

# COBA-Cohort: Preliminary results of a pan-European cohort of HIV negative MSM in community-based voluntary counselling and testing services

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## Background

- The European HIV epidemic is concentrated, mainly in men who have sex with men (MSM):
  - MSM accounted for 42% of new diagnoses in 2015<sup>1</sup>
  - This rate increased from 2005 to 2015 while the overall number of new diagnoses remained relatively stable<sup>1</sup>
- Frequent HIV testing is a key component of HIV prevention in MSM, recommended for more than 10 years<sup>2,3</sup>
- Community-based voluntary counselling and testing (CBVCT) services targeting MSM manage to overcome many barriers of HIV testing uptake and repetition<sup>4,5,6,7</sup>, and makes linkage to care easier<sup>8</sup>
- Longitudinal data on HIV-testing and behaviour of HIV-negative MSM are scarce in Europe
- The COBA-Cohort study (COmmunity-BASed cohort) has been implemented in the framework of Euro HIV EDAT (<https://eurohivedat.org>) and aims to overcome this gap by collecting common data in HIV-negative MSM attending CBVCT services in 6 European countries and possibly more (project still open to new partners)

### Objectives of the COBA-Cohort study

- Operational objective:** to implement a multicentre cohort of HIV-negative MSM in Europe
- Research objectives:**
  - To describe the patterns of community-based testing use
  - To identify determinants of HIV/STIs test seeking behaviour
  - To identify determinants of sexual risk behaviour
  - To assess the HIV infection incidence rate in MSM
  - To identify potential risk factors for seroconversion

## Methods

### Eligibility criteria:

- Men aged 18 or older
- Reporting sex with men <12 months
- Negative HIV test result at baseline

### Recruitment and follow-up (FU):

- Participation offered to all eligible men coming to one of the 17 participating CBVCT services (fig. 1)
- The first site started enrolling in January 2015, the last one in November 2016
- FU frequency depends on the testing recommendations and participants' willingness to come back

### Questionnaires:

- Baseline and follow-up questionnaires both gather data on attitudes and perceptions, discrimination, HIV/STI testing history, sexual behaviour, PEP/PrEP
- Sociodemographic data are collected at baseline and in the refusal questionnaires

For more details: see the previously published COBA-Cohort protocol.<sup>9</sup>

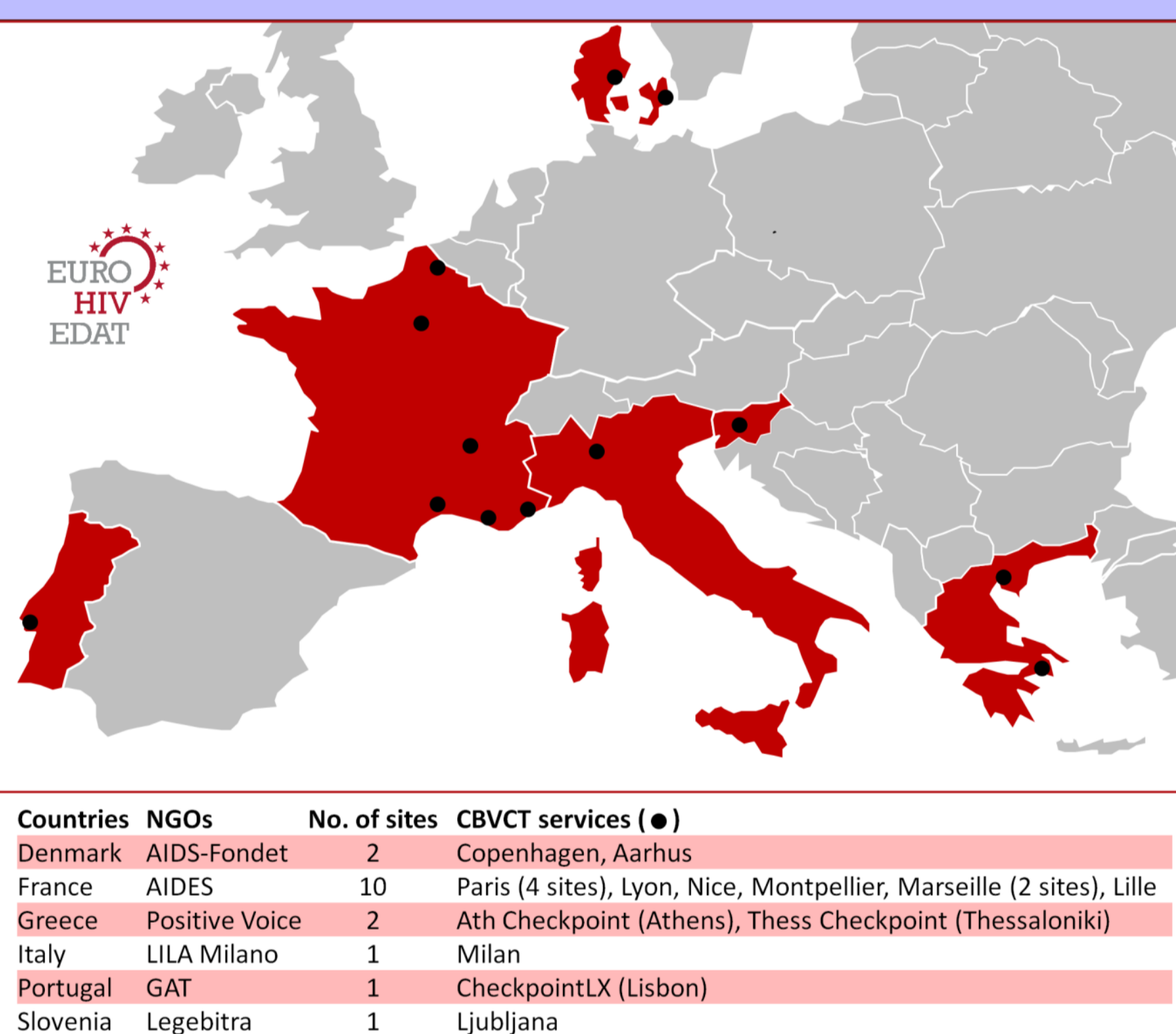


Figure 1. Community-Based Voluntary Counseling and Testing (CBVCT) services participating in COBA-Cohort.

## Preliminary results

Table 1. Monitoring data of COBA-Cohort, from commencement to June 30th, 2016

NGOs	Start dates (mm/dd/yyyy)	Participants enrolled <i>n</i>	At least one follow-up visit* <i>n</i> (%)	Time in follow-up** Median[IQR]
GAT/CheckpointLX	01/02/2015	1521	339(22.3)	3.6[6.1-9.9]
AIDS-Fondet	04/13/2015	833	232(27.9)	4.6[7.3-11.3]
Legebitra	02/09/2015	319	77(24.1)	4.3[7.4-10.5]
AIDES	01/05/2016	207	12(5.8)	2.8[4.8-5.3]
Positive Voice /Ath Checkpoint	02/15/2016	191	7(3.7)	2.4[3.2-3.6]
<b>Total</b>	<b>01/02/2015</b>	<b>3071</b>	<b>667(21.7)</b>	<b>6.4[3.8-10.6]</b>

\* Row %. \*\* Among those with at least one follow-up visit.

Table 2. Baseline demographics and testing patterns in COBA-Cohort participants, from commencement to June 30th, 2016 (%)

Variables	Values	Overall (n=3071)	GAT /CheckpointLX (n=1521)	AIDS-Fondet (n=833)	Legebitra (n=319)	AIDES (n=207)	Positive Voice /Ath Checkpoint (n=191)	p-val*
Age (median[IQR])		29[24-38]	28[23-36]	33[26-42]	28[24-37]	31[24-40]	27[22-35]	<0.001
Residents born abroad	Yes	18.5	17.3	28.3	8.5	15.0	5.8	<0.001
	No	70.4	62.9	68.1	90.3	84.5	91.6	
Educational level	≤ High school graduate	34.0	36.7	31.0	41.1	30.0	18.3	<0.001
	> High school graduate	64.7	60.9	68.7	58.9	70.1	81.2	
Sexual orientation (self definition)	Gay or homosexual	83.7	na	86.2	79.9	85.0	78.0	<0.001
	Bisexual	10.6	na	10.2	12.9	11.1	7.9	
	Other	4.8	na	2.4	6.9	3.9	12.6	
Previously tested for HIV	No	15.2	19.1	10.2	20.7	5.3	7.3	0.001
	Yes, once	12.8	11.4	11.6	18.8	12.1	20.4	
	Yes between 2 to 5 times	33.6	30.6	37.2	42.0	22.2	39.8	
	Yes, more than 5 time	28.6	20.1	39.5	18.5	59.4	31.9	
Time since last HIV test (median [IQR])		8.8[5.2-17.1]	10.6[5.6-19.9]	9.0[5.4-17.2]	10.1[6.5-17.9]	6.2[3.6-10.5]	5.2[4.5-8.8]	<0.001
Main reasons for the baseline HIV test (multiple answer)								
	Regular control	66.3	71.4	59.5	76.5	52.7	52.9	<0.001
	Episode of unprotected anal sex	20.3	na	48.7	24.1	38.2	31.9	<0.001
	Episode of unprotected oral sex	17.3	na	37.9	28.2	41.6	20.4	<0.001
Main HIV testing habits (multiple answer)								
	I get periodically tested for HIV	53.4	na	52.6	43.9	67.2	58.1	<0.001
	When I feel I have been at risk of HIV infection	30.7	na	33.1	25.4	36.2	23.0	<0.001
	When I have a new steady or regular partner	17.1	na	15.1	17.6	31.4	9.4	<0.001

% Percentages may not sum to 100 because of missing data; \* Chi square tests; na: not available

## Conclusion

Preliminary baseline data showed many significant differences across NGOs/countries:

- Participants are older, more often born abroad and more repeat testers in **Denmark** and **France**
- Non previously HIV tested participants are more numerous in **Portugal** and **Slovenia**
- Greek participants** are among the youngest, but have already been tested many times (including recently) and adopted regular testing habits

Future analysis on larger sample sizes will have to check this differences and probably implement multilevel models to take them into account.

The prospective design of COBA-Cohort and the common data collected in a large number of MSM is a unique opportunity to track possible changes regarding HIV incidence, testing patterns and sexual behaviour across Europe.

### Main Partner



### Associated Partners



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