Perceptions of HIV infected men who have sex with men as regards functional cure of HIV infection

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Background

• While HIV cure and functional cure research are underway, perceptions of HIV patients, the potential primary beneficiary have yet to be examined
• We aimed to understand the awareness and attitude of HIV-positive men who have sex with men (MSM) about HIV functional cure by their treatment history

Materials and methods

• Two groups of HIV+ MSM were recruited from respective cohorts of newly diagnosed treatment-naïve and treatment-experienced patients
• A self-administered questionnaire was given with brief description on HIV functional cure and questions on: three most important impacts of an HIV cure, knowledge of functional cure, desirability in receiving treatment for functional cure, willingness of joining a functional cure trial and factors associated with the attitude
• Differences in proportions between two groups were assessed by z-test

Results

• Totally 217 HIV+ MSM were included in the analysis, of whom 115 have been on treatment for a median of 7 years
• Over half (55%) have never heard of functional cure while the majority (94%) considered this a desirable option by scoring 6 or above in a scale of 0 to 10 and expressed an interest in joining a clinical trial (92%)

Conclusions

• HIV functional cure is well-accepted by HIV-positive MSM in Hong Kong, despite a low level of awareness about it
• Their perceptions and concerns do not differ much by treatment status
• Health and HIV transmissibility statuses were major benefits and concerns
• When conducting a clinical trial on functional cure, explanation of its safety issues by healthcare professionals would be important

In your opinion, what are the most important impacts of an HIV cure? (Choose at most 3 options)

<table>
<thead>
<tr>
<th>Impact</th>
<th>Total (%) N=208</th>
<th>Treatment-experienced (%) N=108</th>
<th>Treatment-naive (%) N=100</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>No longer at risk of AIDS or HIV-related morbidity</td>
<td>94 (45%)</td>
<td>55 (51%)</td>
<td>39 (39%)</td>
<td>0.084</td>
</tr>
<tr>
<td>Restoration and stabilization of effective immune function</td>
<td>138 (66%)</td>
<td>63 (58%)</td>
<td>75 (75%)</td>
<td>0.011</td>
</tr>
<tr>
<td>Not getting HIV for a second time</td>
<td>44 (21%)</td>
<td>16 (15%)</td>
<td>28 (28%)</td>
<td>0.020</td>
</tr>
<tr>
<td>No longer need to visit a doctor for HIV</td>
<td>56 (27%)</td>
<td>33 (31%)</td>
<td>23 (23%)</td>
<td>0.220</td>
</tr>
<tr>
<td>No longer need to take HIV medications</td>
<td>65 (31%)</td>
<td>28 (26%)</td>
<td>37 (37%)</td>
<td>0.085</td>
</tr>
<tr>
<td>No longer transmitting HIV to the others</td>
<td>116 (56%)</td>
<td>54 (50%)</td>
<td>62 (62%)</td>
<td>0.082</td>
</tr>
<tr>
<td>Being considered as a person not infected with HIV</td>
<td>43 (21%)</td>
<td>27 (25%)</td>
<td>16 (16%)</td>
<td>0.109</td>
</tr>
</tbody>
</table>

• The most important perceived impacts of HIV cure were “restoration and stabilisation of effective immune function” and “no longer being infectious”
• A higher proportion of newly diagnosed patients chose the former (p=0.01) and “not getting HIV again” (p=0.02)

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