

APACC 2022

ASIA-PACIFIC AIDS
& CO-INFECTIONS
CONFERENCE

VIRTUAL
CONFERENCE



Program Book



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Dear APACC Participant,

We would like to warmly welcome you to the **Asia-Pacific AIDS & Co-Infections Conference (APACC) 2022**.

COVID-19 has disrupted so many of our HIV and co-infection clinical services, but it has also created exciting new opportunities for HIV and co-infection research, programs, and services. APACC provides an opportunity to shine a light on cutting-edge clinical, basic science, implementation science, and policy research related to HIV and co-infections in the Asia-Pacific region. There is quite a lot that is new this year, including important research on integration of non-communicable diseases and HIV services, digital innovations to increase STD testing, interventions to improve mental health, and much more.

So put down that mask for a few minutes, tune out the background noise, and join us. Feel free to ping us within or outside of the meeting. We are eager to iteratively improve the conference and build out this important conference.

Thank you for joining us!

All best,

Nittaya, Reena, and Joe
on behalf of the APACC Organizing Committee

Program Chairs



**Nittaya Phanuphak,
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Institute of HIV Research
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Thailand



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**Joseph Tucker,
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Organizing Committee



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Practical Information

Abstracts

Accepted abstracts are published in *Reviews in Antiviral Therapy & Infectious Diseases, Volume 2022_5*. The digital abstract book can be downloaded under the **My Profile** section in the APACC Virtual Platform.

APACC 2022 Virtual Platform

APACC 2022 will be hosted on <https://apacc2022.live/>

All registered participants will be provided with personal credentials consisting of an **email address** and a **PIN code** to access the virtual platform during the event dates and 3 weeks following the closure of the event.

If you do not receive the information before the start of APACC 2022, please contact the Conference Secretariat at info@amededu.com.

Conference Secretariat

The conference organizers can be contacted for all questions concerning the logistics of the event. You can submit technical inquiries to the **Information** or **Help Desk** on the virtual platform or contact us at info@amededu.com for program-related questions during the event hours.

Certificate of Attendance

A certificate of attendance will be sent by e-mail once you complete the post-conference survey.

CME Accreditation

APACC 2022 is accredited by the Hong Kong Academy of Medicine, the Infectious Disease Association of Thailand, the European Accreditation Council for Continuing Medical Education, and the Taiwan AIDS Society.

To claim the CME points, members of the societies must log on to the virtual congress portal and attend the full sessions. Additional information such as membership number or license number may be required after the event.

Feedback

Your feedback is very valuable to us and enables us to further improve this conference. An electronic session survey form will be available on your screen at the end of each session. A post-event survey will be sent by email at the end of the conference. A Certificate of Attendance will be sent by e-mail once you complete the post-event survey.

Posters

Posters are accessible in the **Poster Area** on the virtual platform. Participants can leave questions or comments on a poster. Presenting authors can view and reply to the questions. Posters can be saved and downloaded from the **My Profile** section.

In addition to viewing you will have the option of **voting for your 10 favourite posters**. The poster with the most votes will receive a complimentary registration for APACC 2023.

Any posters that are under the AIDS2022 Embargo Policy are not available for download. No data or key takeaways from this abstract may be saved or shared until the embargo is lifted. We ask that all attendees of APACC 2022 comply with this policy.

Presentations and Webcasts

Recordings of all sessions, e-posters, and on-demand symposia will remain accessible to all registrants on the APACC 2022 virtual platform until **7 July**.

ame Materials provided with the author's permission will be moved to AcademicMedicalEducation.com after 7 July.

Presenters & Session Chairs

Presenters and session chairs will receive a separate set of login details for the session(s) they are involved in. Please log on at least 15 minutes before the session time.

This meeting has been **CME accredited** by the **Hong Kong Academy of Medicine (HKAM)** up to **12 credits**

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Thursday, 16 June 2022

All times indicated in the program are in Bangkok / Indochina Time (ICT)

Plenary Session 1: Opening Session

Chairs: Nittaya Phanuphak, Reena Rajasuriar, & Joseph Tucker

- 13:00 **Opening of the Conference**
Nittaya Phanuphak, MD, PhD
 Institute of HIV Research and Innovation, Thailand
Reena Rajasuriar, MPharm, PhD
 University of Malaya, Malaysia
Joseph Tucker, MD, PhD, AM
 UNC Chapel Hill, United States
- 13:10 **Aging Patients: Immune Activation in Elderly People Living With HIV**
Peter Hunt, MD
 University of California San Francisco, United States
- 13:25 **COVID-19 in People Living with HIV: Social Inequality and COVID-19**
Adeeba Kamarulzaman, MBBS, FRACP
 University of Malaya, Malaysia
- 13:40 **Recent Advances in the Treatment of Tuberculosis: Shorter Regimens for Drug-Susceptible and Resistant TB**
Nicholas Paton, MD, FRCP
 National University of Singapore, Singapore

13:55 Panel Discussion

14:15 Tea Break

14:30 Industry-Sponsored Symposium 1

15:15 Tea Break

16:30 Tea Break

PA-1: The Aging Patient		PA-2: Abstract-Driven Presentations: Coinfections & STIs	
15:30-16:30	<i>Reena Rajasuriar & Patrick Li</i>	15:30-16:30	<i>Chairs: Nicholas Paton & Kasha Priya Singh</i>
15:30	Neuro Cognitive Complications of Aging - The Clinical Perspective Grace Chung-Yan Lui, MBChB (Hons), FHKCP, FHKAM The Chinese University of Hong Kong, Hong Kong	15:37	Development of Interferon-Gamma Release Assays for Diagnosing Latent Talaromycosis Helen Xu Duke University, United States 1
15:50	Neuro Cognitive Complications of Aging - The Social Perspective Andrew Tan Tze Tho Kuala Lumpur AIDS Support Services Society (KLASS), Malaysia	15:44	High sexually transmitted infection prevalence/incidence among new, current, and non-users of pre-exposure prophylaxis and HIV-positive men who have sex with men and transgender women attending key population-led clinics in Thailand Narukjaporn Thammajaruk Institute of HIV Research and Innovation, Thailand 2
16:10	Discussion: Impact of Aging on Quality of Life	15:51	Intensified Screening for Mycobacterial Infections Using Gen-Xpert Directly in Blood and Mycobacterial Culture in Hospitalized Patients With Advanced HIV Diseases in Vietnam Dieu Nguyen Oxford University Clinical Research Unit, Viet Nam 3



Thursday, 16 June 2022

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15:58	Pre-treatment HCV RNA testing among people living with HIV co-infected with HCV in the Asia-Pacific region Dhanushi Rupasinghe The Kirby Institute, UNSW Sydney, NSW, Australia	4
16:03	Effects of HIV-integrated TB interventions on Care Continuum Outcomes for Active TB: A Systematic Review and Meta-analysis. Gifty Marley University Of North Carolina Chapel Hill-China Project, China	5
16:10	Impact of COVID-19 lockdown on testing for and diagnoses of sexually transmitted infections in Bangkok, Thailand Napon Pungpapong Winchester College, United Kingdom	6
16:17	Live Q&A	

Capacity-Building Session 1 - For Us, and By Us: Crowdfunding and Public Engagement in Health Research

Chair: Rayner Kay Jin Tan

16:45	Introduction Rayner Kay Jin Tan, PhD, BSocSci University of North Carolina Project-China, Guangzhou, China
16:50	Systematic Review and Crowdfunding Practical Guide Eneyi Kpokiri, PhD London School of Hygiene and Tropical Medicine, London, United Kingdom
17:00	What Makes a Successful Online Campaign? Rayner Kay Jin Tan, PhD, BSocSci University of North Carolina Project-China, Guangzhou, China
17:10	Harnessing Online and Offline Methods for Crowdfunding in Thailand Teerawat Wiwatpanit, PhD National Center for Genetic Engineering and Biotechnology, Thailand

17:20 **Panel Discussion**

17:45 End of Day 1



Friday, 17 June 2022

All times indicated in the program are in Bangkok / Indochina Time (ICT)

Capacity-Building Session 2 - Maintaining a Focus on HIV and STIs in the Era of COVID-19 – Stories and Lessons from the Pacific Region

Chair: *Kasha Priya Singh*

- 12:00 **Introduction**
Kasha Priya Singh, MBBS, MPH, FRACP
The Peter Doherty Institute for Infection and Immunity, Australia
- 12:05 **Workforce Challenges Over the Past 2 Years, Highlighted with Examples**
Scott Mc Grill
Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM), Australia
- 12:15 **Lessons Learnt and Ways Forward – Building a Resilient Health Workforce**
Renata Ram
UNAIDS, UCO Fiji, Republic of Fiji
- 12:25 **Panel Discussion**
Renata Ram
UNAIDS, UCO Fiji, Republic of Fiji
Scott Mc Grill
Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM), Australia
Dashika Balak, MD
Fiji Ministry of Health, Republic of Fiji
Eleanor MacMorran, MD
Maluk Timor, East Timor
Isikeli Vulavou
Pacific Sexual and Gender Diversity Network, Republic of Fiji
Minado Paul, MD
Ministry of Health, Republic of Vanuatu

12:45 Tea Break

Plenary Session 2: PrEP in Key Populations

Chairs: *Iskandar Azwa & Danvic Rosadiño*

- 13:00 **Differentiated & Simplified PrEP for HIV Prevention**
Heather-Marie Schmidt, BMedSc (Hon), MPH, PhD
UNAIDS Asia Pacific Regional Support Team and the World Health Organisation, Thailand
- 13:20 **Implementation of PrEP - Vietnam's Experience with Self-Testing**
Hong Anh Doan, MSc
PATH, Vietnam

13:40 **Panel Discussion**

14:00 Tea Break

14:15 **Industry-Sponsored Symposium 2**

15:00 Tea Break



Friday, 17 June 2022

All times indicated in the program are in Bangkok / Indochina Time (ICT)

PA-3: Opportunistic Infections		PA-4: Abstract-Driven Presentations: New Drug Deliveries	
15:15-16:15	<i>Chairs: Nathan Ford & Thuy Le</i>	15:30-16:30	<i>Chair: Mark Boyd</i>
15:15	Burden of Systemic Mycoses in Advanced HIV Disease in Vietnam Vu Quoc Dat, MD, PhD Hanoi Medical University, Vietnam	15:15	Weight Change When Discontinuing Integrase Strand Transfer Inhibitors in People Living With HIV Warittha Tieosapjaroen Monash University, Australia
15:35	Talaromycosis - A Leading Cause of Death in Patients with Advanced HIV Disease in Southern China Hao Liang, PhD Guangxi Medical University, China	15:22	Rapid tenofovir-lamivudine-dolutegravir transition in Papua New Guinea: A virtual approach to antiretroviral prescriber refresher trainings during a global pandemic Poruan Temu FHI360, Papua New Guinea
15:55	Panel Discussion Vu Quoc Dat, MD, PhD Hanoi Medical University, Vietnam Hao Liang, PhD Guangxi Medical University, China Bharat Bhushan Rewari, MBBS, MD, FRCP, FICP, MPH World Health Organisation, Regional Office for South-East Asia, India Fujie Zhang, MD, PhD Beijing Ditan Hospital, Capital Medical University, China Ploenchan Chetchotisakd, MD Khon Kaen University, Thailand	15:29	Asian Phase 3/3b Experience With Long-Acting Cabotegravir and Rilpivirine: Efficacy, Safety, and Virologic Outcomes Through Week 96 Shinichi Oka National Center For Global Health And Medicine, Japan
		15:36	Higher CD4/CD8 ratio recovery observed among people living with HIV started with integrase strand transfer inhibitors Win Min Han The Kirby Institute, UNSW Sydney, Australia
		15:43	Real-world efficacy of INSTI-containing antiretroviral therapy in treatment-naïve people living with HIV Yayoi Nakamura National Center For Global Health And Medicine, Japan
		15:50	Implementation strategies to enable initiation of same-day antiretroviral therapy by lay providers in two community based organizations in Bangkok, Thailand Rena Janamnuaysook Institute of HIV Research and Innovation, Thailand
		15:57	Live Q&A

16:15 Tea Break

16:30 Parallel Guided Poster Tours 1 & 2

Parallel Guided Poster Tour 1: Digital Health		Parallel Guided Poster Tour 2: NCDs & comorbidities	
16:30-17:05	<i>Chairs: Phillip Chan & Weiming Tang</i>	16:30-17:05	<i>Chairs: Shinichi Oka</i>
16:30	Effectiveness of sexual health influencers identified by an ensemble machine learning model in promoting secondary distribution of HIV self-testing among men who have sex with men in China: a quasi-experimental trial Ying Lu UNC Project-China, China	16:30	Prevalence of and factors associated with diabetes mellitus among people living with HIV in Vietnam Moeko Nagai Aids Clinical Center, National Center For Global Health And Medicine, Japan



Program

16:35	The International Sexual Health and Reproductive Health Survey (I-SHARE-1): A Multi-Country Analysis of Sexual Behaviors and HIV/STI Prevention Access Prior to and During the Initial COVID-19 Wave in 30 Countries Rayner Kay Jin Tan University of North Carolina Project-China, China	20	16:35	Prevalence and severity of Nonalcoholic Fatty Liver Disease in Obese and Non-Obese Patients with and without HIV infection in Asia Thanathip Wichiansan The Hiv Netherlands Australia Thailand Research Collaboration (hiv-nat), Thailand	24
16:40	Digital crowdsourced intervention to enhance viral hepatitis testing in primary care: A randomized controlled trial in China. Gifty Marley University Of North Carolina Chapel Hill-china Project, China	21	16:40	A Prospective Immunogenicity Study of a Quadrivalent Influenza Vaccine among HIV-infected Patients with Different Levels of CD4 Cell Count Suparek Satanon Department Of Medicine, Faculty Of Medicine Ramathibodi Hospital, Mahidol University, Thailand	25
16:45	Social network strategy to promote HIV testing and linkage to HIV services among adolescents in Thailand. Nantika Paiboon Department Of Pediatrics, Faculty Of Medicine, Chulalongkorn University, Thailand	22	16:45	Preliminary findings from a pre-implementation study on integrating screening for HIV-associated Neurocognitive Disorders (HAND) into routine HIV care in Malaysia Pui Li Wong University Malaya, Malaysia	26

17:05 Tea Break

17:15 Parallel Guided Poster Tours 3 & 4

Parallel Guided Poster Tour 3: Mental Health

Parallel Guided Poster Tour 4: PrEP Services

17:15-17:40 *Chair: Jeremy Ross*

17:15-17:40 *Chair: Fan Yang & Nittaya Phanuphak*

17:15	Assessing the Acceptability and Feasibility of an Integrated Telebehavioral Health System in Primary HIV Care Settings in the Philippines Timothy John Dizon Research Institute For Tropical Medicine, Philippines	27	17:15	PrEP Pop-Up: A targeted community-led approach to convenient PrEP access in Metro Manila Ron Jacob Calumpang HIV & AIDS Support House, Inc. Philippines	31
17:20	Integration of a peer-led depression screening and linkage-to-care intervention among transgender women living with and at risk for HIV at a transgender-led health clinic in Bangkok, Thailand Rena Janamnuysook Institute of HIV Research and Innovation, Thailand	28	17:20	Introduction of gain-framed pre-exposure prophylaxis counseling increased uptake among transgender women at the Tangerine Clinic, Bangkok, Thailand Peevara Srimanus Institute of HIV Research and Innovation, Thailand	32
17:15	Assessing the Acceptability and Feasibility of a Collaborative Care Model for Managing Anxiety and Depression Utilizing HIV Counsellors as Care Managers in HIV Clinics in the Philippines Anna Maureen Dungca-Lorilla Research Institute For Tropical Medicine, Philippines	29	17:15	Potential use of pooled point-of-care HIV-1 viral load to detect HIV infection at PrEP initiation and follow-up visits in key population-led PrEP clinics in Thailand Narukjaporn Thammajaruk Institute of HIV Research and Innovation, Thailand	33
17:15	Assessment demonstrates gaps in services to support mental health of HIV providers and their clients during the COVID-19 pandemic in Vietnam Van Thu Pham FHI 360, Vietnam	30	17:20	Not just about knowledge and money: Most Taiwanese sexual health physicians require standard operating procedure and nonphysician professionals' support to deliver PrEP services Isaac Yen-Hao Chu London School of Hygiene and Tropical Medicine, Department of Public Health, Environments and Society, United Kingdom	34

17:40 End of Day 2



Saturday, 18 June 2022

All times indicated in the program are in Bangkok / Indochina Time (ICT)

PA-5: Mental Health		PA-6: Viral Hepatitis	
13:00-14:00	<i>Chairs: Rossana Ditangco & Jeremy Ross</i>	13:00-14:00	<i>Chair: Gail Matthews</i>
13:00	Addressing Suicide Brian Hall, PhD NYU Shanghai, China	13:00	Epidemiology of Hepatitis Delta in the Asian Region – Do We Need Screening & What Are the Treatment Options? Chien-Ching Hung, MD, PhD National Taiwan University Hospital, Taiwan
13:20	Mental Health in Young Adults Wipaporn Natalie Songtaweasin, MBBS, DTMH Chulalongkorn University, Thailand	13:20	Practical Implementation of Elimination Plans (HBV/HCV) - the Impact of Testing in Primary Care Setting William Chi Wai Wong, MB ChB, MD, MA, MPH, DFFP, DCH, DHCL, FRCGP, FRACGP, MFTM, FCPS, honMFPH The University of Hong Kong, Hong Kong
13:40	Panel Discussion	13:40	Discussion: Addressing Access Issues for Hepatitis Care
14:00 Tea Break			
Capacity-Building Session 3 - Implementation Science: Linking Research to Policy <i>Chair: Wipaporn Natalie Songtaweasin</i>			
14:15	Introduction Wipaporn Natalie Songtaweasin, MBBS, DTMH Chulalongkorn University, Thailand		
14:20	Global Perspective Meg Doherty, MD, PhD WHO, Switzerland		
14:30	Donor / Implementer Perspective Pimpanitta Saenyakul, PhD, MPH, BSN-RN USAID Regional Development Mission for Asia (RDMA), Thailand		
14:40	Panel Discussion Meg Doherty, MD, PhD WHO, Switzerland Pimpanitta Saenyakul, PhD, MPH, BSN-RN USAID Regional Development Mission for Asia (RDMA), Thailand Adeeba Kamarulzaman, MBBS, FRACP University of Malaya, Malaysia		
15:15 Tea Break			
PA-7: New ARVs/Formulations/Strategies		PA-8: Abstract Driven Presentations: Substance Use	
15:30-16:30	<i>Chairs: Nagalingeswaran Kumarasamy & Linghua Li</i>	15:30-16:30	<i>Chairs: Doan Thanh Tung & Rayner Kay Jin Tan</i>
15:30	New Antiretroviral Drugs/Formulations for the Treatment of PLWH and for Prevention of HIV Jennifer Hoy, AM, FRACP, FAHMS Monash University, Australia	15:30	Differences in methamphetamine use characteristics among people with opioid use disorders under methadone treatment in the two big cities in Vietnam: Preliminary analysis from the STAR-OM study 13 Nguyen Thu Trang Hanoi Medical University, United States
15:50	New Development of Therapeutics for COVID Treatment Steve McGloughlin, Bsc, BMed, FCICM, FRACP, MPH&TM, PGDipEcho National COVID-19 Clinical Evidence Taskforce, Australia	15:37	Recreational drugs are associated with viral load blips and lower adherence in a prospective cohort of Thai people with acute HIV infection 14 Camilla Muccini SEARCH, Institute Of Hiv Research And Innovation, Thailand
16:10	Panel Discussion		



Saturday, 18 June 2022

All times indicated in the program are in Bangkok / Indochina Time (ICT)

15:42	Homoprejudiced Violence Experience, Depression, and High-Risk Sex Behavior Among MSM in China: A Mediation Analysis Xumeng Yan UNC Project-China, China	15
15:49	Linking Female Entertainment Workers in Cambodia to HIV, Sexual and Reproductive Health, and Gender-Based Violence Services: The Mobile Link Randomized Controlled Trial Siyun Yi National University Of Singapore, Singapore	16
15:56	Facilitators and barriers to the integration of depression and substance use screening and linkage to care among people living with HIV in a tertiary-care hospital in Malaysia: A qualitative study. Meng Li Chong University Of Malaya Medical Centre, Malaysia	17
16:03	Observed increase in methamphetamine use risk among Vietnamese methadone patients between 2018 and 2021 Thuy Dao Hanoi Medical University, Viet Nam	18
16:10	Live Q&A	

16:30 Tea Break

Plenary Session 3: Digital Health & Health Innovation

Chairs: Yu Fei & Cao Bolin

16:45	Digital Health Ecosystems and Its Implications for HIV and Other Co-Infections Lim Sin How, MSHCA, PhD University of Malaya, Malaysia
17:05	Social innovations in Health, Especially with Implications for HIV and Other Co-Infections Beatrice Halpaap, Pharm D, MPH Expert advisor TDR, Switzerland

17:25 **Discussion: Regional Implementation of Health Innovations**

Closing of APACC 2022

17:45	Closing Words Nittaya Phanuphak, MD, PhD Institute of HIV Research and Innovation, Thailand Reena Rajasuriar, MPharm, PhD University of Malaya, Malaysia Joseph Tucker, MD, PhD, AM UNC Chapel Hill, United States
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18:00 End of Day 3



APACC 2022 is offering 3 capacity-building sessions. The aim of these interactive sessions is to strengthen early-stage investigators' skills in using digital and/or online research methods, to discuss how to manage clinical trials, as well as the strategies for writing and submitting grant proposals. Each session is facilitated and moderated by experts in the field and the sessions are designed to be interactive and engaging.

For Us and By Us: Crowdfunding and Public Engagement in Health Research

Thursday 16 June, 16:45 ICT (UTC+7)

Crowdfunding is the process of engaging large groups of people who make monetary and non-monetary contributions to a given cause or programme. This session will be **targeted towards all early-career researchers**, and especially community-based researchers, who are looking to engage in crowdfunding to conduct health research. The session will provide an overview of **how crowdfunding can be conducted** in diverse settings, and present **case studies** that include community-led projects in low-to-middle income countries (including the Asia-Pacific region) across a range of health areas.



Rayner Kay Jin Tan
University of North Carolina
Project-China,
Guangzhou, China



Joseph Tucker
UNC Chapel Hill,
United States



Eneyi Kpokiri
London School of Hygiene and Tropical Medicine,
United Kingdom



Teerawat Wiwatpanit
National Center for Genetic Engineering and Biotechnology,
Thailand

Maintaining a Focus on HIV and STIs in the Era of COVID-19 – Stories and Lessons from the Pacific Region

Friday 17 June, 12:00 ICT (UTC+7)

The purpose of this session is to explore how the health workforce mitigates challenges such as those presented by COVID-19, focusing on the ongoing provision of HIV and STI services and examining the HIV and sexual health workforce needs in the region. The session will examine how insights from experiences of the Pacific workforce provide lessons for workforce resilience across the region.



Kasha Priya Singh
The Doherty Institute for Infection and Immunity,
Australia



Scott Mc Grill
Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM), Australia



Renata Ram
UNAIDS, UCO Fiji, Republic of Fiji



Dashika Balak
Fiji Ministry of Health, Republic of Fiji



Eleanor MacMorran
Maluk Timor, East Timor



Isikeli Vulavou
Pacific Sexual and Gender Diversity Network, Republic of Fiji

Implementation Science: Linking Research to Policy –the Donor and Implementer Perspective

Saturday 18 June, 14:15 ICT (UTC+7)

This session aims to help **early-stage investigators** see the **links between research, policy, and implementation** and foster early-stage investigators on their understanding of how they can actively **implement research that informs policy** and implementation at national regional and regional levels.



Wipaporn Natalie Songtaweasin
Chulalongkorn University,
Thailand



Pimpanitta Saenyakul
USAID Regional Development Mission for Asia (RDMA),
Thailand



Meg Doherty
WHO, Switzerland



Adeeba Kamarulzaman
University of Malaya,
Malaysia

Virological suppression is
the first step to achieving

HIV + HEALTHY^{1,3}

For your patients living with HIV, make
DOVATO a part of their healthy future.^{1,3}

DOVATO



DURABLE
AND ROBUST^{2,3}



PART OF HEALTHY
LIVING WITH HIV^{1,3}



WITHOUT TDF,
TAF AND ABC⁴

TDF: Tenofovir Disoproxil Fumarate; TAF: Tenofovir Alafenamide; ABC: Abacavir

Dovato is indicated for the treatment of Human Immunodeficiency Virus type 1 (HIV-1) infection in adults with no known or suspected resistance to the integrase inhibitor class, or lamivudine.

Important Safety Information: Dovato is indicated for the treatment of Human Immunodeficiency Virus type 1 (HIV-1) infection in adults with no known or suspected resistance to the integrase inhibitor class, or lamivudine. Contraindications: Hypersensitivity to the active substances or to any of the excipients. Co-administration with medicinal products with narrow therapeutic windows, that are substrates of organic cation transporter (OCT)2, including but not limited to fampridine (also known as dalfampridine). Adverse reactions: Very common: headache, nausea, diarrhoea; Common: depression, anxiety, insomnia, abnormal dreams, dizziness, somnolence, vomiting, flatulence, abdominal pain/discomfort, rash, pruritus, alopecia, arthralgia, muscle disorders (including myalgia), fatigue, creatine phosphokinase (CPK) elevations, alanine aminotransferase (ALT) and/or aspartate aminotransferase (AST) elevations.

Abbreviated prescribing information: Dovato Each film-coated tablet contains 50 mg dolutegravir, 300 mg lamivudine. **Therapeutic indication:** Indicated for the treatment of Human Immunodeficiency Virus type 1 (HIV-1) infection in adults with no known or suspected resistance to the integrase inhibitor class, or lamivudine. **Posology and method of administration:** Therapy should be prescribed by a physician experienced in the management of HIV infection. Oral use. Can be taken with or without food. **Adults:** Dovato one 50 mg/300 mg tablet once daily. A separate preparation of dolutegravir is available where a dose adjustment is indicated due to drug-drug interactions (e.g. rifampicin, carbamazepine, oxcarbazepine, phenytoin, phenobarbital, St. John's wort, etravirine (without boosted protease inhibitors), efavirenz, nevirapine, or tipranavir/ritonavir). In these cases the physician should refer to the individual product information for dolutegravir. **Women of childbearing potential (WOCBP)** should be counselled about the potential risk of neural tube defects with dolutegravir, including consideration of effective contraceptive measures. If a woman plans pregnancy, the benefits and the risks of continuing treatment with Dovato should be discussed with the patient. **Missed doses:** Take Dovato as soon as possible, providing the next dose is not due within 4 hours; if the next dose is due within 4 hours, the patient should not take the missed dose and simply resume the usual dosing schedule. **Elderly:** There are limited data available on the use of Dovato in patients aged 65 years and over. No dose adjustment is necessary. **Renal impairment:** Dovato is not recommended for use in patients with a creatinine clearance <50 mL/min. No dose adjustment is required in patients with mild renal impairment. **Hepatic impairment:** No dosage adjustment is required in patients with mild or moderate hepatic impairment (Child-Pugh grade A or B). No data are available in patients with severe hepatic impairment (Child-Pugh grade C); therefore Dovato should be used with caution in these patients. **Paediatric population:** The safety and efficacy of Dovato in paediatric patients have not been established. **Contraindications:** Hypersensitivity to the active substances or to any of the excipients. Co-administration with medicinal products with narrow therapeutic windows, that are substrates of organic cation transporter (OCT)2, including but not limited to fampridine (also known as dalfampridine). **Warnings & precautions:** **Transmission of HIV:** Precautions to prevent transmission should be taken in accordance with national guidelines. **Hypersensitivity reactions:** Discontinue Dovato and other suspect medicinal products immediately if signs or symptoms of hypersensitivity reactions develop (including, but not limited to, severe rash or rash accompanied by raised liver enzymes, fever, general malaise, fatigue, muscle or joint aches, blisters, oral lesions, conjunctivitis, facial oedema, eosinophilia, angioedema). Monitor clinical status including liver aminotransferases and bilirubin. Delay in stopping treatment with Dovato or other suspect active substances after the onset of hypersensitivity may result in a life-threatening allergic reaction. **Weight and metabolic parameters:** An increase in weight and in levels of blood lipids and glucose may occur during antiretroviral therapy. Monitor blood lipids and glucose reference according to established HIV treatment guidelines. Lipid disorders should be managed as clinically appropriate. **Liver disease:** If Dovato is used in patients co-infected with hepatitis B an additional antiviral is therefore generally needed. If Dovato is discontinued in patients co-infected with hepatitis B virus, periodic monitoring of both liver function tests and markers of HBV replication is recommended, as withdrawal of lamivudine may result in an acute exacerbation of hepatitis. Patients with pre-existing liver dysfunction, should be monitored according to standard practice. If there is evidence of worsening liver disease in such patients, interruption or discontinuation of treatment must be considered. **Immune Reactivation Syndrome:** Any inflammatory symptoms should be evaluated and treatment instituted when necessary. **Mitochondrial dysfunction:** Any child exposed in utero to nucleoside and nucleotide analogues, even HIV-negative children, should have clinical and laboratory follow-up and should be fully investigated for possible mitochondrial dysfunction in case of relevant signs or symptoms. **Osteonecrosis:** Patients should be advised to seek medical advice if they experience joint aches and pain, joint stiffness or difficulty in movement. **Opportunistic infections:** Patients remain under close clinical observation of these associated HIV diseases by physicians. **Drug interactions:** The recommended dose of dolutegravir is 50 mg twice daily when co-administered with rifampicin, carbamazepine, oxcarbazepine, phenytoin, phenobarbital, St. John's wort, etravirine (without boosted protease inhibitors), efavirenz, nevirapine, or tipranavir/ritonavir. Dovato should not be co-administered with polyvalent cation-containing antacids. Polyvalent cation-containing antacids are recommended to be taken 2 hours after or 6 hours before Dovato. When taken with food, Dovato and supplements or multivitamins containing calcium, iron or magnesium can be taken at the same time. If Dovato is administered under fasting conditions, supplements or multivitamins containing calcium, iron or magnesium are recommended to be taken 2 hours after or 6 hours before Dovato. A dose adjustment of metformin should be considered when starting and stopping coadministration of Dovato with metformin, to maintain glycaemic control. The combination of Dovato with cladrifine is not recommended. Dovato should not be taken with any other medicinal product containing dolutegravir, lamivudine or emtricitabine, except where a dose adjustment of dolutegravir is indicated due to drug-drug interactions. **Interactions:** Dolutegravir is eliminated mainly through metabolism by uridine diphosphate glucuronosyl transferase (UGT) 1A1. Dolutegravir is also a substrate of UGT1A3, UGT1A9, CYP3A4, P-glycoprotein (P-gp), and breast cancer resistance protein (BCRP). Co-administration of Dovato and other medicinal products that inhibit UGT1A1, UGT1A3, UGT1A9, CYP3A4, and/or P-gp may, therefore, increase dolutegravir plasma concentration. Medicinal products that induce those enzymes or transporters may decrease dolutegravir plasma concentration and reduce the therapeutic effect of dolutegravir. Lamivudine is cleared renally. Active renal secretion of lamivudine in the urine is mediated through the OCT2 and multidrug and toxin extrusion transporters (MATE1 and MATE2-K). **Pregnancy & lactation:** The safety and efficacy of a dual regimen has not been studied in pregnancy. Dovato use during pregnancy only if the expected benefit justifies the potential risk to the foetus. Do not recommend HIV infected women to breast-feed their infants under any circumstances in order to avoid transmission of HIV. No data on effects on human fertility. **Adverse reactions:** Very common: headache, nausea, diarrhoea; Common: depression, anxiety, insomnia, abnormal dreams, dizziness, somnolence, vomiting, flatulence, abdominal pain/discomfort, rash, pruritus, alopecia, arthralgia, muscle disorders (including myalgia), fatigue, creatine phosphokinase (CPK) elevations, alanine aminotransferase (ALT) and/or aspartate aminotransferase (AST) elevations. **Overdose:** No specific treatment for overdose. Patient should be treated supportively with appropriate monitoring as necessary. Please read the full prescribing information prior to administration. Full prescribing information is available on request from GlaxoSmithKline Ltd, 23/F, Tower 6, The Gateway, 9 Canton Road, Tsimshatsui, Kowloon, Hong Kong. Abbreviated Prescribing Information based on PI version HK052021 GDS02,03/EU20201130. For adverse events reporting, please call GlaxoSmithKline Limited at (852) 3189 8989 (Hong Kong) or (853) 2871 5569 (Macau) or email to HK Adverse Event mailbox: HKAdverseEvent@gsk.com

Please read the full prescribing information prior to administration. Full prescribing information is available on request from GlaxoSmithKline Ltd, 23/F, Tower 6, The Gateway, 9 Canton Road, Tsimshatsui, Kowloon, Hong Kong. Abbreviated Prescribing Information based on PI version HK052021 GDS02,03/EU20201130. For adverse events reporting, please call GlaxoSmithKline Limited at (852) 3189 8989 (Hong Kong) or (853) 2871 5569 (Macau) or email to HK Adverse Event mailbox: HKAdverseEvent@gsk.com

References: 1. Silverman K, Holtyn AF, Rodewald AM, et al. Incentives for viral suppression in people living with HIV: A randomized clinical trial. *AIDS Behav.* 2019;23(9):2337-2346. doi:10.1007/s10461-019-02592-8 2. Cahn P, Sierra Madero J, Arribas JR, et al. Three-year durable efficacy of dolutegravir plus lamivudine in antiretroviral treatment-naïve adults with HIV-1 infection. *AIDS.* 2022;36(1):39-48. doi:10.1097/QAD.0000000000003070 3. Osiyemi O, De Wit S, Ajana F, et al. Efficacy and safety of switching to dolutegravir/lamivudine (DTG/3TC) versus continuing a tenofovir alafenamide-based 3- or 4-drug regimen for maintenance of virologic suppression in adults living with HIV-1: results through week 144 from the phase 3, non-inferiority TANGO randomized trial. *Clin Infect Dis.* 2022;ciac036 and suppl 1-18. doi:10.1093/cid/ciac036 4. Hong Kong Dovato Prescribing Information HK052021 (GDS02,03/EU20201130c)

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Empowering a Healthy Future for People Living with HIV

Thursday 16 June, 14:30-15:15 ICT (UTC+7)

In this symposium, an international expert faculty will discuss the changing needs of People Living with HIV (PLHIV) in achieving healthy living. Prof. Giovanni Guaraldi will introduce the importance of positive aging in PLHIV and how this can be optimised. This will be followed by case-based discussion in which Prof. Tae-Hyong Kim will describe how patients' needs have changed and how switching to an optimised regimen can empower healthy living, with his experience from Korea. In concluding, Dr Michelle Moorhouse and the experts will discuss how this evidence can be put to clinical practice and address key challenges to it.

Giovanni Guaraldi, MD

University of Modena and Reggio Emilia, Italy

Tae-Hyong Kim

Soon Chun Hyang University Hospital, Korea

Michelle Moorhouse

ViiV Healthcare, South Africa

The recording will be accessible to all registrants on the APACC 2022 online platform until 7 July after the premiere.



Ending Asia HIV Pandemic by 2030 – What's The Next Step?

Friday 17 June, 14:15-15:00 ICT (UTC+7)

In recent years, there have been great strides in the fight against HIV and co-infections with HIV. Themed, 'Ending the Asia HIV pandemic by 2030 – what's the next step?', the Gilead Sciences-sponsored symposium aims to share the latest updates on the HIV landscape in Asia. Join our experts as they review the current milestones to the 2030 HIV targets, including the barriers to achieving these targets and strategies to overcome them.

Chien-Ching Hung, MD, PhD

National Taiwan University Hospital, Taiwan

Jun Yong Choi, MD, PhD

Yonsei University College of Medicine, Severance Hospital Seoul, South Korea

Wei Lyu, PhD

Peking Union Medical College Hospital Beijing, ROC

The recording will be accessible to all registrants on the APACC 2022 online platform until 7 July after the premiere.

APACC GILEAD SYMPOSIUM 2022

Ending the Asia HIV pandemic by 2030 – What's the next step?



Join us for this virtual symposium to hear from regional experts, **Professor Chien-Ching Hung**, **Professor Jun Yong Choi** and **Professor Wei Lyu**, as they deep-dive into the challenges in achieving the target of ending the Asia HIV pandemic by 2030 and strategies to overcome them.

Discussions during the session will focus on the current HIV testing policies and approaches, prevention strategies, as well as treatment recommendations for HIV to improve clinical outcomes.

This symposium is intended for healthcare professionals only.

MODERATOR

Professor Chien-Ching Hung

*Director & Professor
Department of Tropical Medicine and Parasitology
National Taiwan University College of Medicine
Taipei*



PANELISTS



Professor Jun Yong Choi

*Division of Infectious Diseases
Department of Internal Medicine
Severance Hospital
Seoul*



Professor Wei Lyu

*Department of Infectious Diseases
Peking Union Medical College Hospital
Beijing*



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