Montreal City Case Study

Alexandra de Pokomandy, MDCM MSc
McGill University Health Centre
HIV Cascade of Care 2020, Montreal

• Québec HIV Cohort
  • All people living with HIV who
    • received care at one of the participating clinics,
    • had at least two HIV viral loads × 2000
  • In 2020 – data includes 4 large clinics in Montreal
    • N >10,000 over 20 years
    • We measured HIV cascade of care for people in care
HIV Cascade of Care 2020, Montreal Québec HIV Cohort – people in care

<table>
<thead>
<tr>
<th>In Care in 2020</th>
<th>On ART % (n)</th>
<th>Virologically suppressed (&lt; 200 copies/ml) % (n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All</td>
<td>5706</td>
<td>99.6% (5686)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>97.3% (5534)</td>
</tr>
<tr>
<td>Men</td>
<td>4750</td>
<td>99.7% (4738)</td>
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<tr>
<td></td>
<td></td>
<td>97.6% (4624)</td>
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<tr>
<td>Women</td>
<td>950</td>
<td>99.2% (942)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>96.1% (905)</td>
</tr>
<tr>
<td>Trans</td>
<td>6</td>
<td>100% (6)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>83% (5)</td>
</tr>
</tbody>
</table>

HIV Cascade of Care 2020, Montreal
Specific populations

<table>
<thead>
<tr>
<th></th>
<th>Knowledge of HIV infection</th>
<th>On ART</th>
<th>Virologically suppressed (&lt; 200 copies/ml)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men who have sex with men</td>
<td>100%</td>
<td>97.6%</td>
<td>96.6%</td>
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<tr>
<td>(Engage study, N=1179, 2020-2021)</td>
<td></td>
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<tr>
<td>Injection drug users</td>
<td>97.0%</td>
<td>100%</td>
<td></td>
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<tr>
<td>(SurUDI, N=301, 2019)</td>
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</tr>
</tbody>
</table>

Source: Lambert G. Portrait épidémiologique de l’infection par le virus de l’immunodéficience humaine, région de Montréal, 2010-2020, Faits saillants. Direction régionale de santé publique de Montréal du CIUSSS du Centre-Sud-de-l’Île-de-Montréal. 2022
Health is a fundamental human right

https://www.who.int/health-topics/health-equity

- Equity - absence of unfair, avoidable or remediable differences among groups of people
- Discrimination contributes to worsening living conditions
- Discrimination often embedded in institutions/systems
- Health equity is when everyone can attain their full potential for health & well-being
Actions needed to achieve equity

https://www.who.int/health-topics/health-equity

• Knowledge - Monitoring - Analysis
  • Data disaggregated by age, sex, gender, education, income, disability and other factors
  • Findings should be used to design responses
    • For improved equity
    • For ongoing monitoring of health inequalities
HIV Cascade of Care 2017, Manitoba Equity analysis

- 703 participants from a clinical cohort of people living with HIV in Manitoba
- Equiplots by ethnicity, immigration history, injection drug use, living area

Learning Health System

- Use of existing data to allow continuous and rapid improvement in clinical care
- Stakeholder involvement

Figure of the learning health system cycle.
Source: [http://www.learninghealthcareproject.org](http://www.learninghealthcareproject.org)
Using the Quebec HIV Cohort as a Learning Health System

- To improve HIV Care Cascade (PIHVOT Grant, ViiV)
- To improve cancer prevention (CIHR Grant)
  - Data update every 6 mths, continuous quality improvement
  - Examine results and codesign solutions as a team of stakeholders (community-partners, clinicians, researchers, decision makers, knowledge users)
  - Repeat to examine impact of change

HIV CARE CONTINUUM:
- Diagnosed with HIV
- Approved HIV medical care
- Linked to care
- Retained in care
- Achieved and maintained viral suppression
- Health and wellbeing

The steps that people with HIV take from diagnosis to achieving and maintaining viral suppression.
Equity in HIV testing & linkage to care

• Applying the learning health system beyond the HIV clinics - primary care, community organizations,…
• Applying person-centred approach to testing and care
• Reducing stigma / systemic discrimination
• Working together, listening, innovating
Montreal Sans Sida – Fast-track cities

Areas of strategic intervention

1. Reduce discrimination and stigma through communication
2. Eradicate prejudice caused by criminal law enforcements
3. Improve living conditions of vulnerable communities
4. Implement accessible services adapted to individual needs

Patient-Centered Care

- Full transparency & fast delivery of information
- Mission & values aligned with patient goals
- Care is collaborative, coordinated, accessible
- Physical comfort & emotional well-being are top priorities
- Family welcome in care setting
- Patient & family always included in decisions
- Patient & family viewpoints respected & valued

NEJM Catalyst (catalyst.nejm.org) © Massachusetts Medical Society
In summary, prioritizing equity for HIV prevention and care requires:

- Data collection/analyses that considers social determinants of health and other factors of equity
- Continuous monitoring of health outcomes
- Codesign of solutions as teams of community, clinicians, decision makers, knowledge users…
- Collaboration, communication
- Person-centred approaches, adapted to health care context, multiple strategies
- Reduction of stigma and discrimination
Thank you!

Acknowledgements
We thank the Quebec HIV Cohort participants and Research Team

https://www.mtl.org/en/experience/where-see-fall-colours-around-montreal