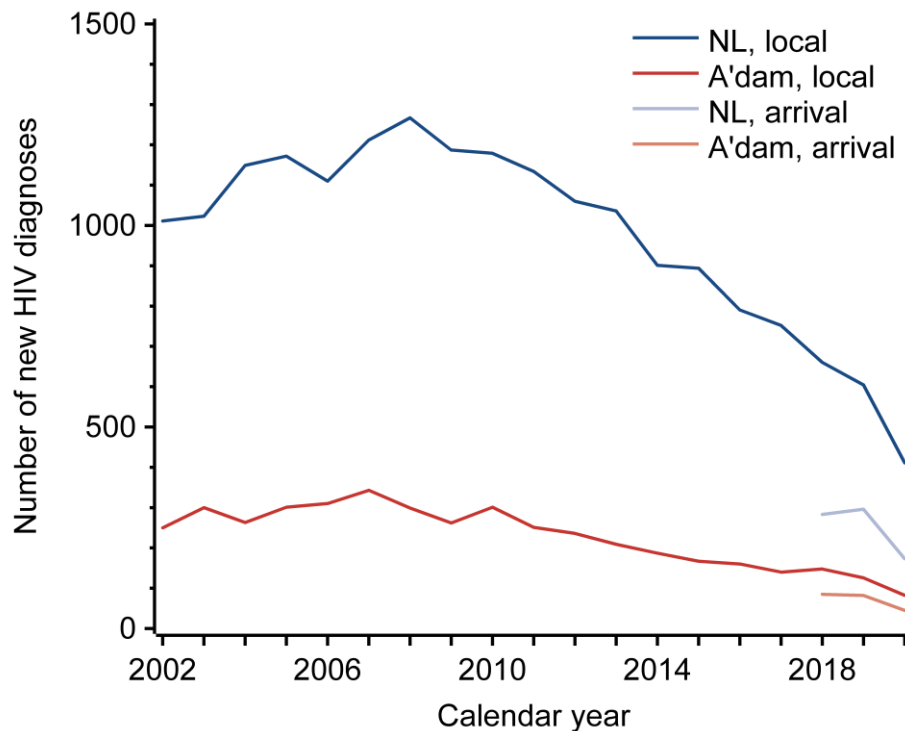
## Outline

### The HIV epidemic and Amsterdam's innovations

- The HIV epidemic in Amsterdam
- H-TEAM initiative
- Implementation and innovation
  - Acute HIV diagnosis & fast linkage to care
  - Online PrEP provision (*ezi-PrEP*)
  - Reaching out to the trans gender population
  - “Sexy Side of the Netherlands” meetings
- Innovations in other fields

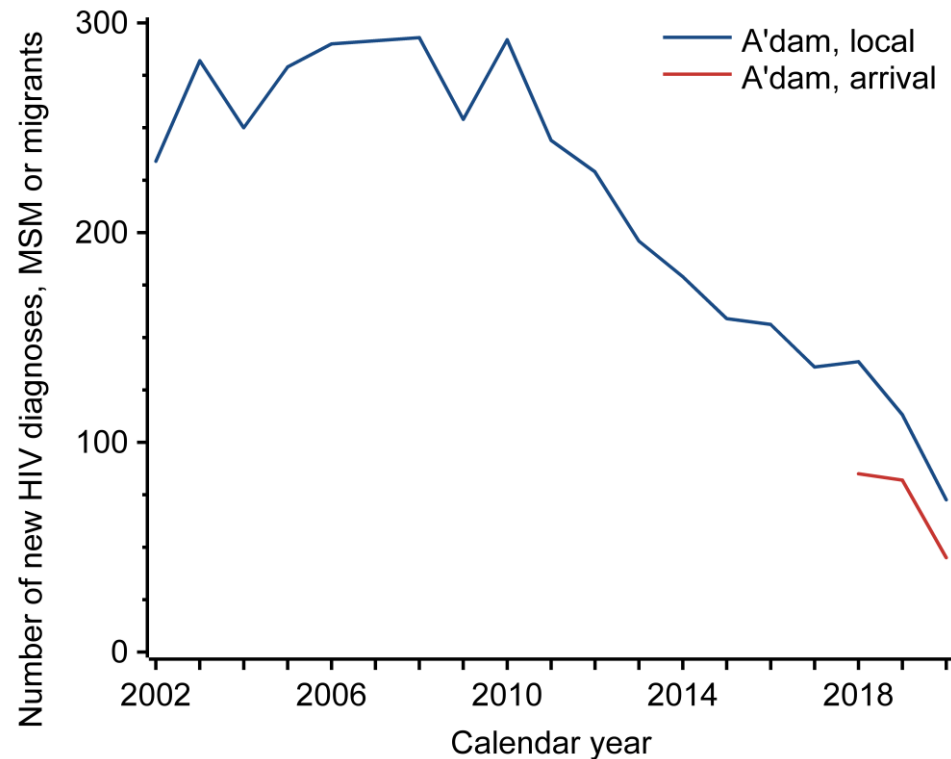
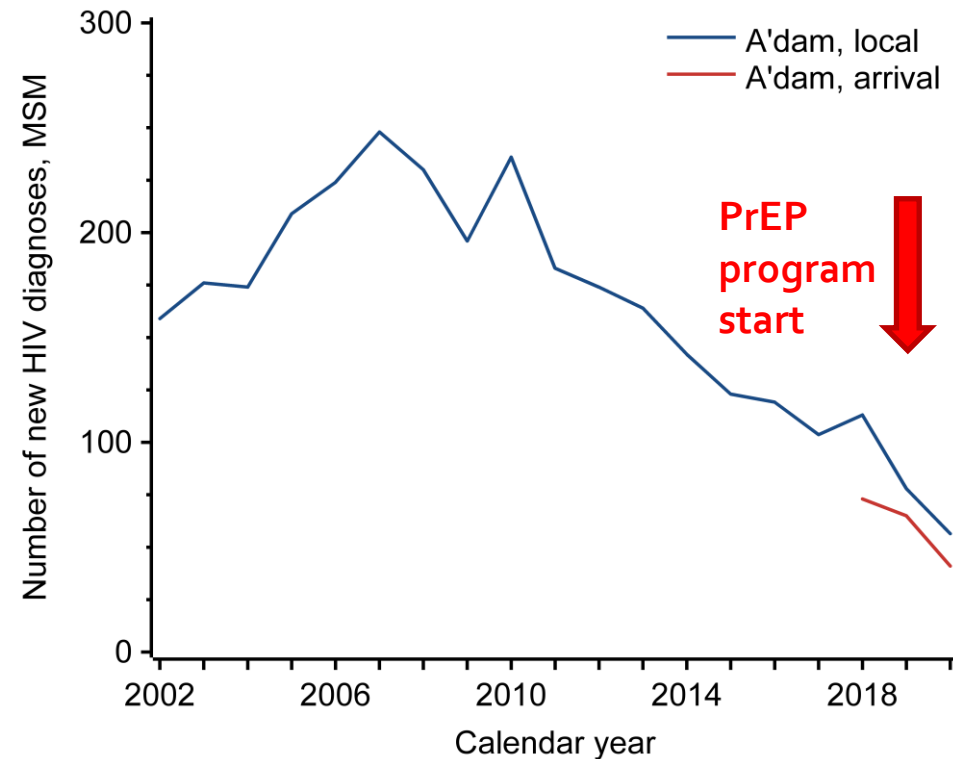


# Number of new HIV diagnoses, Amsterdam and the Netherlands



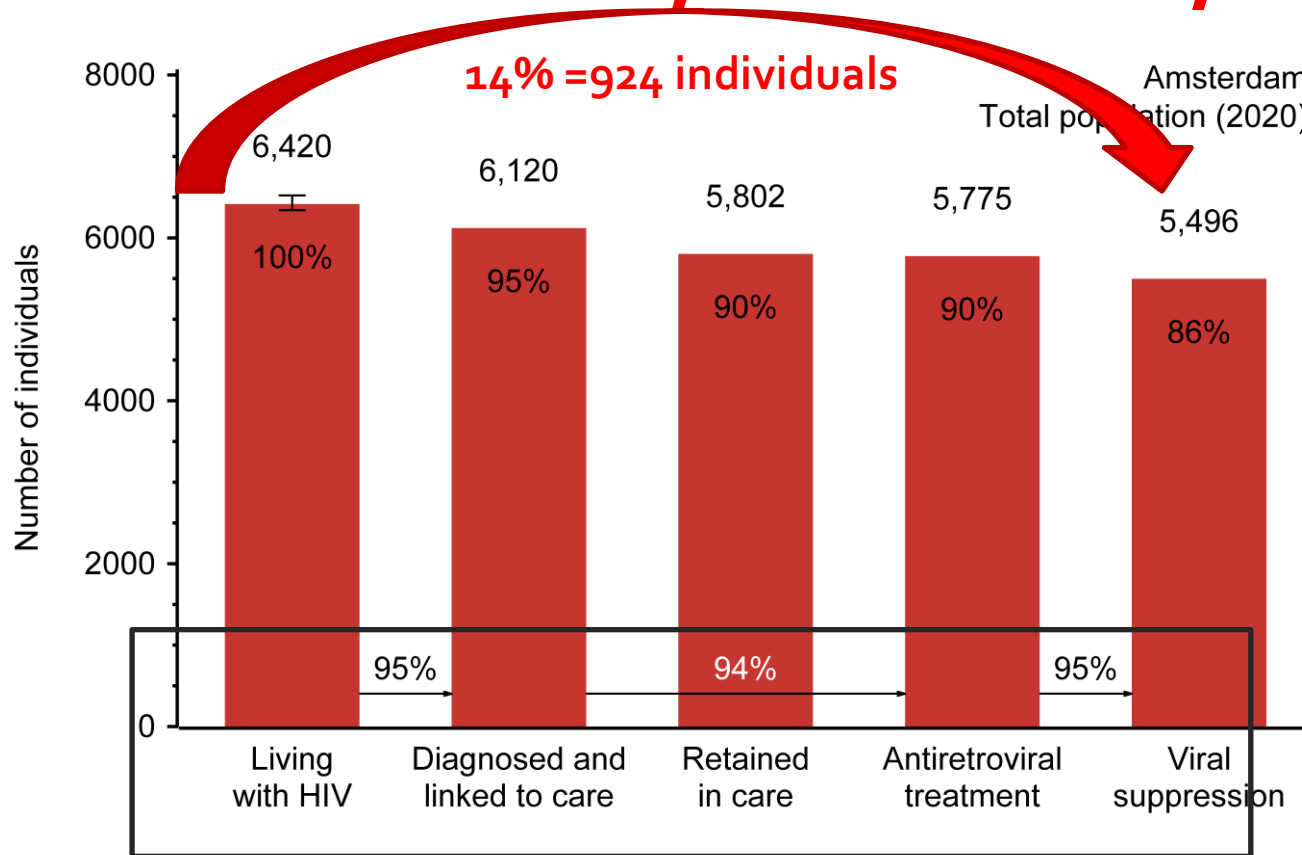


## New diagnoses for MSM (left) & MSM and migrants (right)



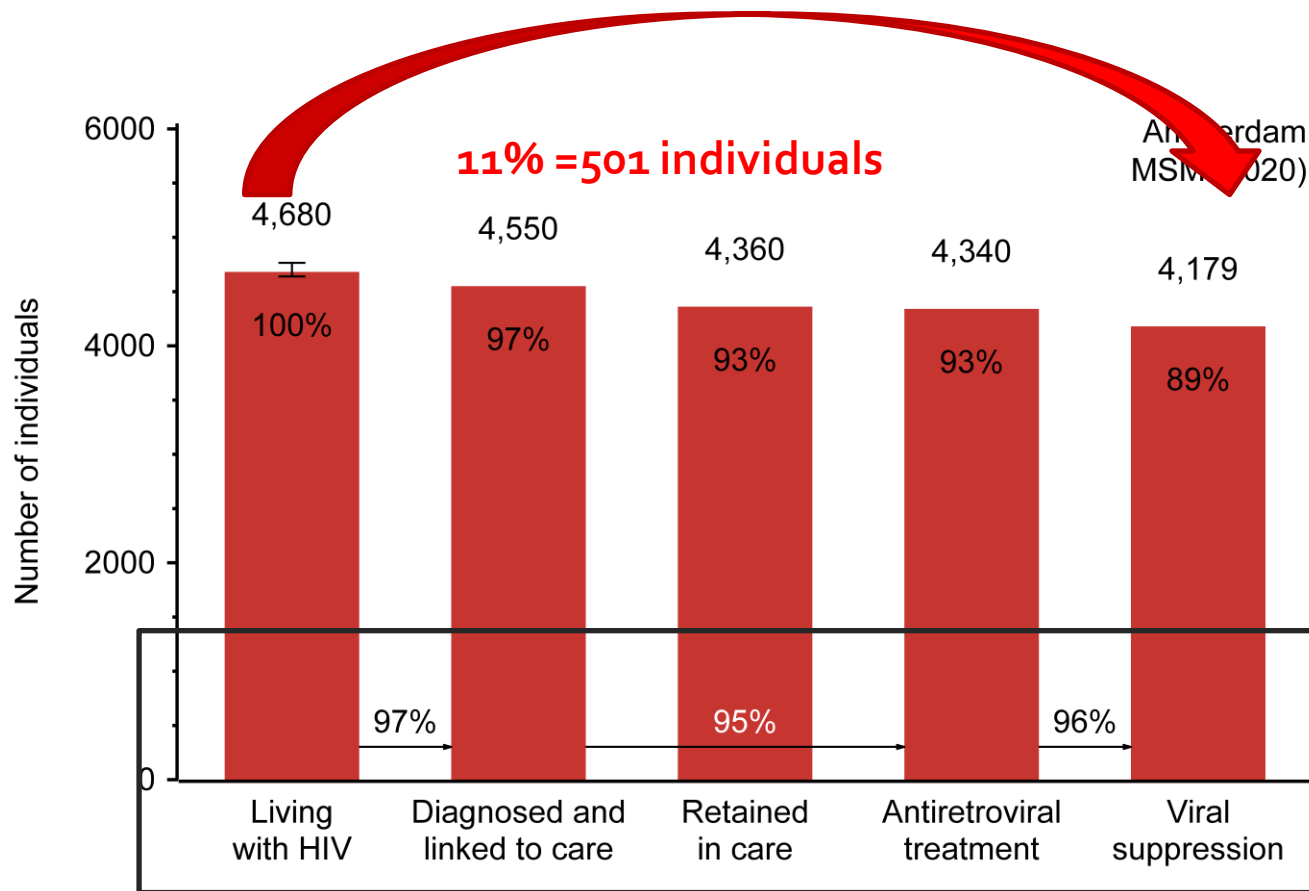


# Continuum of Care, Amsterdam, 2020





# Continuum of Care for MSM, Amsterdam, 2020



# HIV TRANSMISSION ELIMINATION AMSTERDAM

## JOINING FORCES FOR A FUTURE WITH NO NEW HIV INFECTIONS

A unique collaboration

[Read more](#)

Started in 2013



H-TEAM



A platform for innovation



All of our partners within the H-TEAM are crucial to achieving our goal



SOAIDS  
Nederland



DC Klinieken





**Innovation 1: Increasing awareness for acute HIV, rapid diagnostics, and linkage to care <24 hours**





[www.hebikhiv.nl](http://www.hebikhiv.nl) = [www.doihaveHIV.nl](http://www.doihaveHIV.nl)

Knowledge and recognition of symptoms:

HEB IK HIV?

Early HIV infection

Recognizing the symptoms →

Fast testing

And immediate treatment →

Living with HIV

Start the Symptom Checker

Start the Symptom Checker

Nederlands

man lot man

HIV?

You indicated that you (may) have had unprotected anal sex and that you have symptoms that could point to an early HIV infection.

It is important that you get tested for HIV as soon as possible. Call a GGD near you and make an appointment for an acute HIV consultation. Tell them the Symptom Checker at hebikhiv.nl has referred you. Print out the referral letter below, or save it on your phone, and take it with you to the appointment.

Download the referral letter

How many sexual partners have you had in the past six months?

5

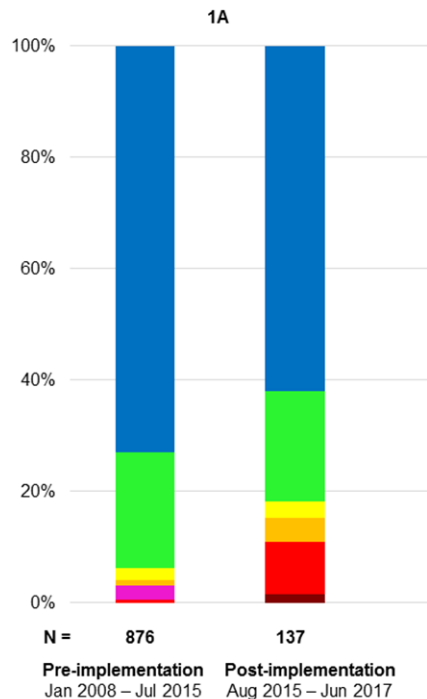
Have you had gonorrhea in the anus or urethra (penis) in the past six months?

Yes

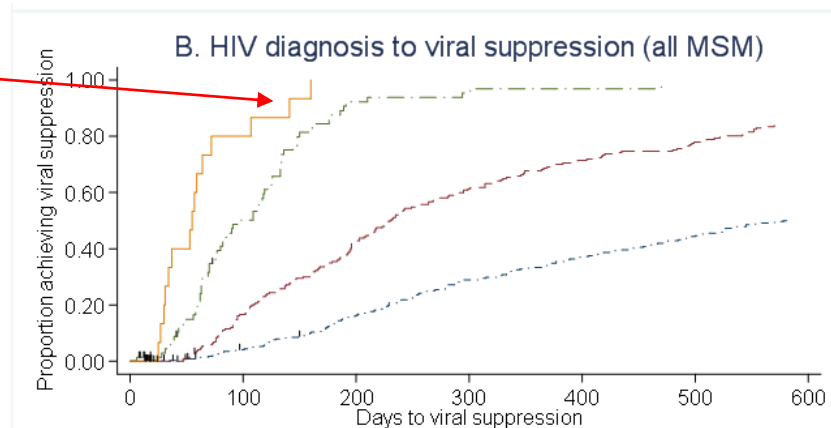
Have you had penetrative sex in your anus without the use of a condom, and without having taken PrEP, in the last 3 months? If your sexual partner is HIV-positive and has an undetectable viral load, you can fill in 'No' here, because this partner cannot give you hiv.



# Outcomes



Acute  
HIV  
routing



Dark red: Fiebig 1, Blue, fiebig 5

Dijkstra et al, CID 2020

Orange: participants to acute HIV trajectory

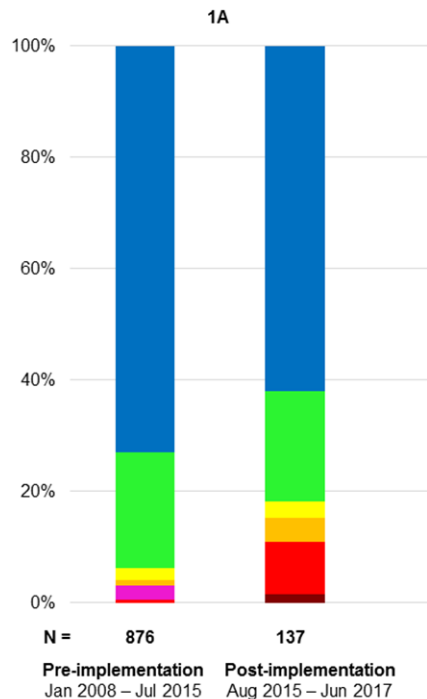
Green:

Purple:

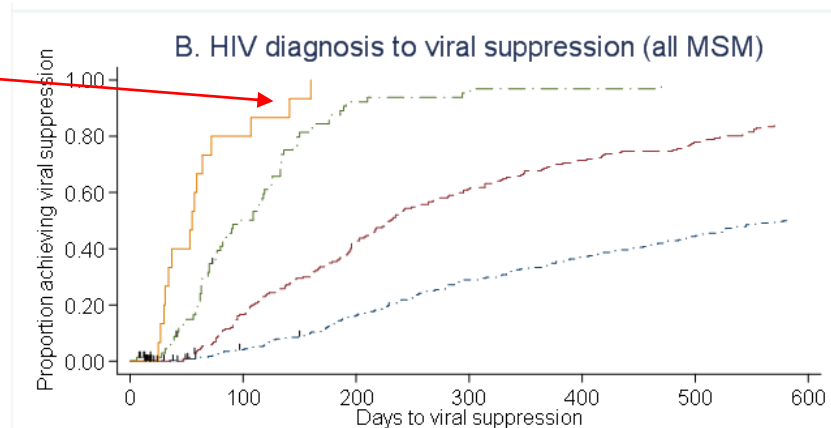
Blue:



# Outcomes



Acute  
HIV  
routing



Dark red: Fiebig 1, Blue, fiebig 5

Dijkstra et al, CID 2020

Orange: participants to acute hiv trajectory

Green: start cART for all new HIV

Purple: start cART at CD4 < 500 or acute/recent HIV

Blue: start cART at CD4 < 500

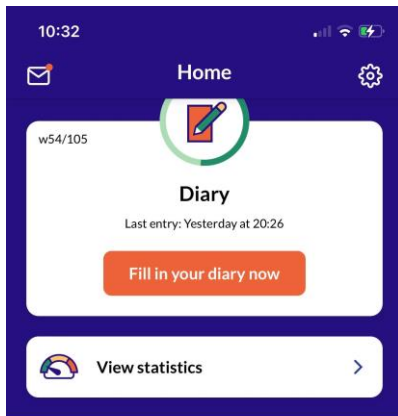


## Innovation 2: online PrEP provision in the ezi-PrEP project





# Randomized controlled non-inferiority trial



## Overview of appointments and study activities

1 September



Today



10 October

11:00



Online PrEP

PrEP in Clinic

3-monthly  
HIV/STI  
testing

6-monthly  
HIV/STI  
testing

6-monthly  
HIV/STI  
testing

3-monthly  
HIV/STI  
testing



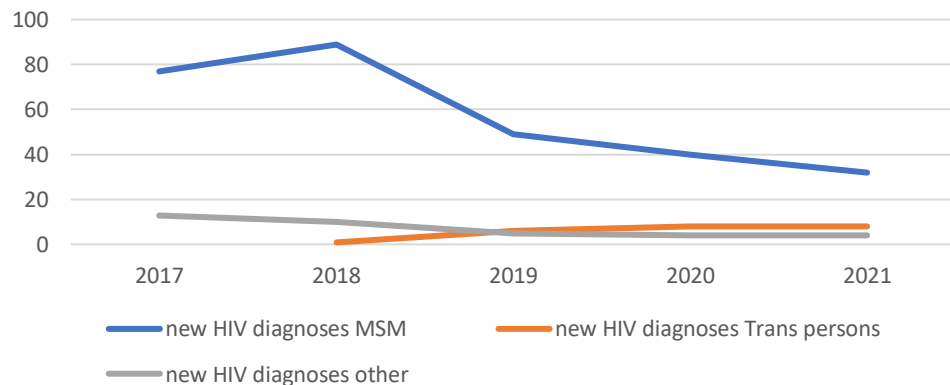
## Innovation 3: Reaching out to the trans gender population



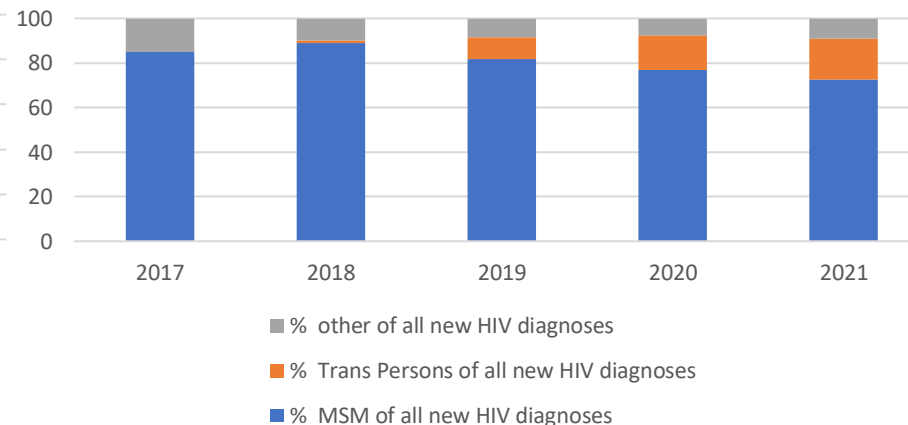


# HIV Diagnoses at the Center for Sexual Health in Amsterdam: focus from MSM to Trans persons

New HIV diagnoses Center Sexual Health Amsterdam, 2017-2021



Proportions of new diagnoses in MSM and trans persons





## Co-led Clinic:

### Services:

- Hormone Support
- Sexual Health Services
- Psychosocial Support

### Provided for:

People from the trans and gender diverse community who experience barriers to access regular care

- Asylum seeker/ Undocumented status
- Homelessness
- Active as sex worker
- Migrant background



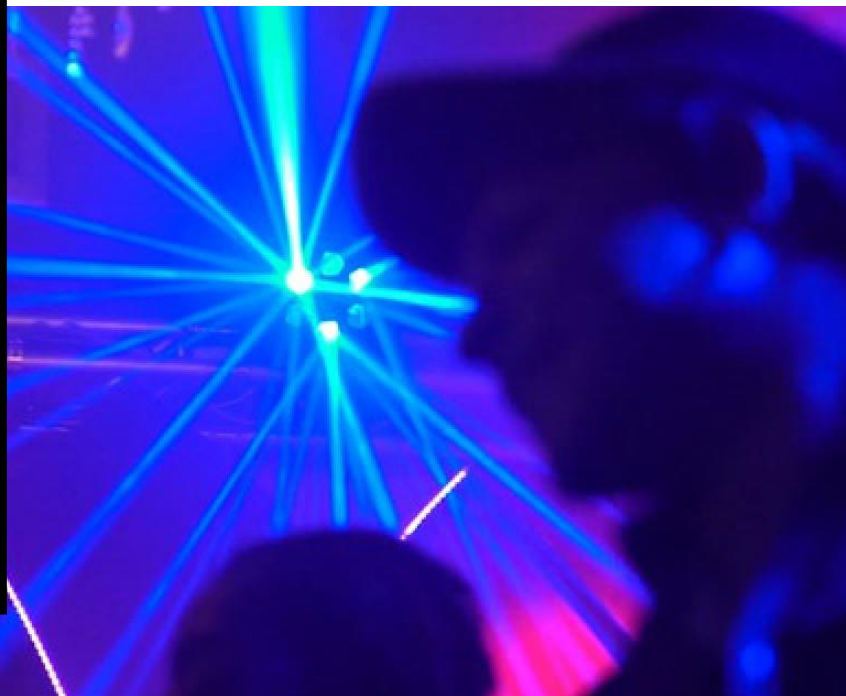




**Innovation 4: Information meetings for  
LGBTIQ+ newcomers in a gay club in  
Amsterdam**



# Meetings for LGBTQI+ newcomers: “Sexy Side of the Netherlands”





## Innovation in hepatitis C field

# A randomized trial to evaluate interventions aimed at reducing risk of HCV reinfection in MSM: the ICECREAM study

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## Introduction

Despite high uptake of direct acting antivirals and declining rates of primary hepatitis C virus (HCV) infection among men who have sex with men (MSM), reinfection rates are still high. Modelling data indicate that a reduction in risk behaviour is needed to eliminate HCV infections. There is then a need for effective interventions aimed at reducing risk of HCV reinfection in MSM.

## Description

### Study design

The Interventions to Curb hEpatitis C Reinfections Among MSM (ICECREAM) study is a multi-centre, 3-arm, randomized, pre-/post-intervention comparison trial evaluating the effect of interventions on HCV risk behaviour (Figure 1):

1. Tailored, online behavioural intervention.
2. Home-based self-sampling for HCV RNA testing.
3. Interventions 1 and 2 combined.

### Study population

- MSM (with or without HIV) with previous HCV infection.
- Currently in care at an HIV treatment centre or visiting a sexual health centre in the Netherlands or France.

### Primary endpoint

- Proportion at risk of HCV infection (as determined by the HCV-MOSAIC risk score  $\geq 2.0$  (Newsom et al, Euro Surveill 2017), which is compared between pre- and post-intervention periods, within each arm.

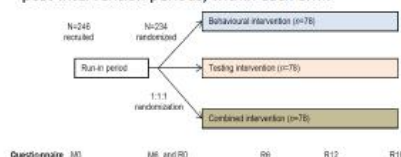


Figure 1. Scheme of the ICECREAM study design.

## Interventions

### Home-based self-sampling testing intervention

This intervention consists of a patient-initiated, home-based HCV self-sampling test service that is delivered in addition to routine care. The intervention offers:

- 4 free-of-charge self-sampling HCV RNA test kits.
- Home-based HCV testing using self-sampled dried blood spots (DBS).

Sampling kits are given to participants, along with paper instructions how to use the self-sampling test and package materials on how to return self-collected DBS samples (Image 1). Participants receive test results via secured email and are offered linkage to care, if needed.



Image 1. ICECREAM self-sampling kit.

## Lessons learned and recommendations

- By October 2022, 109 MSM were included.
- Including a control comparator arm was deemed unappealing. Hence, we opted for a 6-month run-in period instead.
- This trial could contribute to reducing incident re-infections and achieving HCV micro-elimination.
- Interventions developed may help in offering information on prevention or easing access to HCV RNA testing.

### Behavioural intervention

This web-based, tailored, behavioural intervention is structured using the principles of the Information-Motivation-Behavioural Skills (IMB) model for behavioural change and is a modified version of the e-health counselling intervention embedded in the Swiss HCVfree trial (Braun et al, CID 2021).

### Content summary:

- Module 1: focusses on self-reflection and exploring the intrinsic motivation of participants using filmed role models.
- Module 2: focusses on increasing HCV-related knowledge.
- Module 3: identifies the necessary steps to achieve behavioural goals, leading to a personalized risk reduction plan.
- Module 4: focusses on evaluating the risk reduction plan (Figure 2).

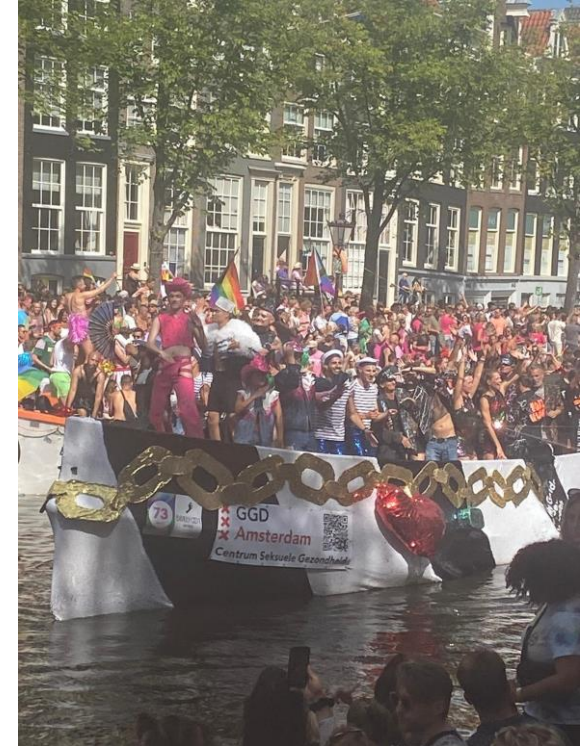


Figure 2. Screenshots from the behavioural intervention.

# Acknowledgements

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H-TEAM

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Lange



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