

## Minutes of the Partner F2FWednesday7<sup>th</sup>March 2012

Participants: more than 35 people from France, Italy, Spain, Finland, Denmark, The Netherlands, Germany, Belgium, Switzerland, UK, and Belgium.

Welcome - Jens Lundgren
Presentation round

## Status in PARTNER: - Jens Lundgren

Jens reviewed the recruitment by country and commented on the lower than anticipated, but stable enrolment rate, and reminded about the importance of sampling in case of seroconversion.

## Recruitments strategies - (Spain) - Vicente Estrada

Vicente presented slides and underlined the importance of discussing partnerships and condom use with patients and shortly present the study. A dedicated research staff to refer patients to in case of interest is crucial

The barrier of switching from recommending safe sex to asking patients to disclose unsafe sex is difficult. Many experience that patients more easily disclose unsafe sex to research nurses. Of course it is clear that we are not wanting to encourage couples to have condomless sex, only that they declare if they are having condomless sex. Great difficulty to reach patients from sub-Saharan Africa (responsible for most of the births in discordant couples) due to cultural barriers to discussing sex. Mixed couples seems easier to reach (one partner from sub-Saharan Africa).

Remember that the focus point should be recruitment of MSMs.

Consider establishing collaboration with local clinics in order to have patients referred to your clinic.

Patient organisations play a crucial role for stimulating recruitment. Especially in Germany the lacking support is a problem – David Harry promised to push the Deutche AIDShilfe.

Please remember to use the term "condom less sex" and not "unprotected sex" – it is important to focus on what we are interested in.

Some stable couples have sex less frequently than monthly with their partner, but have plenty of sex outside the relationship.

## Presentation of data at CROI - Alison Rodger

Alison presented slides.

Would it be possible to feedback the information from the poster to be used as information for potential new couples? We need to remember that the poster represents a selected cohort and does not represent the general patient population.

<u>Loss to follow up rate and general discussion on follow up visit – Andrew Phillips</u> Andrew presented slides.

With a LTFU rate of around 20% per year (it is not yet clear what the rate of loss is) we need to enrol 40 couples per month until February 2014 to reach the goal of 2500 CYFU by August 2014.

One potential reason for couples stopping is the period of two years couples commit to – it will be important to ease the re-enrolment process for couples that want to continue as much as possible.

The CYFU target required for MSM is 1250, which means substantially increasing the enrolment rate of MSMs.

Having more MSM couples is a challenge because of more partner shifting, and many MSM in stable relationship both are HIV+.

If there is a risk of losing a couple due to the negative partner not wanting to show up for testing every 6 months it will be better to waive the 6 month requirement and having the negative partner tested annually instead to prevent losing the couple.

<u>Outreach initiatives and Community Lead - Guilio Maria Corbelli,</u> Guilio presented slides.