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## EACS Standard of Care for HIV & Coinfections in Europe, 2019

### Introduction

The EACS Policy Working Group organised the first standard of care meeting in 2014, following the EACS Governing Board's decision to organise a biennial meeting on Standard of Care for HIV and Co-infections in Europe. The Policy Working Group came to the conclusion that it was essential for EACS to focus on standard of care as a specific topic, related to its main activity and to also take into consideration stakeholders active in the field, such as WHO, HIV in Europe, ECDC and EATG.

The main direction perceived was that EACS should set standards i.e. benchmarks to define the meaning of "standard of care" in line with its guidelines using its role in training and education.

The result of the Standard of Care for HIV and Co-infections meeting should be to identify areas for quality assessment. Thus, EACS assumes an active role and responsibility in increasing the quality markers of the treatment cascade in clinical care by involving clinicians, community representatives, as well as public health institutional partners from Western, Central and Eastern Europe.

The EACS Policy Working Group also recommended that the standard of care meeting and other policy activities of the Society should focus on the needs of patients and care givers with particular reference to "access to care".

Information on the current European situation shared during the meeting will constitute the basis to elaborate a common platform for European standard of care, which is currently lacking. This project involves not only clinicians but also individuals living with HIV, community representatives and public health institutional partners. EACS, with its role as a pan-European Society, has chosen not only to organise the platform for this project but also to advocate for the implementation of European standard of care across all EU and non-EU European countries.

The EACS Policy Working Group is conscious that EACS cannot oversee interventional and operational roles, but can provide to institutional stakeholders recognised standards on which to develop a strategy at improving care in order to fill the gaps that currently exist among the different European regions.

## Educational background and justification

The European AIDS Clinical Society (EACS), founded in 1988, is a Society of clinicians treating people living with HIV/AIDS. The mission of EACS is to promote research, education and training through its educational programme and the European AIDS Conference, to issue the EACS Guidelines and, therefore, to improve standard of care. In the last 25 years, the HIV epidemic, treatment and care have changed fundamentally. In most patients, cART has led to an undetectable viral load and survival of HIV-infected persons has become comparable to that of the general population. And very importantly, cART, if appropriately given, prevents mother-to-child transmission.

Unfortunately, these successes are not equally distributed throughout different European regions. This is due to heterogeneity in the access to cART, difficulties to access HIV testing, medical care and monitoring. Moreover, there are still relevant problems in diagnosing, managing and treating co-morbidities, in particular tuberculosis and viral hepatitis.

In 2013, EACS formed a Policy Working Group whose goal is to collect and diffuse data on standard of care including the progress and pitfalls in different European regions, as well as to provide a platform in order to share these data among different stakeholders.

In 2014, EACS organised the first Standard of Care for HIV and Co-infections in Europe meeting at the Ministry of Health in Rome, Italy. The meeting was followed by an institutional meeting organised by the Italian Ministry of Health. The meetings involved representatives of the civil society, activists, and stakeholders (European Commission, ECDC, WHO, UNAIDS, and HIV in Europe).

The main conclusions of the meeting were that several actions needed to be implemented in order to provide better clinical care and treatment of HIV and co-infections across Europe. It was especially agreed to increase awareness on HIV testing, to reduce stigma around testing, and to guarantee access to care and periodic evaluation of retention in care. Key populations were identified such as people who inject drugs, migrants, prisoners, and sex workers. There is a need to reduce costs of ART and to treat co-morbidities, in particular HCV and tuberculosis, in order to guarantee access to care for every individual living with HIV in Europe.

A summary of this two-day meeting was published in HIV Medicine (ref. HIV Med. 2015 Oct 22. doi: 10.1111/hiv.12347).

In 2016, the second Standard of Care for HIV and Co-infections in Europe meeting was organised in Brussels, Belgium. The conclusions of this meeting were that a common ground for standard of care, based on the EACS Guidelines, should be established throughout Europe.

EACS should interact with policy makers and other stakeholders to ensure achievement of this common minimum level of standard of care, in particular for initiation of ART, accessibility of drugs and monitoring of ART using viral load. Progress should be made in monitoring retention in care, preventing loss of follow-up and ensuring return to care. Improving integration of services and accessibility to care will play a key role to optimise care of patients with HIV/TB co-infection, as well as diagnosis and prevention of TB in populations at risk.

The Standard of Care meeting provides a unique opportunity to monitor progress and pitfalls in HIV-infected patient care throughout Europe. It is also a forum for advocacy targeted to policy makers and other stakeholders to constantly improve global management of HIV-infected patients, with the aim of providing the same level of quality throughout the continent.

A summary of the second Standard of Care meeting was published in HIV Medicine (2017)

DOI: 10.1111/hiv.12559

The third Standard of Care for HIV and Co-infections in Europe meeting (2019) will be chaired by Dr Cristiana Oprea from Bucharest, Romania.

The Steering and Scientific Committees are composed of members of the EACS Governing Board/Regional Representatives and EACS members from Central and Eastern Europe:

### Steering Committee

Cristiana Oprea (Chair), Andrzej Horban, Mariana Mardarescu, Fiona Mulcahy, Jürgen Rockstroh, and Adrian Streinu – Cercel

### Scientific Committee

Josip Begovac, Georg Behrens, Sanjay Bhagani, Nikoloz Chkhartishvili, M. John Gill, Tatiana Koval, Jens D. Lundgren, Cristina Mussini, Alexander Pantelev, Anastasia Pharris, and Mike Youle

### Aim/Goal of Policy Working Group

- 1) To collect and disseminate data on the standard of care including the progress and pitfalls in different European regions, as well as to provide a platform sharing this data among different stakeholders
- 2) To elaborate a standard of care document which defines benchmarks for different areas of care and treatment in accordance with the EACS Guidelines
- 3) To identify indicators used to measure parameters such as access to testing, access to care, cascade of care and prevention, diagnosis and management of co-morbidities
- 4) To develop partnerships with the institutional stakeholders: European Commission, ECDC, WHO, UNAIDS, and HIV in Europe
- 5) To actively involve individuals living with HIV and community representatives, such as EATG and national NGOs

### Event format

The meeting will take place in Bucharest, Romania, at the European HIV/AIDS & Infectious Diseases Academy, on January 30-31, 2019.

The format of the meeting is a one-and-half-day meeting with plenaries and workshops. The workshops will specifically focus the discussion on three main topics:

1. To identify socio-economic and structural barriers in HIV and HCV management in Central and Eastern Europe and to identify the best modalities to overcome key barriers in the region (in particular in hard-to-reach populations)
2. To discuss and agree on strategies and operational methods to be implemented in order to improve HIV testing and get closer to the defined UNAIDS targets
3. To find the best modalities to improve collaboration between HIV and TB services in order to strengthen national TB health care systems and improve TB outcomes

## Participants

- 75 experienced clinicians and/or academia/public health institutions, key opinion leaders in the field of HIV, hepatitis and TB from all over Europe (with focus on the Central and Eastern part)
- Representatives from ECDC, UNAIDS, WHO Regional Office and the European Commission
- Representatives from EATG and national community NGOs

In order to ensure interaction, the number of participants is limited to one hundred delegates and the conference is on invitation only.

## Expected results and outputs

- To support policies in order to remove barriers to access HIV and hepatitis services (in particular for key populations) and to optimise local resources to reach “universal treatment”
- To define and implement the same tools for HIV, HCV, TB prevention strategies around all EU member states and establish agreement on priority actions (action plan)
- To promote the uptake of the EACS Guidelines
- To propose collaborative programmes and build large networks in the region, to harmonise and integrate strategies and tools across the continuum of care
- To enhance testing programmes by implementing self and community-based testing for HIV and hepatitis with target on key population
- To review (reassess) modalities to accelerate the scale-up and integration of HIV-TB services and the access to MDR/XDR TB treatments
- To plan audits in the region in order to assess standards of care and develop optimisation plans