

# CHAP NEWSLETTER: Fall 2021

Editor: Carley Pozniak (CHAP Secretary 2021-2022)

Mission Statement: To bring together pharmacists with a clinical and research focus in HIV and/or viral hepatitis to optimize patient outcomes and promote the profession of pharmacy through communications, education, research, and clinical practice.

# MESSAGE FROM THE CHAIR-LINDA ROBINSON

Hello Everyone and Happy Fall!



It is with great excitement that I write to you from my second sojourn as CHAP Chairperson. This has always been such a great group of passionate pharmacists, some of the best in our chosen profession, and I am so honored to lead us through this CHAP 2021/2022 season. Thanks to Jenn Hawkes for a stellar year as chair, navigating us through the tumultuous waters of "Life in the time of COVID". Your ability to charter me through this tech world we have been immersed into has been so helpful! We really had a wonderful previous year, a dynamic, virtual AGM and a really fun virtual social to share our personal lives with each other. I've included a little picture with my message today: HOPE is contagious. I really have a feeling that the COVID world is turning a corner towards the new normal we have all been anticipating and preparing for. With that hope, I have made contact with the CAHR 2022 organizing committee and they have informed me that the meeting is expected to be held LIVE in London, ON from April 28 - May 1. That would make our CHAP AGM date Wednesday April 27, 2022. I sincerely hope that we will be able to be together, live at that AGM. The Executive and I have been meeting throughout the spring and summer to

decide on a few exciting initiatives, including the format of our AGM and Social. Stay tuned as we learn more about the plans for CAHR and we plan our AGM accordingly. On another note, I hope that you are enjoying the continuation of our CHAP Chats Series. Stay tuned for the announcement of our next event to be scheduled for early December. We know that people have been a bit "zoomed out" these days so we promise to keep the Chats informative and exciting. I also want to send out a very big thank you all who have been contributing to our CHAP email chain. This is such a wonderful place for learning and it really allows for mentorship and consults from expert colleagues in the field. It's very refreshing to see so many new names in these email chains and I can't wait to meet some of you in person, with hope, someday soon!

"Our human compassion binds us the one to the other – not in pity or patronizingly, but as human beings who have learnt how to turn our common suffering into hope for the future." – Nelson Mandela

All the Best, Linda Robinson; CHAP Chairperson, 2021/22

#### **UPDATES FROM ACROSS THE COUNTRY**



## Vancouver, BC: St Paul's Hospital (SPH)

Fall is proving to be a busy time at St. Paul's Hospital as we continue to navigate the challenges of virtual healthcare, while responding to both an increase in in-person clinic visits and an ever-steady provincial PrEP program. Senior Pharmacy leadership has been cognizant of the increasing potential for staff burn-out with all of the competing needs. Linda and Erin will be part of a small group reviewing the current challenges of our program and creating a new vision, by optimizing available resources and considering the role of technology and other services.

We are also collaborating with many of you on updating the *Role of HIV Pharmacist* paper (last published in 2012 in CJHP), and we hope to have a draft by the end of the year. We are also seeing our calendar fill up with upcoming residents and students who will be joining us on rotation in the near future.

Our pharmacy team continues to grow, as a pharmacist was recently welcomed as the newest member of the Hope to Health Research and Innovation Centre, a new multidisciplinary clinic launched by the BC Centre for Excellence in HIV/AIDS. The clinic offers low barrier healthcare to residents of Vancouver's Downtown Eastside (DTES), many of whom

have complex medical and social needs. The successful applicant for the position, Chase Fisher, joins us from BC's Interior and began as the clinic's pharmacist in early October.

In pandemic news, the BC government announced expanded eligibility criteria in October for 3<sup>rd</sup> doses of the COVID-19 vaccine. Many of our patients are included in the expanded criteria, and as we brace for this next phase of the pandemic, we are eagerly following results of an ongoing study that some of our pharmacists are involved in as study participants. A team based at St. Paul's Hospital is studying the humoral immune response to COVID-19 vaccination among people living with HIV receiving suppressive antiretroviral therapy as compared to healthy controls. Some of our pharmacists are involved in the research as study participants and have committed to regular blood samples that began prior to administration of the first dose of the vaccine and will continue for one year afterward. An incentive for participating in this research is that participants get to learn and track their antibody levels throughout the duration of the study. This has led to friendly competition amongst colleagues as we learn who among us has developed the most antibodies following COVID-19 vaccination!

#### **Publications:**

Kwok K, Olatunbosun C, Ready E, Sin O, Toy J, Spears A, Lau V, Bondy G, Stone S. (2021). Risk Factors, Screening, Diagnosis and Treatment of Osteoporosis in HIV-infected Adults in an HIV Primary Care Clinic. Canadian Journal of Hospital Pharmacy. (Accepted for publication).

Erin Ready and Linda Akagi

### Northern Health in BC

Our regional specialized support team consists of a pharmacist and a social worker. I returned to the office in August 2021 (after working from home for 9 months due to COVID-19), however am still providing primarily virtual support, with in-person appointments/outreach on an urgent basis only. With the current COVID-19 situation, our health authority has continued to experience challenges with staff shortages, ICU bed shortages, long appointment and lab wait times, staff turnover and delays of all things not related to COVID.

We are getting closer to having more testing options in our future including an HIV self-testing pilot that launched in June 2021 and dry blood spot (DBS) testing that we hope to have started by the end of 2021. We provided Hepatitis C point of care (POC) testing at an Overdose Prevention Health Fair in August with a nearly 50% rate of uptake. Unfortunately, there was not any uptake on those provided with lab requisitions following through with a lab visit - so it will be fantastic once DBS testing is available – could do a POC test and if reactive then a DBS!

Our region, as well as BC, has continued to see more deaths from the overdose pandemic than the COVID-pandemic. We have seen 17 consecutive months (March 2020-July 2021) with over 100 illicit drug toxicity deaths/month in BC (July 2021 saw 184 and January 2020- July 2021 saw 2,938 deaths), while the total number of COVID-19 deaths is 2,055 (188 in Northern Health) between March 2020-October 15, 2021.

The Prince George Nechako OAT Clinic is a recipient of a 2021 CONNECT-C Grant! Set to begin October 18<sup>th</sup>/21 for a 1-year pilot.

- Linking to care the 250 patients with psychosocial instability (homelessness, mental health and addictions, incarcerations) who attend this OAT Clinic to HCV screening, treatment and care through supporting the clinic to coordinate HCV screening and treatment with OAT appointments and incentives for patients for engagement in care.
- Provide other OAT clinics with a potential model for care that includes an organized administrative position, incentives and connections to prescribers of both OAT and HCV treatments (or mentorship if not yet a prescriber) and a regional specialized support team.

Jennifer Hawkes



# Edmonton, AB

#### Hello from Edmonton!

The 4th wave of COVID has hit Alberta hard this fall. Thankfully the most recent trends suggest this is improving. We are fortunate to have tireless advocates for additional public health measures and amazing health professionals (including our ID colleagues) who have helped us get through a very challenging couple of months.

We are very happy to have two new(er) members to the NAP pharmacy team. Natasha Gaidhar works part-time on a casual basis at both the Royal Alex and Kaye Edmonton sites. Caitlin Olatunbosun has moved to Edmonton from Vancouver and joined NAP 1 day per week at the Royal Alex site. She is also a Pharmacy Clinical Practice Leader in the Edmonton Zone. Welcome Natasha and Caitlin!!

Our amazing colleague, Domina Huang, has played a huge role in the ConnectCare roll out and implementation in Edmonton zone. We are so thankful for her advocacy, educator role, and of course ConnectCare phrases and templates!

Dr. Stan Houston, our Director of the HIV program for the past ~30 years, is retiring in

March 2022. We are so thankful for Stan's tireless advocacy for patients and the importance of team-based care (and all around good sense of humour). He will be greatly missed. Dr. Shannon Turvey will be taking over as Director and we are in good hands moving forward.

I have taken on a new role as Interim Dean of the Faculty of Pharmacy & Pharmaceutical Sciences for the next couple of years. I will continue to maintain my research, teaching, and clinical practice although in a reduced capacity.

### **Poster Presentations:**

Shafran S, Hughes

C. Bictegravir/Emtricitabine/Tenofovir Alafenamide in Patients with Genotypic NRTI Resistance. 30th Annual Canadian Conference on HIV / AIDS Research, May 2021.

### **Publications:**

Hughes C. Renal adverse drug reactions. Current Opinion in HIV and AIDS 2021; 16(6):303-308.

Christine Hughes (on behalf of the NAP pharmacy team)



## Saskatoon, SK

Hello from Saskatoon,

We entered our most challenging time with COVID since the pandemic began with the recent 4<sup>th</sup> wave. All restrictions had been lifted in July and despite not being at herd immunity level, restrictions were taken away. Many of our top physicians started calling for reimplementation of restrictions such as masking and limiting gathering sizes in July and August as the numbers began to increase. It wasn't until September that extra measures were reintroduced. By then, record numbers of new infections were soaring and just recently have the numbers started to decline in November. There's been an increase in vaccination rates since proof of vaccination or a negative test became a requirement in many establishments October 1, 2021. We have a ways to go with vaccination but at least we are seeing a decrease in numbers for ICU beds and deaths being reported each day. The mask mandate is still in place but not sure how long the province will maintain this. Our clinic has continued with many virtual visits but each physician has a number of in person appointments available for those that virtual follow up is not suitable. We have been seeing an alarming number of new HIV cases since COVID has begun, often accompanied by syphilis or HCV. We've also seen an increase in the number of high risk for transmission deliveries this past year.

Unofficially, half of our 30 births thus far have been considered high risk and on top of this, some women haven't received any prenatal care.

# Project updates:

Rx Files recently published a new version of their book and I, Mike Stuber and one of our Saskatoon ID physicians made many contributions to the HIV section. There are now sections on PrEP along with a simplified algorithm to help primary care providers start uncomplicated patients on HIV treatment. With the continued rise in cases, we are hoping to partner with primary care providers to start prescribing antiretrovirals to help deal with the capacity issues. To this end, some of our local physicians have been holding virtual classroom sessions for new prescribers to provide basic education, case discussion, and opportunities for mentorship. I assisted with some of the slide content and was available for case discussion at some of the sessions. Unfortunately, funding has not been renewed for this project so it will come to a close at the end of this year. I'm also part of the group working on an update to the Role of the Pharmacist paper. Section leads are currently combining submitted sections and will begin reviewing shortly.

#### Carley Pozniak

## Regina, SK

Hello everyone! My name is Jackie and I am the (not-so) newbie at the Infectious Diseases Clinic in Regina. The last 10 months have been a whirlwind as I've tried gain competency in the HIV world and fill the shoes of Mr. Mike Stuber. Huge thanks to Mike and Carley for mentoring me along the way, and to all of you for responding to my questions in the CHAP list serv.

As I'm sure is the case for many, COVID and its unforgiving wake are still wreaking havoc here in SK. Low staffing due to redeployment and burnout, and decreased testing access to health care has resulted in an increase in new HIV diagnoses in more precarious situations. We have also seen changes in Saskatchewan's social assistance programs resulting in drastic increases in homelessness over the last couple of months. Unfortunately, I fear we are going to feel these effects for years to come.

However, there is still some light. Nursing staff is returning normal levels at the ID Clinic and we've been able to pave the way in some addictions services that have resulted in continued engagement in care (and prevention of overdose deaths) in some of our patients. We are currently managing about 150 PrEP clients through the ID clinic and there is soon to be a new order set for prevention of HIV vertical transmission which will replace our current, outdated and problematic order sets.

I am looking forward to learning from and getting to know all of you. Thanks in advance for answer all my coming questions!

Cheers!

Jackie Myers



### Manitoba Update

### The bad news:

Our MB HIV Program has been advocating for no out of pocket cost for antiretrovirals for people living with HIV in Manitoba for well over a decade, as well as no cost Post Exposure Prophylaxis and having Pre-Exposure Prophylaxis as an eligible benefit under our publicly funded provincial drug program call Pharmacare.

We thought we were very close to joining our western provinces to have free HIV meds for treatment of chronic HIV ...... but the COVID pandemic derailed things. We continue to struggle with drug coverage and people affording the cost of their ARVs (deductible based on combined family income). Instead of no cost ARVs, the province created a HIV medication program that if a person meets eligibility criteria then they could obtain up to a 3-month supply of ARVs as way to get people started on ARVs (or bridge them if already on ARVs) to give time to sort out longer term drug coverage.

### The better news:

Previously for Post Exposure Prophylaxis the province only funded 3-day starter packs for PEP and the patient was responsible for the cost of the remaining 25 days (including sexually assault victims). The province has created a NEW program where if the person does NOT have 100% coverage through another drug

program (eg. NIHB, workers compensation or other) that the prescriber could fill out a MB

HIV PEP eligibility form and submit it along with a prescription for the 25 days of ARVs to have filled at any community pharmacy and the pharmacy would manually bill the government for reimbursement. Unfortunately, there is much work yet to done in informing prescribers and community pharmacies that this program exists.

For Pre-Exposure Prophylaxis the province has recently made Emtricitabine 200 mg/Tenofovir DF 300 mg an eligible benefit under our provincial program, Pharmacare, for PrEP. However, it would need to be prescribed by a person knowledgeable about PrEP and has applied to the province to be a PrEP prescriber.

#### The best news:

Since the province would not provide free ARVs for our patients living with HIV, and to recognize the huge amount of time and effort/workload the pharmacists and social workers of our MB HIV program spend to sort out drug coverage, the province agreed to provide permanent funding for another HIV pharmacist and Social worker. With that said, the best news (IMO) we have to report is that Brenda Rosenthal has joined the MB HIV Program as our 3<sup>rd</sup> full time pharmacist. For those who are not aware, Brenda is already a member of CHAP, having completed a 1-year term with our MB HIV Program 9 years ago. We are excited that she has chosen to rejoin us and look forward to working with her!

Shanna Chan



## Ottawa, ON

Life goes on at TOH in these COVID days. We are for the most part seeing patients in person, which is quite a relief. My activities are split between modernization of therapies and managing detectable viral loads. We have a champion doctor who is offering Cabenuva to a lot of his patients. We probably have between 20-25 patients enrolled on the program receiving commercial supply. I must admit that despite my initial concerns with the manufacturer program, I have only heard good comments from my patients. Simplification of treatment include in majority dual therapy (Dovato) and Biktarvy (+/- either DOR or DRVc).

Sadly, and uncertain if linked to COVID-19, we are seeing now more patients off treatment admitted with advanced disease. We are not used to that in OTT! And on top of that, a new assay which overestimates VL (LOD 20 copies/mL) raises a lot of questions. In other words, the level of activities at the clinic has definitely risen.

On an academic side, we have completed a pharmacy residency project looking at the impact of newer InSTI in glucose control of diabetes patients. I am keeping my fingers crossed that it will be accepted at CROI....

And last, but not least, the new French Pharm D school at uOttawa has been approved by the Senate. I have been collaborating on this project for the last 2 years, surrounded by great leaders (Christine Landry, Pierre Moreau). Last July, I was privileged to be appointed as adjunct professor and will keep working hard to be ready to welcome our first cohort of students in 2023.

Greetings to all. I am missing seeing/chatting/drinking/laughing (with) you. Enjoy the Holidays, and see you soon in London!

Pierre Giguere

### Positive Care Clinic, St. Michael's Hospital, Toronto, ON

Life remains the same at the Positive Care Clinic in Toronto. We continue to operate in a hybrid model where we provide follow up for some patients in clinic, mostly those who are newly diagnosed, new to our clinic, and those requiring vaccines, and others virtually on the

phone. In the last 6 months, in addition to our routine patients, we had 67 new patients referred to our clinic and saw over 80 patients for PEP. It has been challenging to follow up some patients who we were unable to contact or had not had any blood work over the past

year due to fear of going out. While we still don't have universal access to antiretrovirals in Ontario (sigh), there was discussion on changing the eligibility criteria for one of our social assistance programs, risking loss of drug coverage for a significant portion of our population. Thankfully, through advocacy groups and stakeholder meetings, a reevaluation of this program has been paused. Unfortunately because of the pandemic, work status became precarious which led to unstable drug coverage so scrambling to cobble drug access continues.

While we had to defer the last CHAP observership due to pandemic restrictions, we will be looking at virtual alternatives to provide a modified version of the program, which may be attractive to others in the future. This past month we welcomed a Year 3 family practice resident doing a pharmacy rotation at Positive Care and next month we will have two more at both the hospital and new family practice location. Stay tuned for the feedback.

**Deborah Yoong** 

# **UHN Immunodeficiency Clinic**

COVID update- UHN has mandated mandatory vaccinations for all staff, vendors, contractors, learners, volunteers and essential care partners by October 22<sup>nd</sup>. Currently 96% of all staff have been vaccinated. Those who remain unvaccinated without medical/human rights reasons will be terminated with cause. It's a pretty hard line approach but I'm happy the hospital is taking such a proactive approach to protecting patients.

On a separate note, it's pretty amazing how much things have changed and what the new norms are now. A few years ago, we had a very energetic nurse manager who was not very familiar with HIV, and she wanted to make a ton of "updates" at the clinic to bring it more in-line with other clinics she was in charge of. One of these updates was installation of plexiglass barriers at the reception desk (at that time, some clinics in the hospital had them, many others did not). The clinic staff were greatly opposed, with concerns that patients would feel stigmatized. Many remembered the old days in hospital when food trays would be left outside a patient's room and linens would not be changed for hours because some staff were too

afraid to go into the room. There was even a showdown when contractors showed up to install the plexiglass and were turned away by some clinic staff (i.e., GlassGate). The nurse manager eventually apologized and didn't bring it up again. She moved onto greener pastures shortly thereafter. I can't help but think she's probably having the last laugh now, but at least COVID has made this a universal precaution rather than appearing to be a selected one.

- CATCO-DDI: Nancy presented a more robust set of results from our CATCO-DDI study looking at identification and management of drug-drug interactions in hospitalized COVID patients at the virtual Antiviral PK Workshop last month. The oral presentation included analysis of data from both UHN & MUHC sites. A manuscript will be forthcoming.
- CHAP National Observership
   Program. Unfortunately, Observerships are still on hold at many institutions across the country, so this program remains on hiatus.
- HIV/HCV Drug Therapy app. Michelle Foisy has stepped back from her official role as an editor of the app, but

remains busy as always sending us updates to include. It's impossible to overstate Michelle's contributions to the app over the years (and to the many hard copy versions of the HIV Handbook before then). Thanks, Michelle – none of this work would have been possible without you!

 HIV Residency (UHN/MUHC). Congratulations to Tessa Senneker, who graduated from the Year 2 HIV residency program last month, and who is now working in Kingston in a joint HIV & oncology role. We look forward to Tessa's contributions to CHAP and beyond.

Alice Tseng

#### Windsor, ON

Hello from Windsor, ON!

Our Windsor Clinic celebrates 30 years of providing outstanding HIV care to our local population! I would like to congratulate all the staff before me, including our own, Linda Robinson, and our current staff that has helped shaped what we are today. It's an honour to be a part of such an amazing team.

We have recently welcomed a new physician into our clinic, Dr Daniel Abraham, who has already started caring for patients. He comes to us from New York, and we are excited to have him with us as 2021 is proving to be a busier year here in Windsor, with STI cases on the rise in our area. We had 9 new cases of HIV since beginning of January through to the end of March 2021, which is double what is normally seen in this area during the first quarter over the past 5 years.

We are now seeing almost all patients inperson once again, and it's been nice to see
their faces since their last in-person visit.
With the recent announcement of the
upcoming US Canada border reopening to
non-essential land travel, many of our
patients are happy for the ability to once
again visit family and friends in the US,
which they have not been able to see over
the past 19 months or so. Isolation has
played quite a toll on some of these
patients, so we are relieved to hear they
will soon be able to access their supportive
people once again.

Looking forward to a busy winter season and getting all of our patients back into inperson care.

Take Care, Sheri Livingston

### **CHAP PROJECT UPDATES**

- 1. Restrospective multi-center analysis of dual regimens- Project Leads, Christine Hughes and Pierre Giguere. Two components to this project, a survey which was discussed early on but is on hold for now, and secondly a review paper geared towards community pharmacists, a CE is in the works for this. Shayna Campbell and Tasha Ramsey have been very involved and made large contributions to the project.
- 2. HIV Pharmacists' Role and Guidelines
  Update (last published in 2012 in CJHP) —
  Project Leads: Erin Ready and Stacey
  Tkachuk. Section leads have compiled
  submissions from various contributors and
  are now starting the review process of
  these sections. We're using a cascade of
  care model to present the information and
  there will be a focus on community
  practice. The aim is to have a draft
  completed by end of this year.

# WELCOME TO OUR NEW CHAP MEMBERS!

## New members from May 5 to October 6, 2021:

- Congratulations to Tessa Senneker, PharmD,
  - tessa.senneker@kingstonhsc.ca has successfully completed her Year2 HIV residency with Alice & Nancy at UHN/MUHC, and is now working at the Kingston Health Sciences Centre in a joint HIV and oncology position. We look forward to your contributions to CHAP.
- Kristi Hallett, Kristi.hallett@ahs.ca is a pharmacist at the SAC in Calgary, and helping to cover Shayna's leave.

 Welcome back to Rebecca Blimke, who is back at work after her maternity leave.

# **UPCOMING CHAP CHATS**

We have some excellent sessions coming up, chats will be announced with links to join in the CHAP google group, stay tuned for details. Next up will be:

**December 3**<sup>rd</sup>, 2021 Dr. Shafran will be presenting ARV Resistance: Complex Cases, see the link that Linda Robinson has sent in the CHAP google group thread.

Thank you to the executive team for organizing and securing such top notch speakers that we've heard from already!

# **CLOSING REMARKS FROM THE SECRETARY**

It's been wonderful to see all of the updates and hear about what's going on in practice across Canada! Thank you to all of those who were able to carve out some time to send in a submission for this newsletter. It's been an understandably hectic pace for most these days. I'd like to congratulate all of those going above and beyond in their practice as evidenced by some of the updates we've read about in this newsletter. I apologize if I've missed any noteworthy appointments, publications or other important work that is going on. This group always has a huge number of accomplishments throughout the year, it's hard to keep track! Thank you to the executive team and all other CHAP members who have made me feel welcome and supported me in my role transitioning to secretary this year. It seems like a daunting task to fill the big shoes that have gone before but I've have had wonderful mentors to guide the way. Looking forward to bringing you more updates as the year goes on and seeing everyone IN PERSON at our next AGM ©