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insight



START study will continue follow-up to 2021

The first results from the START study was published in NEJM 2015 and reported excess risk of cancers and opportunistic infections from deferring start of antiretroviral therapy in HIV. The START leadership submitted a grant application to the Division of AIDS (DAIDS) at NIAID, NIH last May requesting funding for following up all START participants through 2021.

The application was reviewed last week and we are delighted to report that it was highly rated and received an outstanding score. This will allow to assess whether the excess clinical risk associated with deferring antiretroviral therapy is reversible or not once therapy was initiated (which it was in the deferred group after results were announced back in 2015). The implications from this study reaches beyond HIV as it allows for experimental assessment of how impaired immune function influences health.



Joint Final Conference OptTEST and Euro HIV EDAT projects & launch of INTEGRATE Joint Action

For the past three years CHIP has been the coordinator of the EU-co financed project Optimising testing and linkage to care for HIV across Europe (OptTEST). The project is now coming to an end and on 19 September 2017 an open conference is held in Brussels at Thon City Hotel to present policy relevant outcomes. The conference title is The European Commission's contribution to strengthening health systems: *From HIV testing and linkage to care to integration of HIV, Hepatitis, TB & STIs*, and it is co-organized with the EU co-financed project Operational knowledge to improve HIV early diagnosis and treatment among

vulnerable groups in Europe (Euro HIV EDAT).

In the afternoon a policy session and debate on how to move towards integration of HIV, hepatitis, TB & STIs is arranged with the official launch of the EU-co -financed Joint Action on integrating prevention, testing and link to care strategies across HIV, viral hepatitis, TB and STIs in Europe (INTEGRATE), which brings together 33 partners from 17 countries. This new action will run for three years and be coordinated by CHIP.

Participation is free, but space is limited. Please register online at:

<http://www.opttest.eu/submitform>



SACC – from project to routine health care

After successfully developing and implementing a model for decentralised hepatitis C testing and treatment for drug users with hepatitis C in Copenhagen, the SACC (Shared Addiction Care Copenhagen) project has of June 1st 2017 transitioned from project to routine health care.

The SACC project was a three-year collaboration between the Social Services Administration, City of Copenhagen; ten counselling centres offering drug treatment in Copenhagen counselling centres; CHIP and; Department of Infectious Diseases, Rigshospitalet.

The aim of SACC was to offer testing for hepatitis C and, if indicated, fibroscanning and hepatitis C treatment locally at the drug treatment centres, in an environment familiar to the users.

In the future the SACC model for decentralized hepatitis C testing and treatment will continue at the drug treatment centres in Copenhagen as a routine health care offer to supplement the hospital based model. Later this year, SACC will also be implemented in other drug treatment centres in the Greater Copenhagen area.



TruCulture®

In August 2017, TruCulture® is introduced at Rigshospitalet, applicable for PERSIMUNE and other patients.

TruCulture® (Myriad RBM) is a commercially available whole blood assay that is applied to reproducibly assess the induced immune response, eliminating many pre-analytical errors and assuring standardization.

TruCulture® has been validated and applied in The Healthy Human Global Project, Milieu Intérieur, Institute Pasteur, which provides a normal reference material based on 1,000 healthy individuals. TruCulture® can reveal the induced immune response after whole blood stimulation by quantifying cytokines/proteomics (cytokines, chemokines, soluble receptors etc.) and transcriptomics (mRNA) of circulating (immune) cells upon stimulation with selected stimuli.

In the first phase (2017), five different stimuli has been selected to screen the immune system for a broad range of deficiencies. The stimuli are:

HKCA, heat-killed *Candida albicans* (whole microbe), stimulates TLR6, assessing the innate and adaptive immune response.

LPS, bacterial endotoxin (*E.coli*, O111:B4) (MAMP), stimulates TLR4, assessing the innate immune response.

Poly I:C, polyinosinic:polycytidylic acid (MAMP), DS-RNA analog, stimulates TLR3, assessing the innate and adaptive immune response.

Resiquimod R848, synthetic SS-RNA agonist (MAMP), stimulates TLR7 & TLR8, assessing the innate and adaptive immune response.

NegCo, negative control (no stimuli added, only culture media), assessing in vivo activation of blood immune cells.

The analysis is performed at the Department of Clinical Immunology, section 2031 (the blood bank). The tubes are incubated for 22 hours before harvest of supernatant (cytokines, proteomics) and cell pellet (transcriptomics). In the first phase, the output of the TruCulture® analysis is measurement of 7 different cytokines in each tube i.e. 35 different cytokine levels reported (PERSIMUNE and other patients). The transcriptomics of proteomics response can be assessed at a later time-point.

For further information, please contact Sisse Rye Ostrowski at

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IDWeek, October 4-8, San Diego, CA

IDWeek is the annual Infectious Diseases scientific meeting and one of the main forums for international researchers and clinicians working in the field of infectious diseases.

CHIP will be represented with 6 abstracts at the ID week: 1 oral presentation and 5 posters. The extensive research portfolio to be presented at ID week encompasses a wide of topics covering different patient populations and diseases. Furthermore, this is the first time the scientific output generated with data of the PERSIMUNE data warehouse will be presented to an international audience. A special highlight will be the presentation of results of the *Cooling and Surviving Septic Shock Study (CASS) trial*, which investigated the effect of mild induced hypothermia on survival outcomes of patients hospitalized with septic shock.

The list of abstracts is as follows:

- **Oral presentation:**

- Induced Hypothermia in Patients with Septic Shock and Ventilator-demanding Respiratory Failure - *Theis Itenov*

- **Posters:**

- Classification of Death Causes after Transplantation (CLASS): Evaluation of Methodology and Initial Results - *Neval Ete Wareham*
- Clostridium difficile Infection in Solid Organ and Haematopoietic Stem Cell Transplant Recipients - *Emma Elizabeth Ilett*
- Impact of CMV Blips in Transplant Recipients - *Paula Isabelle Lodding*
- Lymphopenia after radiotherapy and risk of infection - *Cynthia Terrones*
- Renal dysfunction in a cohort of renal transplant recipients: impact of BK polyomavirus - *Alvaro Borges*

For more information about IDWeek: <http://www.idweek.org/>

Personnel

Arrivals:

- July 4th: Stefan Uhl Detlefsen, legal student assistant
- Aug 1st: Mark Poulsen Khurana, research year student. Mark will look at the use of primary prophylaxis amongst solid organ transplant recipients in MATCH.
- Sep 1st: Man-Hung Eric Tang, Bioinformatics Scientist - PERSIMUNE
- Sep 11th: Mette Jørgensen, Bioinformatics Scientist - PERSIMUNE
- End of Sep: Daniel Murray, post doc, specific focus on enhancing CHIP's ability to perform translation science with specific focus on ongoing activities within PERSIMUNE and INSIGHT.

Departures:

- July 31st: Annette Hauberg Fischer, new job at Unilab
- July 31st: Majken Mansfield, new job as independant consultant
- July 31st: Marianne Linnet
- Aug 31st: Ida Sperle, new job at the Robert Koch Institute, Berlin
- Aug 31st: Maria Pultz Hansen, maternity leave and study
- Aug 31st: Maria Emlegaard Madsen, full time study

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