



Detection of Hepatitis C Virus (HCV) in semen from HIV-infected men who have sex with men (MSM) during acute HCV infection

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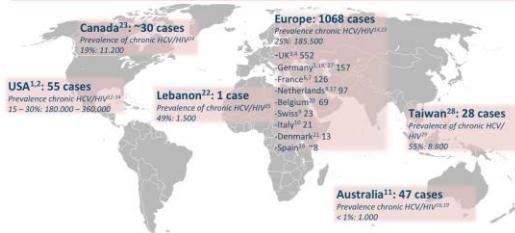
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Epidemic of HCV in HIV-MSM



European AIDS Treatment Network (EATN)

1.Luetkemeyer JAIDS 2006; 2-Cox Gastroenterology 2008; 3-Giraudon Sex Transm Infect 2008; 4-Ruf Eurosurveillance 2008; 5-Vogel CID 2009; 6-Gambo_Euro Surveill 2005; 7-McLachlan J Genitourin Hepatol 2008; 8-Urbancic AIDS 2009; 9-Rouet CID 2005; 10-Gambo a 48 countries. HIV & Hepatitis. 2008; 11-J Clin Microbiol 2009; 12-Centers for Disease Control and Prevention. HIV/AIDS surveillance report, 2008. Atlanta, GA: US Department of Health and Human Services, CDC; 2009; 13-Brown L, Boulware DR, et al. J Clin Microbiol 2008; 17:1729-1734. 14-Hanmer J, et al. J Clin Microbiol 2011; 49:1729-1734. 15-McLachlan J, et al. J Clin Microbiol 2011; 49:1729-1734. 16-Neukam HM Med 2011; 19:Pfleiderer PLoS One 2011; 20:Bos, et al. Euro Surveill 2010; 21:Barfod Scand J ID 2011; 22:Dionne-Odom Lancet Infect Dis 2009; 23:Hull personal conversaQn 2011; 24-Remis Public Health Agency of Canada 2002; 25-UNAIDS Country progress Report 2010; 26-Soriano personal conversaQn 2011; 27-Boeselke 18thICR Boston 2011 abstract #113; 28-Sun Liver InternaQnal 2011; 29-Lee J P Med Assoc 2008

HCV in semen

- 15-20 studies
- Detection rates: 12-36% (chronic-HCV)
- Detection of HCV in semen associated with:
 - ? HIV-infection ^{5,6}
 - ? Blood HCV viral load (VL) ^{5,7}
 - ? Acute HCV infection ⁸
- Acute infection poorly characterized

Disclosure of interest

- No financial disclosures to report.

Sexual transmission of HCV in HIV-MSM

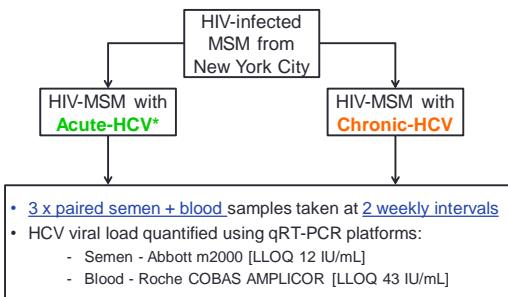
- Traditional view = HCV transmission via parenteral exposures
- **HOWEVER:** distinct **absence of parenteral risk factors** (eg. IDU)
- Incident HCV-infection associated with:
 - Receptive unprotected-anal-intercourse (UAI) ^{1,2,3}
 - Receptive UAI with ejaculation (but not without) ⁴
 - Douching prior to anal intercourse ⁵

Transmission via semen?

Aim of study

- To compare levels of seminal HCV between HIV-infected MSM with acute & chronic HCV infection.

Methods



Results – Baseline characteristics

	Acute	Chronic	p value
No. of participants	21	12	-
Median age (IQR)	36 (31-46)	52 (38-55)	0.007
HCV infection no.	Primary	17	12
	Re-infection	4	0
Genotype (%)	1a	20 (95) 9 (75)	0.13
Median blood HCV VL log IU/mL (IQR)	5.5 (3.8-6.2)	6.6 (6.2-6.9)	0.006
Median ALT, U/L (IQR)	231 (87-492)	62 (46-105)	0.001

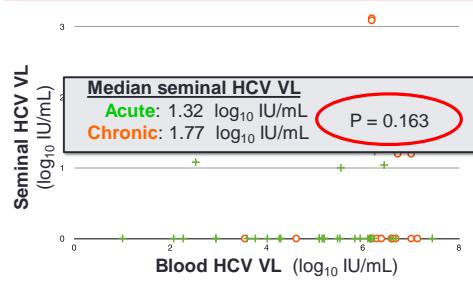
*IQR = interquartile range

Results – Detection of seminal HCV

	Detected	Not detected	p value
No. of participants (%)	11 (33)	12 (67)	-
No. of semen samples (%)	16 (27)	43 (73)	-
Median Age (IQR)	43 (35-49)	37 (33-46)	0.256
HCV Status	Acute HCV (%) 8 (21) Chronic HCV (%) 8 (38)	30 (79) 13 (62)	0.159
Median blood HCV VL log IU/mL (IQR)	6.4 (6.2-6.9)	5.5 (4.3-6.4)	0.002
Median ALT, U/L (IQR)	107 (66-507)	99 (60-222)	0.302

*IQR = interquartile range

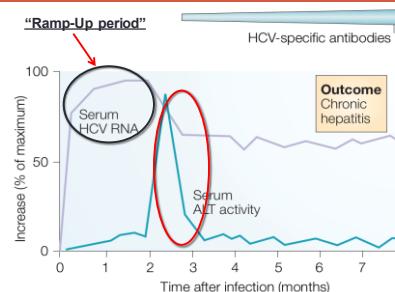
Results – Semen & Blood HCV VLS



Discussion

- No significant differences between acute & chronic seminal HCV measures
- Results comparable to previous studies
- Seminal HCV levels likely determined by corresponding blood HCV level
- Blood HCV levels are highest during early 'acute' HCV
 - ? Increased infectiousness

Discussion



Conclusion

- Epidemic of HCV in HIV-MSM is ongoing
- Seminal HCV has been implicated in sexual transmission
- Detection of seminal HCV during acute & chronic HCV-infection reinforces importance of protected sex amongst HIV-MSM
- Future research should focus on analysis of seminal HCV levels during the 'ramp-up' phase of acute HCV

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