

Study finds regional variation in treatment outcomes and HIV risk factors among HIV-positive Canadian women

Results will help develop effective prevention and HIV management programs

Vancouver, British Columbia (May 19, 2010) – Researchers from British Columbia, Ontario and Quebec revealed findings from a new national study today that showed HIV risk factors and clinical indicators for Canadian women vary significantly among provinces.

Researchers affiliated with the Canadian Observational Cohort (CANOC), the largest HIV cohort study group in Canada, analyzed data from 904 HIV-positive Canadian women who began HIV treatment after December 31, 1999. Of these participants, 402 were from B.C., 277 from Ontario, and 225 from Quebec.

The provincial differences uncovered included higher levels of hepatitis C co-infection and injection drug use in women from B.C., and greater likelihood that women from Ontario and Quebec would report heterosexual sex as a risk factor for HIV.

“Defining the differences in the characteristics of HIV positive women among provinces is the first step in developing targeted treatment, prevention, access and management programs that will have a real impact on the lives of Canadian women,” said Dr. Mona Loutfy, assistant professor at the University of Toronto and a co-principal investigator with CANOC.

Women represent one of Canada’s fastest-growing HIV-positive populations. Since 2000, women have accounted for roughly one-quarter of Canada’s positive HIV tests, more than double the 12% they represented during the period 1985-1997.

“These results are no surprise to those of us in the HIV community, like myself, who have watched the growing number of women infected and the increase in the number of women infected because of drug use as well as heterosexual sex. We have been telling the government this would happen for years,” said Louise Binder, HIV positive woman and chairperson of the Canadian Treatment Action Council.

The detailed study findings, presented last week at the 19th Annual Canadian Conference on HIV Research in Saskatoon, included:

- B.C. women were more than twice as likely as those in Ontario or Quebec to experience viral load rebound (33.6% in B.C. vs. 13.3% in Ontario and 13.5% in Quebec). Viral load rebound, in which the HIV viral load reverses after starting treatment and rises above a

pre-determined threshold, may lead to a number of negative outcomes including resistance to therapy, therapy failure and eventually full-blown AIDS and death.

- Significantly fewer Ontario women had an AIDS-defining illness such as pneumonia or certain cancers at the time of therapy initiation (1.1% vs. 14.4% in B.C. and 13.8% in Quebec).
- B.C. women were significantly more likely to report hepatitis C co-infection (44.3% vs. 13.7% in Ontario and 20.4% in Quebec)
- B.C. women were significantly more likely to have a history of injection drug use (41.3% vs. 10.8% in Ontario and 14.2% in Quebec)
- Ontario and Quebec women were significantly more likely to report heterosexual sex as a risk factor for HIV (56.0% in Quebec and 41.9% in Ontario vs. 8.5% in B.C.)

Study participants in all three provinces responded similarly to highly active antiretroviral therapy (HAART) and displayed no significant differences in their ability to suppress HIV while on treatment.

“We were excited that our study was accepted for presentation at the national HIV conference this year because HIV research focusing on women has been limited,” added Dr. Robert Hogg, researcher at the BC Centre for Excellence in HIV/AIDS and principal investigator with CANOC. “The data derived from CANOC is key to helping to understand how and why Canadian women are being infected with HIV, and with this knowledge we can help women within Canada and beyond the country’s borders with better and more focused treatment options.”

A similar analysis from CANOC is expected to receive global attention in July 2010 from 25,000 attendees at the International AIDS Conference in Vienna.

At the end of 2008, there were an estimated 14,300 women living with HIV and AIDS in Canada, accounting for about 22% of the national total of those suffering from HIV and AIDS. This compares to an estimated 12,200 women with HIV and AIDS for 2005.

CANOC is Canada’s first integrated network of all registered HIV and AIDS treatment information from eight cohort databases across British Columbia, Ontario and Quebec. CANOC is the largest cohort in Canada of people under HIV treatment and one of the largest in the world.

CANOC gives researchers the opportunity to conduct large and detailed analyses of treatment outcomes and to assess variations across regions and practices. Additionally, the study provides support to graduates and post-doctoral students interested in health-population specific research.

About the British Columbia Centre for Excellence in HIV/AIDS:

The BC Centre for Excellence in HIV/AIDS (BC-CfE) is Canada’s largest HIV/AIDS research, treatment and education facility. The BC-CfE is based at St Paul’s Hospital, Providence Health Care, a teaching hospital of the University of British Columbia. The BC-CfE is dedicated to

improving the health of British Columbians with HIV through developing, monitoring and disseminating comprehensive research and treatment programs for HIV and related diseases.

About CANOC:

The Canadian Observational Cohort (CANOC) is an integrated network of all registered treatment information from eight cohort databases across British Columbia, Ontario, and Quebec. This collaboration of national researchers and select databases establishes policy-relevant studies in HIV therapeutics, population, and public health. CANOC is funded by the Canadian Institutes of Health Research (CIHR) and the CIHR Canadian Trials Network (CTN). For more information please visit the CANOC website: www.canoc.ca

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