The Fundació Lluita contra la Sida (Fight AIDS Foundation) is in the HIV Unit at the Germans Trias i Pujol University Hospital, a public hospital managed by the Institut Català de la Salut (Catalan Health Institute). Some of the activities described in this report involve collaboration between the Foundation and the hospital’s regular staff. Similarly, the Foundation works closely with the Institute for AIDS Research IrsiCaixa, where more than 50 scientists focus on basic research to understand the mechanisms of HIV infection and find new therapies and vaccines. This collaborative work facilitates the transfer of knowledge between health professionals and clinical and basic researchers, making us a unique benchmark worldwide.

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Coordinators: Gemma Guillén and Sònia Clemares
Design and layout: Common Sense
**Early 20th Century:**

HIV-1 infection begins to spread in central and western Africa due to transmission of simian immunodeficiency virus (SIVcpz) to humans.

**1981**

The first cases of pneumonia, Kaposi’s sarcoma and other opportunistic diseases associated with a drastic reduction in defenses are reported in the US among gay populations of Los Angeles, San Francisco and New York. A few months later, the first cases appear in Europe. The first patient in Spain is diagnosed at the Hospital Vall d’Hebron in Barcelona.

**1982**

The term “AIDS” (acquired immunodeficiency syndrome) is increasingly used to refer to these cases.

**1983**

French virologists Luc Montagnier and François Barré-Sinoussi, with the subsequent intervention of the American scientist Robert C. Gallo, identify HIV as the cause of AIDS.

**1986**

The HIV Unit of the Germans Trias i Pujol University Hospital is created.

**1987**

The first antiretroviral, called AZT, is supplied. Despite its beneficial effects, it is not effective in controlling HIV long-term.

**1992**

The Fight AIDS Foundation is born.

**1995**

The IrsiCaixa AIDS Research Institute is founded with funding from La Caixa bank and the Department of Health of the Generalitat of Catalonia.

**1996**

Highly active antiretroviral therapy (HAART) is introduced and dramatically lowers AIDS morbidity and mortality rates. In high-income countries, the disease becomes chronic rather than deadly.

**2005**

Routine screening for human papillomavirus in both men and women with HIV, regardless of their sexual practice, begins.

**2006**

The HIVACAT AIDS vaccine research program is created under the co-directorship of Bonaventura Clotet and Dr. Josep Maria Gatell (Hospital Clinic of Barcelona). HIVACAT is one of the most ambitious international consortia for the development of a vaccine for HIV.

**2007**

The first charity concert organized by the Fight AIDS Foundation to obtain funds takes place at the Sala Bikini in Barcelona. This is followed up in 2008 and 2009 by concerts featuring Spanish pop star Miguel Bosé at the world-renowned Palau de la Música in Barcelona leading the way to similar fund-raising events over the coming years.

**2008**

The case of the “Berlin Patient” is published, referring to a HIV carrier who underwent a transplant of stem cells with a HIV-resistant mutation as treatment for leukemia. Today this patient is regarded as the only person who has ever been completely cured of the infection.

**2010**

- The first Gala Sida celebrity fundraising dinner takes place and is a huge success.
- Research shows that people infected with HIV who are on antiretroviral treatment and whose blood tests negative for the virus nonetheless continue to have small amounts of virus in their bodies. This helps to explain why it is so complicated to cure the infection.

**2011**

Data that will allow the design of the HTI immunogen for a therapeutic vaccine is identified. HTI is based on the HIV response of people who are able to control infection without antiretroviral treatment (elite controllers).

**2012**

- Live images are recorded for the first time showing how HIV enters the cells of the immune system and uses them as a “Trojan horse” to spread the infection.
- The United States Food and Drug Administration approves the antiretroviral drug Truvada as pre-exposure prophylaxis (PrEP) for people at high risk of infection.
- The “Our Songs Against AIDS” charity concert is held at the Palau Sant Jordi in Barcelona, with the participation of Catalan musicians of all generations.

**2014**

- New genes capable of accelerating or decelerating HIV infection are identified.
- Some of the Foundation’s patients coinfected with the hepatitis C virus start receiving new medication to cure this infection, which has proved effective in more than 90% of cases.

**2015**

- Roger Paredes joins the WHO Steering Group on HIV drug resistance.
- Preclinical data from HTI (an immunogen designed by the IrsiCaixa team) testing in animals show promising results that lead to the initiation of therapeutic vaccine trials in humans.

**2016**

- First results showing that HIV infection decreases the richness of the human microbiome are published.
- The path followed HIV as it spread through the Western world is drawn for the first time.
- The BCN02-Romi therapeutic vaccine study begins: Using a combination of an immunogen developed in Oxford and the drug Romidepsina, the immune system of five people is re-educated for the first time, thus helping them to control HIV on their own, without the need for long-term antiretroviral treatment.
THE FIGHT AIDS FOUNDATION is a non-profit organization focusing on healthcare, research and knowledge transfer in the field of HIV and AIDS. It was created by Dr. BONAVENTURA CLOTET of the HIV Unit at GERMANS TRIAS I PUJOL UNIVERSITY HOSPITAL IN BADALONA, CATALONIA, IN JULY 1992.

WHO WE ARE

MISSION

To offer the best health care to people with HIV.
Since its founding, the Foundation’s HIV Unit has brought together dozens of experts from various disciplines, including physicians, psychologists, dieticians, nurses and social workers, to offer comprehensive, high quality clinical care to HIV sufferers.

To conduct independent and competitive research in the field of HIV infection.
Thanks to the proximity and communication between patients, caregivers and researchers, research is constantly adapting to the challenges posed daily by HIV. This model also allows rapid incorporation into clinical practice of the latest scientific advances.

To disseminate the knowledge acquired by the Foundation among professionals worldwide and society at large through:
- Participation in the development of clinical guidelines and action policies on HIV globally.
- Application of knowledge generated in HIV research in other fields of medicine such as hepatitis C and cancer.
- Training of experts in HIV/AIDS.
- Professional advice on research projects in Africa.
HEALTHCARE
**2016 DATA:** 2,952 patients 15,663 visits with patients

<table>
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<tr>
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<th>First Visits</th>
<th>Follow-Up Visits</th>
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</table>

**ONGOING ASSESSMENT OF THE SERVICE**

The Foundation continuously checks quality of care by means of user satisfaction surveys that evaluate the various participating professionals in particular and the Unit in general.

- **Satisfaction with the service overall:** 4.47/5
- **Information received:** 4.62/5
- **Duration of visit:** 4.73/5
- **Waiting time prior to visit:** 4.66/5

**QUALITY POLICY**

The Fight Aids Foundation renews its ISO 9001:2008 certification annually. It was achieved for the first time in 2006 as a result of the Foundation’s commitment to quality and continuous improvement in all its activities.

**SERVICES OFFERED**

- **Medicine:** diagnosis and follow-up of HIV infection and associated disorders, advice and counseling in cases of accidental exposure to HIV, monitoring and supervision of clinical trials.
- **Nursing:** blood tests, outpatient treatment, training for self-administration of drugs, monitoring and supervision of clinical trials.
- **Psychology:** emotional support, psychological treatment, support in adherence to treatment, neuropsychological assessment.
- **Nutrition:** nutritional assessment and intervention.
- **Sanitary Social Work:** psychosocial care of HIV/AIDS patients and their families.
- **Gynecology:** control and treatment of gynecologic issues for women with HIV, with special attention to human papillomavirus.
- **Psychiatry:** diagnosis and treatment of psychiatric problems related to HIV infection.
- **Proctology:** control and treatment of anal diseases related to HIV, in particular those caused by the human papillomavirus.

Since 2005, the Foundation has provided screening, diagnosis, monitoring and treatment of lesions caused by the human papillomavirus in HIV-positive men and women. Germans Trias i Pujol University Hospital is one of the first hospitals in Europe to offer regular proctology care for people with HIV and treat pre-cancerous lesions detected by infrared rays, a technique that eliminates the lesion on an outpatient basis without hospitalization or surgery.

- **Diagnostic testing:** assessment of the state of the liver (hepatic elastography with FibroScan), tests to assess cardiovascular risk (measured by pulse wave velocity or VOP) and to determine bone density and body composition (DEXA technique), etc.

Since 2007, the Foundation has used FibroScan to perform hepatic elastographies in patients co-infected with HIV and hepatitis C. These tests, similar to an ultrasound, can assess the different degrees of liver fibrosis, thus avoiding the need for biopsies, which are more invasive and aggressive.

- **Coordinated care with other hospital services:** such as the plastic surgery department (for the treatment of lipodystrophy-related problems), ophthalmology and nephrology specialists.
Research at the Foundation is organized into separate lines that allow greater specialization of professionals and better use of resources. This diversification makes it possible to tackle the various challenges posed by HIV. Researchers from each of the lines are also active healthcare professionals and therefore in contact with people with HIV on a regular basis. As a result, the research carried out by them is tailored to the real needs of HIV sufferers.

In 2016, 59 clinical studies* were conducted by the HIV Unit and the Fight AIDS Foundation. These include all phases of clinical trials, observational studies and cohort studies and are aimed at addressing the many resolved issues related to HIV and AIDS.

We work with the world’s most prestigious research centers and our publications* are among those with greatest international impact.

* More information about studies and publications in the corresponding attachment.
This research line has three main areas of investigation:

1. The study of HIV-1 resistance to antiretroviral drugs including the mechanisms and epidemiology of resistance and the medical and public health consequences.

2. The development of new therapeutic strategies that will permit practitioners to simplify antiretroviral treatment and thus avoid the development of resistance to antiretrovirals.

3. The study of the Human Microbiome in connection with HIV infection, chronic inflammation, reaction to vaccines and premature aging in people infected with HIV-1.

WHAT DO THESE TERMS MEAN?

VIROLOGY

Virology is the study of viruses including their structure, classification and evolution, the way they infect, their interaction with hosts, techniques to isolate and cultivate them, etc. At the Foundation we study the features and functioning of HIV, and how the virus causes the infected person to become sick.

RESISTANCES TO ANTIRETROVIRAL DRUGS

Drug resistance refers to the ability of a virus to continue multiplying despite the presence of drugs designed to combat it. In the case of HIV, it has a great capacity for mutation and multiplies very rapidly. On the other hand, not taking medication properly may favor the emergence of resistance. The development of resistances leaves the patient increasingly without treatment options.

MICROBIOME

More than 99% of “our” genetic information actually comes from information contained in the millions of microbes that inhabit our bodies. Our microbiome exerts an enormous influence on our health. In the case of people with compromised immune systems, such as people with HIV, the study of the influence of the microbiome on the immune system may provide a key to improving quality of life and increasing defenses to fight the infection.

DURING 2016

Resistances and therapeutic options

- An international multicenter study led by the European Society for Translational Antiviral Research allowed researchers to trace for the first time the path along which HIV spread throughout the Western world. The study suggests that the spread of HIV-1 subtype B, which is the most abundant virus strain in the Western world (Europe, Australia and America), reflects the geopolitical events of the second half of the 20th century. The paper was published in the June 15 issue of the Journal of Molecular Epidemiology and Evolutionary Genetics of Infectious Diseases.

- Results of a study conducted in collaboration with the IrsiCaixa AIDS Research Institute, Emory University and Harvard Medical School showed that up to 70% of people who failed with tenofovir treatment in South Africa had developed resistance to this drug. This limits therapeutic options for these people.

- Various Europe-wide studies confirmed the effectiveness of new combinations of antiretroviral therapies.

Clinical guidelines and public health policies:

- The clinical virology line continues to actively participate in updating the IAS-USA resistances guide, which is the most widely consulted in the world. Ongoing collaboration with the WHO’s resistance group is also aimed at assessing the implications of resistances in developing countries.

The microbiome:

- Several cross-sectional studies have indicated that HIV infection is associated with alterations in the intestinal microbiome. But what about sexual practices? Do they have any effect on the microbiome? To address this issue, researchers carried out a study of two cohorts of 156 men in Barcelona (129 HIV-positive, 27 HIV-negative) and 84 in Stockholm (77 HIV-positive, 7 HIV-negative).

- The results, published in EBioMedicine, suggest that sexual practices could have a substantial impact on the intestinal microbiome and should be taken into account when evaluating alterations associated with the disease. However, as the study had relatively few non-HIV-infected participants, and in addition, the virus was firmly under control in many of the HIV-infected participants, further studies in this area will be needed to draw definitive and practical conclusions. It has been shown, however, that regardless of other factors, HIV infection decreases the richness of the intestinal microbiota, especially in patients with poor CD4+ recovery. Researchers are conducting studies to better understand the implications of this phenomenon and find ways to improve the immune response to treatments by modulating the microbiome.
AGING AND COMPLICATIONS ASSOCIATED WITH HIV AND ANTIRETROVIRALS

This line attempts to identify and explore the adverse side effects of antiretroviral treatment and other complications associated with the virus itself and the systemic inflammation caused by HIV in the body. Recently, research has focused on the aging population, as patients become older thanks to improved survival and life expectancy. This trend implies an increase in coexisting or additional diseases (comorbidities). In order to prevent them, treat them early if present, and improve the quality of life of patients, in 2015 a specific care circuit was created to be able to provide multidisciplinary attention to patients over 60.

During 2016 two studies have been begun population in this field:

- A study got underway that aims to evaluate the usefulness of an APP, called +AppProp, to improve clinical control, prevention of comorbidities and quality of life for patients over 60. We also want to improve physician-patient communication. To date, the study has included 30 patients but the ultimate goal is to have 100 participants, with 50 using APP and 50 as a control group.

- A second study, called the AGE + study, was initiated in collaboration with a primary care center in the nearby city of Terrassa and aims to compare the prevalence of comorbidities and age-related complications between two groups of patients over 55 years of age, one group with HIV, the other without. Participants are evaluated by various methods (ECG, densitometry, chest and lumbar X-ray), questionnaires, a wide range of tests (functional, neuropsychological, social topics, etc.) and are also subjected to immune activation study, inflammation and immunosenescence (inflammation in the elderly) studies.

Aging in people with HIV has generated so much interest that it has become the subject of an international workshop organized by the Foundation under the title “Comprehensive Management of Aging in HIV-Infected Subjects”. The first workshop was held in 2016 in Barcelona with the aim of sharing knowledge across disciplines about the management of aging with HIV. The 2017 workshop will be held in Buenos Aires.

Further information at www.aginghiv.com

WHAT DO THESE TERMS MEAN?

SYSTEMIC INFLAMMATION

The immune system of people with HIV is permanently activated in order to combat the virus: this involves systemic and chronic inflammation that can cause harmful effects to the body, such as cardiovascular, bone or renal problems. In addition, aging itself is associated with particular inflammation effects, aggravating or accelerating these processes.

EARLY AGING

Aging is a structural and functional deterioration of the organism. People with HIV present more comorbidities and may age earlier than those not infected by the virus.

THE MOST FREQUENT COMORBIDITIES AMONG OUR PATIENTS:

CARDIOVASCULAR RISK

Compared to the general population, people with HIV suffer from more cardiovascular disease. Each antiretroviral drug has a different impact on metabolic alterations and it is therefore better to use those that affect them less, especially in patients with additional risk factors.

- A recent article on the IP Endothelium study carried out in collaboration with the cardiology department of the Germans Trias i Pujol Hospital showed that antiretroviral treatment (specifically with protease inhibitor drugs) is associated with a negative impact on the lipid profile of blood, causing, for example, an increase in cholesterol or triglycerides. The aim of this study was to see if, in addition, the treatment might have a detrimental effect on the wall of arteries, the endothelium, which would increase cardiovascular risk.

RENAL DISORDERS

Renal disorders are becoming more and more common in people with HIV. This is related mainly to the increase in life expectancy and the corresponding aging of the population with HIV, but also with a higher prevalence of hypertension, cholesterol or diabetes mellitus, pathologies which affect renal function. Moreover, some antiretroviral drugs can worsen kidney functioning, especially when there are other coexisting pathologies or treatments that are also toxic to this organ.

- 2016 saw the publication of a paper on the role of protease inhibitors in renal function, the fruit of collaboration between the Foundation and the Germans Trias i Pujol Hospital’s nephrology department. This study has centered around detecting microvesicles in the urine and assessing their implications.

BONE TOXICITY

Patients with HIV infection have less bone mineral density and therefore greater risk of fractures due to osteoporosis. Some antiretrovirals are related to these side effects. Regular tests are carried out on people visiting the HIV Unit to detect osteoporosis and, if diagnosed, the effects of different strategies on trying to recover the loss of bone mineral density are being studied.

- The results of the Osteodolu study on the role of dolutegravir protease inhibitor replacement in the recovery of bone mineral density were published in 2016.
- 2016 also saw the start of a new study called Espectrobone 2, in collaboration with ICFO (Catalan Institute of Photonic Sciences). Its goal is to assess the utility of...
performing spectroscopies using a type of laser to evaluate parameters such as blood flow or microvasculature, for example.

**CLINICAL PHARMACOLOGY**

Clinical pharmacology focuses primarily on studying the relationship between drug concentrations in the blood and its therapeutic or detrimental effects, both in the general population and in specific patient groups.

In addition, this research line studies the interactions that may exist among antiretroviral drugs, both between them (antiretroviral therapy combines several drugs) and with other drugs not directly related to HIV treatment.

The clinical pharmacology line collaborates with projects from other research lines, such as the one that studies aging or the immunology and vaccines lines.

**DURING 2016**

- Collaboration continued in international studies to evaluate the safety of antiretrovirals and possible changes in the concentration of these drugs in the blood of pregnant women. The study of pharmacokinetics in this particular population is essential because a decrease in the concentration of drugs during pregnancy could increase the risk of treatment failure and the consequent transmission of HIV to the newborn.

- The results of the DTG_HD clinical trial were published in the journal Antimicrobial Agents and Chemotherapy. This study evaluated the elimination of the drug dolutegravir in patients with chronic renal failure who undergo hemodialysis treatment.

- Results were published from a new area of research focusing on the use of software to simulate clinical tests that evaluate possible drug interactions in populations of patients who are difficult to study in the clinical setting, such as people with HIV who have cancer and are receiving treatment with chemotherapy and antiretroviral therapy at the same time.

- 2016 saw growing cooperation with the immunology and vaccines line. Work began on both the BCN02-Romi clinical trial, which combines a therapeutic vaccine against HIV with the drug romidepsin (a reactivator of viral latency), and the design of clinical trials with new vaccine prototypes. In addition, work was carried out to optimize the design of experiments in animals with a new therapeutic vaccine for HIV based on neutralizing antibodies. These may prove useful in both the prevention and the eradication of HIV.

**COINFECTION WITH HEPATITIS AND COHORTS**

HIV coinfection with Hepatitis B or C is frequent. In fact, viral hepatitis is considered one of the principal causes of death in HIV-positive people, with around 30% of HIV sufferers thought to be coinfected. The main complications of chronic infection by hepatitis C are cirrhosis and liver cancer.

As a result, many people with HIV have to fight both infections at the same time. It is essential to advance in the understanding of the factors that lead a person to present hepatic complications in order to be able to prevent, diagnose and treat them.

In 2015, with the introduction of new drugs against hepatitis C (those that do not use interferon as a base), a whole new therapeutic path was opened for patients infected with this virus. The HIV Unit created a multidisciplinary committee to determine which patients should receive priority this new medication according to mainly two factors, the genotype of the virus and the degree of liver fibrosis.

Since then, this new treatment regimen has begun to be offered to priority patients, although implementation is naturally constrained by since this treatment represents a very high cost for the public health system.

**DURING 2016**

- Testing continued to measure the progress of liver fibrosis using the Fibroscan instrument in HIV patients who, after being treated for the hepatitis C virus, showed a sustained viral response.

- The results were published of a study conducted in conjunction with the IrsiCaixa AIDS Research Institute on the short-term impact of interferon alpha on HIV persistence and its effects on immune system activation in combination with antiretroviral therapy.

- 2016 saw the publication by the scientific journal Clinical Infectious Diseases of the results of an observational study carried out with the cohort of patients called PISCIS, which includes data compiled since January 1998 on 14,539 patients from 10 hospitals in Catalonia and 2 in the Balearic Islands. Based on the data, it can be inferred that the monitoring of CD4 cell counts (which indicate the status of the immune system) can be safely performed annually on patients with monoinfection for HIV provided that they have suppressed viral loads and previous CD4 counts above 300 cells/μL. In the case of patients coinfected with HCV, the annual frequency would also be safe with previous CD4 counts above 350 cells/μL.
A retrospective observational study was conducted in Spain on the combination of different treatments for hepatitis (Paritaprevir / ritonavir / Ombitasvir, Dasabuvir or Ribavirin) and its effectiveness in patients with chronic Hepatitis C.

**COINFECTION BY THE HUMAN PAPILLOMAVIRUS AND OPPORTUNISTIC INFECTIONS**

In people with HIV, with a weakened immune system, opportunistic infections can emerge. These are diseases related to the progression and development of AIDS as a result of lower defenses.

Infection by the Human Papillomavirus (HPV) is the most common sexually transmitted infection. It is estimated that 75% of the general population will acquire it during their lifetime. In general, the body eliminates HPV naturally without causing any injury. However, in people with HIV, who have weakened immune systems, the virus can cause the development of cancer precursor lesions which in the worst scenario may evolve into cancers (mainly in the cervix and anus).

Results obtained in these 11 years of preventive medicine and research show a high percentage of people with HIV co-infected with HPV suggesting an urgent need to implement routine tests for the detection of HPV in men and women with HIV, regardless of their sexual practices.

**DURING EL 2016**

- A paper on the detection of anus lesions in HIV-positive men who had had normal cytologies (despite the presence of human papillomavirus) eight years earlier was published in the journal HIV Medicine. This evolution towards precancerous lesions again points to the need to monitor these patients in proctology visits.

- Research continued that explores the relationship between HIV and HPV. HPV is not expressed in the same way in all HIV sufferers, with some remaining completely asymptomatic while others end up aggressively evolving towards precancerous lesions and even cancers. It is of considerable scientific interest to understand why this is so.

**Various studies were conducted on the relationship between HIV and other sexually transmitted infections:**

- Progress continued to be made in the Check-Early study being carried out in collaboration with IrsiCaixa and BCN Checkpoint (a community center in Barcelona for HIV and other sexually transmitted infections detection managed by Projecte dels NOMS-Hispanosida). Check-Early is a study on the incidence and prevalence of sexually transmitted infections (STIs) among men who have sex with men (MSM) and transsexual women. It includes a free and confidential early detection program for these infections: for one year, participants have access to major STI controls including HIV, syphilis, chlamydia, gonorrhea and hepatitis A, B and C.

The project is also intended to demonstrate that the cooperation between a community center like BCN Checkpoint and a leading hospital can be very efficient and
effective at reducing to a minimum the time between a person’s initial infection with HIV and the moment following treatment when their viral load becomes undetectable. This permits infected people to maintain normal CD4 levels or help them to recover, have fewer reservoirs of HIV, reduce their anxiety about the risk of transmission and, in short, have a better quality of life.

IMMUNOLOGY AND VACCINES

The immunology and vaccines research line tracks patients participating in studies with immunomodulators (the kinds of drugs that stimulate the growth and production of the body’s defenses) and coordinates the clinical implementation of projects from HIVACAT, the program for the research and development of an HIV vaccine in Catalonia.

HIVACAT operates through an unprecedented public-private consortium in Spain, placing our country at the forefront of international research conducted in this area. It consists of the IrsiCaixa AIDS Research Institute and the AIDS and Infectious Diseases Service of the Clinic Hospital in Barcelona. HIVACAT investigates the development of a new HIV vaccine in coordination with the Esteve pharmaceutical company and with the support of La Caixa bank, the Departments of Health and Innovation and Universities and Enterprise of the Government of Catalonia, and the Clinic Foundation.

The research goals of the immunology and vaccines line are centered around three large areas:

1. Design and development of preventative and therapeutic vaccines.
2. Creation and maintenance of cohorts of patients for the study of factors related to the natural control of HIV infection and phenomena associated with the early initiation of antiretroviral treatment.
3. Studies of the eradication of the virus through the use of immunomodulators, reactivating medication or purges of the viral reservoir.

WHAT DO THESE TERMS MEAN?

PREVENTATIVE vs THERAPEUTIC VACCINE

An effective vaccine provides the immune system with tools to fight against a particular microorganism and prevent it from causing disease. Although there is currently no vaccine to prevent or treat HIV, researchers are preparing and testing experimental vaccines against this virus. HIV vaccines that are used to prevent the infection are called preventative vaccines. Vaccines used to help control the virus in people who are already infected are called therapeutic vaccines.

VIRAL RESERVOIR

Viral reservoirs are HIV-infected cells where the virus remains latent despite antiretroviral therapy.

DURING 2016

Cohort follow-up

- **Early_cART (PI-14-072):** This is a cohort study started in 2014 to monitor individuals with acute/recent and documented HIV-1 infection, and early treatment start. The objective is to have a clinical platform of candidates to participate in clinical trials of therapeutic vaccine and eradication strategies and, in turn, to have biological samples collected prospectively from the start of antiretroviral therapy to study the immune response, and to establish the viral reservoir and changes in the intestinal microbiome. No clinical intervention is performed beyond taking additional biological samples and stool collection for microbiome studies. For the creation of the cohort, we have been working closely with BCN Checkpoint and other community centers involved in the detection of HIV and other sexually transmitted diseases. Currently researching in this line is preforming a prospective follow-up of the more than 200 people in this cohort.

- **Controllers (EO-09-042):** This cohort study began in 2009 in collaboration with Vall d’Hebron Hospital and several prisons in Barcelona to prospectively follow people with HIV with an undetectable or low viral load despite the absence of antiretroviral treatment, those known as elite or viremic controllers. The goal of this cohort study is to understand the virological and immunological mechanisms that work to spontaneously control HIV and which could help us to develop new therapeutic vaccines for HIV. No clinical intervention is involved other than the extraction of additional biological samples. The Late Progressors or Losers project studies the factors that cause patients who have been controllers of the virus to lose this capacity. It comprises the active follow-up of more than 60 people with different HIV-infection-controlling phenotypes.

Clinical trials of therapeutic vaccines:

- **January 2016 saw the creation of Aelix Therapeutics, a spin-off of the HIVACAT program.** This company focuses on the development of immunotherapies against HIV infection and will be in charge of carrying out clinical trials with the HTI candidate for a therapeutic vaccine, designed by IrsiCaixa researchers. The HTI model starts from a unique focus since it bases itself on the immune response of people who are able to control HIV infection in the absence of antiretrovirals. Importantly, HTI has the potential to become the first immunotherapy able to efficiently cure HIV. Human trials will begin in 2017.

- **The BCN02-Romi clinical trial also got underway in 2016.** This is an eradication...
study that evaluates the efficacy of a ‘Kick & Kill’ strategy using therapeutic vaccines that have thus far proved to be most immunogenic (HIVconsv) in combination with the most powerful latent viral reactivator medication available at the moment (RMD, Romidepsin). 15 participants were included who initiated treatment early and had been previously vaccinated in the BCN01 clinical trial. The study, financed through competitive bid by the AES (FIS modality) in 2015 (PI15/01188), is led by Dr. J. Moltó and Dr. B. Mothe. Besides the Foundation, participants include the Clinic Hospital, BCN-Checkpoint community center, Oxford University and the Celgene pharmaceutical company. Though the study has not yet concluded, preliminary results were presented at CROI 2017.

- The iHIVARNA-01 clinical trial, which has been testing the iHIVARNA therapeutic vaccine candidate, was completed in the course of 2016. This study involves 21 patients with chronic but appropriately suppressed HIV-1 infection who have been distributed consecutively to receive increasing doses of the iHIVARNA vaccine containing the HT1 immunogen and the Trimix adjuvant. The objectives of the clinical trial include studying the safety of the vaccine administration regimen, the immunological response produced and the efficacy of the viral reactivation. This clinical trial has been directed and coordinated from the Clinic Hospital, in Barcelona. The Fight AIDS Foundation participated primarily by recruiting patients. In 2017 the second phase of the study (iHIVARNA-02) will be initiated, with the participation of five additional international centers.

More information at ihivarna.org.

PSYCHOLOGY

Like people with other chronic illnesses, HIV sufferers require integrated care, which must include psychological support. The Foundation not only provides that support but also promotes psychotherapeutic intervention to help both patients and those around them with the concomitant emotional difficulties that arise. This has led to a number of different studies focusing on improving patients’ quality of life.

Research in the psychology line focuses on the study of disorders in people with HIV that can be caused by problems related to chronic infection and aging, the early detection of cognitive and central nervous system impairment, and the effects of physical comorbidities on psychological status and quality of life of those affected.

WHAT DO THESE TERMS MEAN?

COGNITIVE IMPAIRMENT

This refers to the alteration in the functioning of cognitive processes such as memory, learning or concentration. The main clinical issues are detecting the presence of such an impairment and then attempting to identify its causes and the factors that influence its persistence.

DURING 2016

- 2015 saw the completion of the TRIANT-TE study, a clinical trial that compared the efficacy and safety of two pharmacological strategies to address neurocognitive alterations in HIV-infected patients. The main findings of the study were presented by Jose A. Muñoz-Moreno in 2016 at the Ninth International Symposium on Neuropsychiatry and HIV. Final results have been fully analyzed and are currently under review for publication in a major scientific journal.

- In January 2016 the “Executive summary of the consensus document on psychiatric and psychological issues affecting adults and children with HIV” was published. This is a compendium of information on all the psychiatric and psychological alterations that people with HIV may experience. This document was signed by national experts working in collaboration with the Secretariat of the National Plan on AIDS, the Spanish Society of Psychiatry, the group for the study of AIDS/SEIMC (GeSIDA), and the Spanish Society of Pediatric Infectology. Psychologists from the Fight AIDS Foundation participated actively in the drafting of this document.

- In October 2016, Jose A. Muñoz-Moreno was a plenary speaker at the 2016 Ontario HIV Treatment Network (OHTN) HIV Endgame Conference in Toronto. The topics of his two plenary sessions were “HAND Diagnostic Issues/Health Care Practitioner Perspectives: A Psychosocial Approach” and “Strategies for Cognitive Impairment: Non-Pharmacological Behavioral Interventions”.

- In November 2016 the 8th GeSIDA National Conference and 10th RIS Teaching Meeting was held. Jose A. Muñoz-Moreno presented a poster called "Over 60" which provided an overview of psychological data obtained through observing, from a multidisciplinary and integrated perspective, a cohort of HIV sufferers aged 60+. This cohort study is being led by researchers at the Fight AIDS Foundation and the HIV Unit of the Germans Trias i Pujol Hospital under the leadership of Dr. Eugenia Negredo.

- Participants for the ARBRE study continued to be recruited over the course of 2016. The goal of this study is to gain a comprehensive understanding of how starting antiretroviral therapy can benefit cerebral functioning. The cerebral functioning of all participants in this study, whether HIV patients in the early stages of antiretroviral treatment, patients starting treatment later, or control subjects uninfected by HIV, will be evaluated by measuring daily functioning, quality of life, emotional status and, as of recently, anatomical and functional cerebral markers using the latest generation functional magnetic resonance. Recruiting for this study is expected to close in April 2017.

- The substudy BCN02-Neuro also got underway in 2016. The aim of this study, closely linked to BCN02-Romi, is to investigate the impact on the central nervous system of an eradication strategy combining a type-HIVconsv vaccine with romidepsine.

- Regarding education, 2016 was the third year the psychology research line has collaborated with the Open University of Catalonia (UOC) in the development context of a
Master's in General Health Psychology, under the coordination of Jose A. Muñoz-Moreno, an expert in Health Psychology. This academic year, moreover, the Foundation signed an agreement to open a new internship linked to this master's, which not only enhances the quality of the master's itself but also represents an innovation for this sort of educational program.

- In June 2016, under the guidance of Foundation researchers pursuing the psychology line, Estela López-Masramon presented her thesis for the Autonomous University of Barcelona's Master's in Clinical Neuropsychology for Children and Adults. The thesis analyzed the accuracy of a screening tool for cognitive impairment in different age groups with HIV infection.

- María-José Ferrer, the head of the psychology research line, led two audiovisual communication projects that took place in 2016:

  The broadcasting of an interactive documentary entitled Vertical/Horizontal targeted at 14-23-year-olds. It is an APP-doc designed to raise awareness about the social stigma associated with HIV through the social media. For further information and download links see www.verticalhorizontal.cat.

  The creation of a guide named “Building My Wall”, which includes an animated video clip. The guide is intended to serve as a new resource for patients at the HIV Unit to reinforce their adherence to antiretroviral treatment. It is hoped that this model of intervention to improve compliance with treatment will be exported to other centers and countries.

**DURING 2016**

- The dietetics team continued to collaborate in projects with the other research lines of the Foundation:

  It worked closely with the research team studying the interaction between aging and HIV by assessing nutritional status in cohorts of older people with HIV.

  In cooperation with the research line examining complications associated with HIV and antiretrovirals, the Foundation's dieticians explored issues such as bone mineral density, kidney impairment and lipodystrophy.

  In relation to the study of microbial genetics, the team played a role by describing the diet of people with HIV in order to link this factor to the different composition of microbiome profiles.

- During 2016 the dietetics line worked on educational projects related to nutrition for different groups with HIV:

  Development of a section with dietary-nutritional advice for the APP + AppProp mobile application to encourage the use of new technologies among patients of the HIV Unit.

  Preparation of a leaflet about healthy food for first visits and for the Foundation's waiting room.

  Educational talk aimed at residents of Can Banús (Fundació Acollida i Esperança).

**DIETETICS**

Diet has been shown to be a vitally important factor from the early stages of HIV infection. Though a good diet does not play a role in the prevention of HIV and will not cure AIDS, it can contribute to a patient's treatment and improve their quality of life. This is because a balanced diet reinforces the immune system and helps the body combat the possible effects of the disease.

The study of body composition plays an important role in the assessment of nutritional status because it permits the quantification of the body's reserves, thus allowing us to detect and correct nutritional problems like excess weight or obesity on the one hand, or malnutrition on the other. The measurement of body composition using densitometry (DEXA) can provide assessment going beyond weight and the traditional body mass index (BMI) to determine body fat distribution.
RESEARCH SUPPORT

MONITORING OF CLINICAL STUDIES

Study monitors are qualified professionals with specific training in the management of clinical trials: they monitor the progress of each trial from its inception to the final presentation of results to ensure that it is carried out in full accordance with good clinical practices.

- Providing support during the drafting of the protocol and the documentation for each specific project.
- Obtaining the necessary legally-required approvals depending on the study and prevailing legislation.
- Preparing and maintaining the sponsor and investigator files.
- Making initial, monitoring (protocol follow-up) and closure visits to participating centers.

Although monitoring was originally limited to only trials related to HIV, the expertise of the team enabled it to manage studies in other therapeutic areas led by external investigators or promoters (neurology, cardiology, hepatitis B, etc.). Since 2008, we have operated under a more generic name, FLS-Research Support.

STATISTICS

The statistics team contributes to the research projects at the Fight AIDS Foundation by applying the appropriate statistical techniques and methods at each stage of a project. It participates in the design of the study, monitors data collection, and lastly, analyses the results and presents conclusions.

Through an educational cooperation agreement with the Polytechnic University of Catalonia (UPC), students studying statistics at the university are encouraged to complete their training at the Foundation. Additionally, our partnership with the UPC means that the Foundation has the opportunity to work with the most modern techniques and latest advances in the statistics field.

RESEARCH GRANTS AND FINANCIAL ASSISTANCE

Clinical trial to evaluate drug interactions between darunavir/cobicistat and etravirine in HIV-infected patients.
- Janssen Cilag, pharmaceutical company
- Researcher: José Moltó

Project: Pharmacokinetics of newly developed antiretroviral agents in pregnant HIV-infected women in the PANNA network.
- PANNA network
- Researcher: José Moltó

TRIANT-TE: A prospective randomized controlled study to compare the efficacy and safety of two different pharmacological strategies to treat neurocognitive disorders associated with HIV infection.
- CAIBER grant (Consortium for Biomedical Networking Research Support)
- Spanish Ministry of Health and Social Policy under 2010 plan to promote independent clinical research.
- Researcher: José A. Muñoz-Moreno.

RALATOR: A study of the ability of Atorvastatin to reduce inflammation related to the aging of HIV-infected patients over 60 receiving a protease inhibitor-based regimen as compared to a Raltegravir one.
- MSD, pharmaceutical company
- Researcher: Eugenia Negreda

Project: Pharmacokinetics of newly developed antiretroviral agents in pregnant HIV-infected women in the PANNA network.
- PANNA network
- Researcher: José Moltó

Project: Efficacy and safety of the HLIVconsy with Romidepsina vaccine in the reduction of the viral reservoir and control after the interruption of cART. PK/PD Population Analysis and study of predictors.
- Researchers: Bea Mothe and José Moltó.

Project: Circulating MicroRNAs as potential biomarkers of liver disease in HIV-infected patients.
- FIS Grant. Spanish Ministry of Economy and Competitiveness.
- Researcher: Cristina Tural

Project: Coevolution of the intestinal microbiome and the inflammatory response after acute infection by the Human Immunodeficiency Virus-1.
- Spanish Ministry of Economy and Competitiveness through the Carlos III Institute and the Feder Foundation.
- Researcher: Roger Paredes

PROTEST: Utility of genotypic tropism of HIV-1 from proviral DNA to guide treatment with CCR5 antagonists in subjects with undetectable HIV-1 viral load.
- ViiV Healthcare, pharmaceutical company specialized in HIV.
- Researcher: Roger Paredes

Project: The Frail Elder Microbiome.
- Catalunya-La Pedrera Foundation – SARquavitae Foundation
- Researcher: Roger Paredes

- Philanthropic donations
- Researcher: Roger Paredes
The Foundation shares the expertise gained from our research activities in four main ways:

• We participate in the development of clinical guidelines and policies for action on HIV at a global level.
• We facilitate the application of the knowledge generated in HIV research to other fields of medicine, such as hepatitis C or cancer.
• We create experts in HIV/AIDS by periodically organizing and participating in courses and seminars to share information about the latest updates in the field. In addition, several internship positions at in the HIV Unit are offered to university students.
• We provide professional advice on research projects in Africa.

Dissemination of knowledge among the general population is also one our goals.
Organization and participation in symposia, conferences and seminars for scientific and clinical updates:

Post-CROI
The Foundation organizes this annual event, which is a summary of the highlights of the CROI (Conference on Retroviruses and Opportunistic Infections), one of the most important conferences on HIV/AIDS worldwide. A major draw for healthcare professionals in Spain, it is known for its outstanding quality and high attendance.

“Aging in the HIV-patient” (January 2016)
Various current issues on related to HIV, inflammation and aging were reviewed at this all-day informative session, thanks to the participation of experts in different fields. It was addressed to all professionals involved in care for HIV sufferers, with a special focus on older patients.

“Comprehensive Management of Aging in HIV-Infected Subjects” (November 2016)
At this day-and-a-half-long workshop: the most current issues of HIV infection and aging were reviewed from a multidisciplinary point of view. Other issues such as the emergence of resistance mutations to new antiretroviral drugs or the management of HCV coinfection in people who are aging with HIV were also addressed.

The Seventh Annual Conference on eradication, vaccines and immunological recovery in HIV
The main objective of this gathering is to share and discuss the main advances in the field of HIV eradication.

Teleconferences on resistances
These have been held regularly since 2004 and are telephone sessions during which clinical cases involving resistance to antiretroviral treatment are discussed. The procedure is highly practical: the participating hospitals send a clinical case and decisions have to be made on the most suitable treatment according to the patient’s profile, their medical history, etc. Three experts assess these cases prior to the teleconference: Dr. Jonathan Schapiro (Stanford University), Dr. Santiago Moreno (Ramón y Cajal Hospital) and Dr. Bonaventura Clotet (Germans Trias i Pujol Hospital). During the teleconference, all of the participants discuss the case and reach a conclusion. This is a particularly useful resource for centers with few HIV specialists and an important teaching tool for resident and student doctors. Gilead and Janssen are corporate sponsors.
Project in Mozambique

Just over three years ago, Sister Elisa Verdú contacted the Fight AIDS Foundation. This physician and missionary from Alcoy, Spain, is the driving force and soul of Carmelo Hospital, health center located in the urban area of Chokwe, Gaza Province, one of the places in Mozambique most seriously affected by HIV. In operation since 1995 with the help of the sisters of the charity community of Saint Paul and the community of Saint Egidio, Carmelo Hospital has set the standard for the management of patients infected with HIV and tuberculosis in the entire region.

It is in this context that Sister Elisa Verdú first called up the Foundation team to help solve, from a distance, some of the Hospital’s more complicated clinical cases. Nonetheless, despite our best efforts, it quickly became clear that the assistance we proposed could not always be put into practice on the ground due to the lack of clinical resources available at the Hospital:

- The Hospital lacked the facilities to perform many of the most common diagnostic tests, and lacked specialized training for health personnel as well as essential consumables. To better understand the situation and determine how our collaboration could be made more effective, Dr. Boris Revollo undertook a month-long visit to Mozambique in October 2014.

As a result of that visit, the Foundation is now in a position to try to solve matters arising on the ground, focusing on advice for the implementation of new antiretroviral treatment strategies and the analysis of drug resistance. All proposals for action will be developed jointly with the Carmelo Hospital staff, combining our methodological experience with their excellent knowledge of the local reality.

Full financing for this project is nearly complete, our intention being to deploy an action program as soon as possible.

A key element of our relationship with Carmelo Hospital is knowledge transfer between the staff of the two centers. For example, between September and December 2016, Edy Nacarapa, clinical director of the Carmelo Hospital, carried out an internship on pathogenesis and treatment of HIV here at the Foundation in Badalona, Spain. By the same token, from now until mid-2017, our nurse Anna Chamorro will be working as a volunteer at the Carmelo Hospital in Mozambique.
RESISTANCE TO ANTIRETROVIRAL TREATMENT

HIV is said to be “resistant” to an antiretroviral drug when it continues to multiply in a patient even when the patient is taking the drug. Resistance usually occurs when the virus is not completely controlled by medication, which is usually a consequence of poor adherence to treatment. As it multiplies, the HIV mutates almost every time it produces new copies of itself, and it is precisely these mutations that can cause resistance. On the other hand, it is often the case that people who have become infected with HIV are already resistant to one or more drugs.

Resistance testing helps doctors make better treatment decisions for their patients, and, fortunately, new drugs have been developed to attack the virus from different fronts in order to be able to fully control it. While such varied treatment options are available in developed countries, unfortunately, access is limited in developing countries, particularly on the African continent, where 70 per cent of the world’s HIV-infected population is concentrated. Currently, treatment regimens available in these countries are based on drugs that are very likely to generate resistance if not taken properly, and more potent drugs are used as rescue alternatives for patients in whom the former fail. Furthermore, in some countries access to this second line of treatment is subject to many administrative obstacles, with the result that patients in need may only receive the treatment they need after a year’s delay.

Beyond the complications affecting the speed of delivery, there is the problem of patients who are infected with viruses that have already developed resistance to first-line treatment, in what is known as “transmitted resistance”. Transmitted resistance rates around 15-20% to some of the most commonly used drugs have been reported in many developing countries, implying that some patients are receiving suboptimal treatments with the risk of creating even more resistance to other drugs that are co-administered.

If suboptimal treatments continue to be initiated, more drug resistance will be generated, and treatment alternatives for patients in developing countries will gradually become depleted. Unless this cycle can be broken, we will not be able to control the epidemic in the most heavily affected geographical areas, the epicenters of HIV infection worldwide.

Dr. Roger Paredes, one of the professionals of the Fight AIDS Foundation behind this collaboration project with the Carmelo Hospital, has been a member of the Steering Group of the World Health Organization on HIV Resistance to Medicines (WHO HIV ResNet) since 2015. This is the WHO’s main advisory body in the field of resistance, addressing issues such as measures to tackle drug resistance and ensure resistance surveillance and monitoring, and the formulation and deployment of prevention strategies to ensure the long-term sustainability of decisions taken by the WHO.
The Foundation regularly organizes events and campaigns in order designed to increase public awareness of and sensitivity to HIV/AIDS and the social stigma that surrounds it. Some of these activities also aim to raise funds to finance research projects.
3rd ANNUAL “NIT PER LA RECERCA” FUNDRAISING DINNER
Thursday April 14, 2016. Restaurant Ca l’Enric, La Vall de Bianya in the Garrotxa region of Catalonia (La Garrotxa)

Donations raised by this event, were used to fund the research projects of the Chair of AIDS and Related Diseases of UVIC-UCC, directed by Dr. Bonaventura Clotet, as well as two student scholarships focused on the study of the human microbiome in relation to the fight against AIDS.

The event was attended by a large number of distinguished political figures, led by Mr. Carles Puigdemont, President of the Generalitat (the governing body of Catalonia).

Actor Marc Clotet and magician Mag Lari served as hosts of the event, which included performances by comedians Xuriguera and Faixedas, the BCN Messengers choir and the magician Mag Lari himself.

“LEGEND” CONCERT
On June 2, 2016, the cover band Legend offered a concert at Barcelona dance hall “Luz de Gas”, adapting some of the best musical themes in the history of contemporary pop-rock. The revenue obtained from the sale of tickets was intended entirely for research projects of the Foundation.

2nd ANNUAL “NIT SOLIDÀRIA COSTA BRAVA”
Thursday 8 July, 2016. Mas del Vent, Palamós

For the second consecutive year, the Fight AIDS Foundation, Focus Engelhorn, Luis Coromina Foundation and Bonart joined forces to raise funds for the Fight AIDS Foundation.

This dinner-show in the Roman Cloister of the Mas del Vent in Palamós, on the Costa Brava, was hosted by the magician Mag Lari and included performances by Cobosmika, an international dance company based in Palamós, Zip Zap Circus, South African circus school, and the magic of Mag Lari himself. A unique evening with a dinner served by Michelin star chef Nandu Jubany.

AIDS WORLD CYCLING
November 12, 2016. Sala Barts, Barcelona

On Saturday, November 12, from 10am to 10pm, participants in this 12-hour indoor cycling marathon took a virtual around-the-world trip of 12 hours, passing through various territories and finding out how HIV/AIDS affects each of them. The test was divided into 12 sessions, and each session corresponded to one stage of the race.

Individuals cyclists could participate by attending one or more sessions while teams (between 3 and 12 people) had to take care of a single bicycle and keep it in motion during the full 12 hours of the test. Each participant and each team had to set as a goal an amount of money they intended to collect between the time of registration and the day of the test, money which would go entirely to the fight against HIV/AIDS.

The event was organized by volunteers with the collaboration and sponsorship of several sports centers, companies and institutions.
7th ANNUAL GALA SIDA

November 21, 2016. Palacio de Cibeles, Madrid

The Gala Sida, directed by Spanish pop star Miguel Bosé, is the most important event organized by the Foundation annually. It has been celebrated since 2010 and has become one of the most important solidarity events in Spain, bringing together annually around 600 attendees including celebrities and institutional representatives from the worlds of business, scientific, culture, entertainment, media, fashion and sports.

This year, the Gala was held for the first time in Madrid at the “Crystal Gallery” of the Cibeles Palace, with the collaboration of the Madrid City Council.

Actress Belén Rueda was the ambassador of the event for the second consecutive year. Boris Izaguirre hosted the gala and model Laura Sánchez provided live coverage of the guests as they arrived and proceeded down the red carpet. In addition, the Gala was graced by the presence of the renowned bailaora Eva Yerbabuena, winner of the 2001 National Dance Award.

During the dinner the Aids Awards were delivered. The Fight AIDS Foundation annually gives a prize to one individual and one institution for their career and their commitment to the fight against this disease. The winners of the 2016 edition were Professor Douglas D. Richman, director of the Center for AIDS Research at the University of San Diego, California, and Room Mate Hotels.

#BorraelSida (#EradicateAIDS) Campaign:

Each year, parallel to the Gala, the Foundation carries out a public awareness campaign. The 2016 campaign was called “#BorraelSida” (#EradicateAIDS) and was carried out with the collaboration of Playground in order to reach young in particular, and to obtain donations through the web page borraelsida.com.

Playground broadcast two videos on social media, the first with data showing that AIDS is still a serious problem nowadays and the second, a special tribute to the artist Keith Haring, who died in 1990 a victim of AIDS. Also, 12 illustrations freely contributed by various emerging artists and inspired by the disease were published over various social media.

Adhesions to the campaign:

- Madrid’s City Council supported the public awareness campaign by putting up banners and lighting up the facades of various public buildings with red floodlights. In Barcelona, public buildings are lit up with red on December 1, World AIDS Day.
- Also on December 1, the “Los40 MUSIC AWARDS” gala was held at the Palau Sant Jordi, in Barcelona. “Los 40” allocates part of the donations it collects to a different solidarity cause each year, and this time the beneficiary was the Fight AIDS Foundation. In addition to the brand presence of the Foundation and the campaign #BorraelSida at the gala, the dinner of nominees and other promotional actions, this radio station and the Prisa media group in general focused on the promotion and dissemination of the message of social awareness.
- The “Rodilla” restaurant chain collaborated in the campaign by creating a solidarity sandwich to raise awareness among consumers, and all its employees wore with a T-shirt with the slogan “Help us to erase its footprint”, specially designed by the Kukuxumusu studio. In addition, actress Belén Rueda (ambassador of the Gala Sida) participated with Albert Tuldrà (manager of the Foundation) in the encounter “Rodilla Conversation” in the Estrella Damm Lounge in the Puerta del Sol.
On the eve of World AIDS Day, the People in Red party was held, a dinner-show for 400 people at El Palauet in Barcelona. All attendees were required to wear something red, the color of the tie that symbolizes the fight against AIDS. Following this same code, the dinner, created and served by chef Nandu Jubany, also consisted of dishes made with red ingredients.

Hosts for this evening were journalist Josep Puigbó and model Judit Mascó, and attendees were able to enjoy various shows during the party: the flamenco of the bailaora Aloma de Balma; the clown show by Guillem Alba & la Marabunta; the gospel group “The Sey Sisters”; and acrobat Enric Petit. The night ended with DJ Fede Sardà’s music.

Numerous authorities, celebrities and members of civil society attended the first of what is hoped will become an annual solidarity event that no one will want to miss.
Board:
Its function is to ensure the fulfillment of the core aims of the Foundation, to assess the work carried out, to oversee management actions and to appoint executive positions. Its members are representatives of different areas of society who, with their different awareness and needs, initiate new challenges for the organization.

Chairman:
Bonaventura Clotet

Secretary and Treasurer:
Guillem Sirera

Members:
Leopoldo Biete, Maria Llatjós, Caterina Mieras, Lola Mitjans, Roger Paredes, Montserrat Pinyol, Gemma Recoder, Joan Romeu, Mónica Segarra, Elvira Vázquez i Anna Veiga

Clinical research associates
Registered nurses

** MEDICAL ASSISTANCE
** NURSING
** PSYCHOLOGY
** DIETICS
** SOCIAL WORK
** OTHER PROFESSIONALS

1. Clinical virology and the microbiota genome
2. Aging and complications associated with HIV and antiretrovirals
3. Clinical pharmacology
4. Confection with hepatitis and cohorts
5. Confection by the human papillomavirus and opportunistic infections
6. Immunology and vaccines
7. Psychology
8. Dietetics

* Clinical research associates
* Registered nurses
Immunology and Vaccines Lines.

Opportunistic Infections and Coinfection by HPV and Nurse.
Patricia Cobarsi
President.
Physician and Researcher.
Bonaventura Clotet
Clerical Worker.
Sonia Clemares
Opportunistic Infections Line.
Coinfection by HPV and Nurse.
Anna Chamorro
Diseases Unit.
Clinical Trials of the Infectious Nurse.
Isabel Campos
Physician and Researcher.
Clinical virology and Antiretrovirals line.
associated with HIV and Complications associated with HIV and antiretrovirals line.
Physician and Researcher.
Anna Bonjoch
Susana Benet
Germans Trias Hospital
Collaborator: Pharmacist at Germans Trias Hospital.
Antoni Tarrats
Collaborator: Gynecologist at Germans Trias Hospital.
Jéssica Toro
Clinical Trial Monitor.
Albert Tuldrà
Manager.

Isabel Bravo
Nurse.
Clinical virology and microbiome genome line.

Isabel Campos
Nurse.
Clinical Trials of the Infectious Diseases Unit.

Anna Chamorro
Nurse.
Coinfection by HPV and Opportunistic Infections Line.

Sonia Clemares
Clerical Worker.

Bonaventura Clotet
Physician and Researcher.
President.

Patricia Cobarsi
Nurse.
Coinfection by HPV and Opportunistic Infections and Immunology and Vaccines Lines.

Pep Coll
Physician and Researcher.
Coinfection by HPV and Opportunistic Infections Line.

Ross Cranston
Physician and Researcher.
Coinfection by HPV and Opportunistic Infections Line.

Crisanto Díez
Collaborator: Head of the Psychiatry Department of Germans Trias Hospital.

Laura Duran
Public Relations and communication.

Patricia Echeverría
Physician and Researcher.
Aging and complications associated with HIV and antiretrovirals line.

Carla Estany
Dietician.
Head of the Dietetics Line.

Mª José Ferrer
Psychologist.
Head of the Psychology Line.

Sandra Flores
Clerical Worker.

Miriam García
Trainee Clinical Trial Monitor.

Francesc García-Cuyàs
Collaborator: Gastrointestinal Surgeon of Germans Trias Hospital.

Silvia Gel
Clinical Trial Monitor.
Internal Clinical Trials Coordinator.
Quality Manager.

Guadalupe Gómez
Collaborator: Professor of Statistics at the UPC.

Gemma Guillén
Head of Communications and Fundraising.

Cristina Herrero
Clinical Trial Monitor.

Carmen Higuera
Collaborator: Head of the Plastic Surgery Department of Germans Trias Hospital.

Antoni Jou
Physician and Researcher.
Coinfection by Hepatotropic Viruses Line. Cohorts.

Mercè Ferràndiz
Clerical Worker in Clinical Trial Monitoring.

Aroa Nieto
Nurse Coinfection by HPV and Opportunistic Infections Line, and Immunology and Vaccines Line.

Begoña Lemos
Social Worker.

Josep Maria Llibre
Physician and Researcher.
Clinical virology and microbiome genome line.

Ingrid Martínez
Clerical Worker.

Manuel Medina
Collaborator: Plastic Surgeon at Germans Trias Hospital.

Marta Piñol
Collaborator: Gastrointestinal Surgeon of Germans Trias Hospital.

José Molto
Physician and Researcher.
Head of Clinical Pharmacology Line.

Beatriz Mothe
Physician and Researcher.
Immunology and Vaccines Line.

José A. Muñoz-Moreno
Physiologist.
Psychology Line.

María Navarro
Accountant.

Eugènia Negredo
Physician and Researcher.
Head of the Aging and complications associated with HIV and antiretrovirals line.

Aroa Nieto
Nurse Coinfection by HPV and Opportunistic Infections Line, and Immunology and Vaccines Line.

Arely Ornelas
Statistician.

Maite Orodea
Clerical Worker.

Roger Paredes
Physician and Researcher.
Head of the Clinical Virology Line.

Deborah Paris
Clerical Worker.

Núria Pérez
Statistician.

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Àngels Andreu
Collaborator: Pharmacist of Germans Trias Hospital

Susana Benet
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Physician and Researcher. Aging and complications associated with HIV and antiretrovirals line.

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ROSS CRANSTON
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Marta Piñol
Collaborator: Gastrointestinal Surgeon of Germans Trias Hospital.

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Beatriz Mothe
Physician and Researcher. Immunology and Vaccines Line.

José A. Muñoz-Moreno
Physiologist. Psychology Line.

María Navarro
Accountant.

Eugènia Negredo
Physician and Researcher. Head of the Aging and complications associated with HIV and antiretrovirals line.

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Bonaventura Clotet
Physician and Researcher. President.

Patricia Cobarsi
Nurse. Coinfection by HPV and Opportunistic Infections and Immunology and Vaccines Lines.
TOTAL INCOME
2,655,738.53 €
- Grants 4%
- Members and donations 52%
- Services 44%

TOTAL expenses
2,701,943.86 €
- Healthcare 8%
- Administrative and fundraising expenses 27%
- Education 18%
- Research 47%

FUNDING AND FINANCIAL DATA

COLLABORATE

As an individual: you can make a contribution, become a member and participate in the charity activities organized by the Foundation.

As a company: you can collaborate permanently with the Foundation by sponsoring a research project or a specific event.

WOULD YOU LIKE MORE INFORMATION?
Write to: comunicacio@flsida.org
You will find these and other options at www.flsida.org

COLLABORATING COMPANIES AND INSTITUTIONS 2015

ABBVIE
AJUNTAMENT DE BARCELONA
ALBERTO CERDÁN
ARA
ASSESSORIA CODINA
AYUNTAMIENTO DE MADRID
BANCO SANTANDER
BCN CHECKPOINT – PROJECTE DELS NOMS
BOJA NIT
BONART CULTURAL
BOTTEGA VENETA
BRAHLER ICS
BUSQUET ECONOMISTES
BVLGARI
CA L’ENRIC RESTAURANT
CAIXA BANK
CAROLINA HERRERA NEW YORK
CELLER MARTÍN FAIXÓ
CERCLE EURAM GARROTXA
COCA-COLA
COCACOLA IBERIAN PARTNERS
COMMON SENSE
COMUNITY DE MADRID
CORIMBO DE BODEGAS LA HORRA DEL GRUPO RODA
COX ENERGY
CRIMONS
DIPUTACIÓ DE BARCELONA
DIVIK COMUNICACIÓ & MARKETING
EL MUNDO
EL PAÍS
EL PALAUET
EL PUNT AVUI
EL TERRAT
ELена BENARROCH
ENAGÁS
ENDESA
EPSON
ESPAÍ FLORS & FLORISTES
ESPINA
COLLABORATING COMPANIES AND INSTITUTIONS 2015

EUROFIRMS
EUROSELECCIÓ
EXPANSIÓN
FAMILY PRESERVATIUS
FIT 4 LIFE
FOCUS
FOCUS ENGELHORN
FUNDACIÓ BANCÀRIA "LA CAIXA"
FUNDACIÓ CATALUNYA – LA PEDRERA
FUNDACIÓ Damm
FUNDACIÓ HAN NEFKENS
FUNDACIÓ LLUÍS COROMINA
FUNDACIÓ SUÑOL
GAS NATURAL FENOSA
GENERALITAT DE CATALUNYA
GILEAD
GIORGIO ARMANI
GOOGLE
GLOBAL PREMIUM BRANDS
GRAMONA
GRUP ANDREU
GRUP VILAR-RIBA
GRUPO JULIÁ
GRUPO ZETA
GUCCI
HARIBÓ
HOSPITAL GERMANS TRIAS I PUJOL
IBERIA
IGTP
IMPREMTA MAROT
INSTITUT DE RECERCA DE LA SIDA IRSICAIXA
INTERBRAND
JANSSEN
JUBANY
L’ORÉAL PROFESSIONNEL (PELUQUEROS CONTRA EL SIDA)
LA COMARCA D’OLOT
LA RAZÓN
LA VANGUARDIA
LOS 40
LUZ DE GAS
MAF (MAC AIDS FUND)
MAHALA COMUNICACIÓN
MANGO
MEDIAPRO
MEDIASET
MERCÈS
MSD
NH COLLECTION HOTELS
NOEL ALIMENTARIA
OBRA SOCIAL “LA CAIXA”
OLOT TELEVISIÓ
OPTIONS
PAZO DE SEÑORANS
PFIZER
PLAYGROUND
PORCELANOSA
PRISA RADIO
PRO ECUADOR
PRODIGIOSO VOLCÁN
PROVETSA
QUESTIONS
RAC1
RÀDIO OLOT
RENFE
RENTA CORPORACIÓN
REPSOL
RODILLA
ROOM MATE HOTELS
ROTARY CLUB OLOT GARROTXA
SALMÓN ROYAL
SANT PAU, RECINTE MODERNISTA
SCHWINN CYCLING
SEAT
SOM PRODUCCIONS
TOTÉ VIGNAU
TOUS
UNIDOS EN RED
UNIVERSITAT DE VIC – UNIVERSITAT CENTRAL DE CATALUNYA
VIIV HEALTHCARE

ATTACHMENTS
PUBLICATIONS


Llibre JM. Time to get serious with HIV-1 resistance in sub-Saharan Africa. Lancet Infect Dis. 2016 Nov 30. IF: 45.217


Biard-Piechaczyk M. Impaired CD4 T-cell response to autophagy in treated HIV-1 infected individuals. VII GESIDA 2016, 29/11-02/12. San Sebastián


Muñoz-Donate RA. Transdermal Rivastigmine for Cognitive Impairment: Preliminary Results from a Randomized Trial. 9th International Symposium on Neuropsychiatry and HIV. May 26-28, 2016, Barcelona, CAT, Spain (Oral Communication).

Muñoz-Donate RA. Transdermal Rivastigmine for HIV-Associated Cognitive Impairment: Preliminary Results from a Randomized Trial. 9th International Symposium on Neuropsychiatry and HIV. May 26-28, 2016, Barcelona, CAT, Spain (Oral Communication).


Santos JR, Peláez Ibáñez P, Bravo I, Llibre JM, Paredes R, Clotet B, Moltó J. Darunavir/ Cobicistat as Antiretroviral Treatment Simplification Strategy in Patients with Stable Monotherapy with Ritonavir-Boosted Protease Inhibitors in the Clinical Setting. HIV Drug Therapy Glasgow 2016. October 23-26, Glasgow, UK. #P085
STUDIES

Internal studies 2016
The Foundation carries out its research participating in studies conducted by external promoters but also conducting its own clinical trials to answer unresolved questions.

In 2016, the Foundation conducted the following studies:

Clinical Trials

DRV/C-ETR
A clinical trial to evaluate the interactions between darunavir/cobicistat and etravirine in HIV-infected patients.

RALATOR: 2015-002682-30, NCT02577042
Study of the effect of Atorvastatin to reduce inflammation related to aging in HIV-infected patients over 60 receiving treatment with protease inhibitors, in comparison with one based on Raltegravir.

DOLAM: 2015-000274-35
Open clinical trial, randomized and controlled, to evaluate the safety of, tolerability and efficacy of two simplified strategies with Dolutegravir in HIV-infected patients with sustained viral suppression.

RAGTIME
Randomized, double-blind, placebo-controlled trial to evaluate the effect of intensification with raltegravir (1,200 mg QD) on intestinal microbiota composition in subjects with chronic HIV-1 infection.

Observational Studies:

COHORT VPH HOMES: FLS-VPH-2007-01
Prospective study on the prevalence of infection with human papillomavirus (HPV) in oral cavity, anus and penis and the incidence of anal cancer in HIV-positive men.

CONTROLLERS
A cohort study: HIV-positive patients, elite controllers and non-progressors are tracked prospectively.

LATE PROGRESSORS
Characterization of immunological, genetic and viral factors that determine loss of control of the viral in the slow-progressor population (LTNP).

EARLY-CART
Cohort of individuals with acute/recent infection of HIV-1 starting antiretroviral therapy.

EPIMAP
Epitope mapping of T cell response against HIV and analysis of HLA restriction.

ARBRE: FLS-ANT-2015-01
Prospective observational exploratory study to evaluate the impact of the latest antiretroviral therapy on cerebral functioning.

OVER-60
Aging of the HIV-infected population. Cohort study of HIV-infected patients over 60.

INSTINCT: FLS-INI-2014-01
Ús i Efectivitat dels Inhibidors de la Integrasa a Espanya (INSTINCT).

Microvesicles
Microvesicles in renal tubular cell: differential pattern under treatment with TDF versus TAF.

APP-Age
A pilot study to evaluate the impact on clinical outcomes and the satisfaction of patients aged 60 and over who are infected with HIV through an EHealth-application installed in their mobile phone as a tool to help in care, education and prevention.

AGE +/-
Aging in the HIV-infected and uninfected population.

HIV-TBS
“Trabecular Bone Score” for the evaluation of bone microarchitecture in patients infected with HIV.

COBI_Switch
Retrospective observational study to assess changes in lipid profile following change from a darunavir/ritonavir-based regimen to a darunavir/cobicistat one, in HIV-infected patients with virological suppression.

Monitored Studies by FLS with an external promoter:

The CRO of FLS has monitored 12 studies in other areas such as neurology, cardiology, hepatopathy, etc. (unspecified due to confidentiality issues).

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