


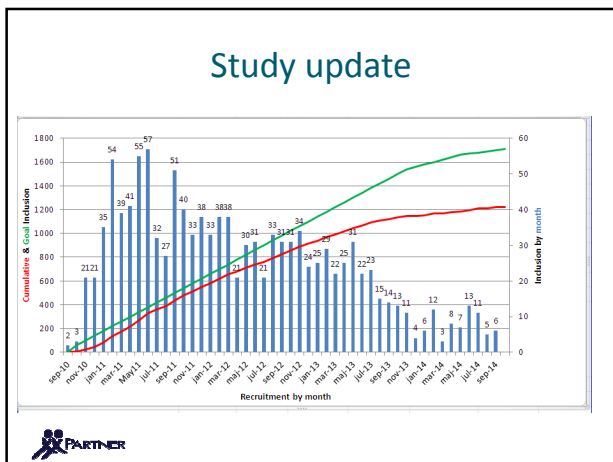
Glasgow 3rd November 2014

PARTNER Investigator Meeting



Agenda


- Welcome
- PARTNER update
- Panel discussion: How to optimize MSM recruitment in PARTNER 2
 - Presentations from the Netherlands, Switzerland and Denmark.
- How are the results communicated to sero-different couples? Feedback from the PARTNER presentation at the nurses' conference in Barcelona.

Study update


Global overview - enrolment

	Enrolment Goals*	Pairs enrolled	Pairs active in study	Percent of Goal achieved	Homosexual pairs enrolled	Percent of Homosexual Pairs
Austria	60	58	18	96.7	22	37.9
Belgium	45	19	9	42.2	12	63.2
Denmark	61	74	33	121.3	42	56.8
Finland	15	22	3	146.7	7	31.8
France	130	94	33	72.3	49	52.1
Germany	104	136	43	130.8	65	47.8
Ireland	20	18	2	90.0	3	16.7
Italy	120	70	17	58.3	24	34.3
Portugal	30	17	4	56.7	4	23.5
Spain	310	259	65	83.5	80	30.9
Sweden	40	44	11	110.0	15	34.1
Switzerland	90	113	29	125.6	37	32.7
The Netherlands	45	55	28	122.2	39	70.9
United Kingdom	352	242	85	68.8	129	53.3
Novedtotal	1422	1221	380	85.9	528	48.2




PARTNER 2 Recruitment Goals

- The estimated number of MSM couples for PARTNER 2 is 950 or total number of couples years of follow up is 2082.
- Shall we mention the US collaboration????



New leaflet, postcard and poster



Panel discussion

- How to optimize the MSM recruitment in PARTNER 2:
 - The Netherlands
 - Switzerland
 - Denmark

- Debate



How to communicate the interim results from the PARTNER study in a clinical setting – from nurse to sero-different couples

Tina Bruun



Lessons learned in Denmark 6 months after the release of the results

- Feedback from sero-different couples in Denmark has shown that these data have not been discussed with them at the clinics.
- It has been difficult to find layman articles/debates on the topic in Danish.
- Danish MSM volunteer counsellors working with HIV found it very difficult to know how they should counsel other MSM based on these data
- They expressed the need for more debate in the HIV/MSM organisations and more data.



Next steps and recommendations

- These results are important for health care staff, MSM couples and the community and needs to be discussed among these groups.
- In a clinical setting it should not only be the nurse's personal view on transmission risk, but should be a discussion among all staff members that are involved in the treatment and care of HIV positive people.
- If treatment is used as "treatment as prevention" in sero-different couples it could be emphasised in counselling that the PARTNER study is still studying the transmission risk in anal sex where evidence is still not strong.
- The PARTNER study continues to enrol only MSM couples to strengthen data on transmission risk in anal sex.
- These results also need to be communicated to clinics, MSM couples and in the HIV/gay community to strengthen debate about transmission risk.

The PARTNER study will continue in a 2nd phase to provide more precise estimates for transmission risk to inform policy and also individual choice on condom use.

