Ann M. Dennis¹, Simon D.W. Frost², Andrew Cressman¹, Shuntai Zhou¹, Ronald Swanstrom¹, Joseph J. Eron¹, William C. Miller³, Myron S. Cohen¹, Victoria Mobley⁴, Erika Samoff⁴

¹University of North Carolina, Chapel Hill, NC, ²London School of Hygiene and Tropical Medicine, London, UK, ³The Ohio State University, Columbus, OH, ⁴Communicable Diseases Branch, North Carolina Department of Health and Human Services, Raleigh, NC

Background

• New HIV diagnoses continue in the Southern US despite widespread prevention efforts, underscoring the need for innovative deployment of prevention tools

• Detection and response to genetically clustered infections is a pillar to the Ending the Epidemic initiative

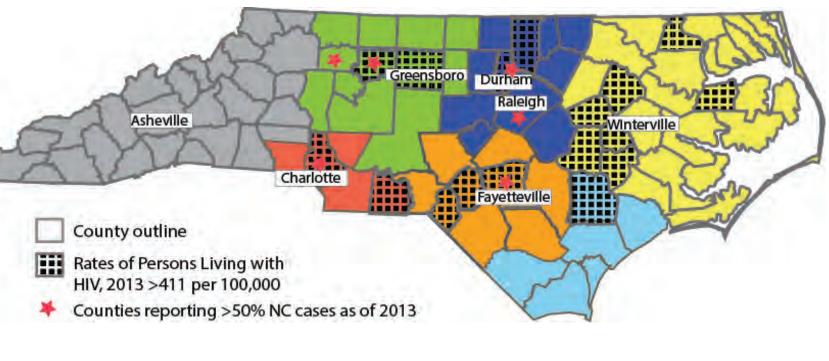
Objectives

• To develop metrics to prioritize potential field service responses to genetic clusters identified during statewide surveillance using:

- HIV RNA viral loads (VL) and surveillance data

- Dynamic analysis and reporting of near-real time data

North Carolina Regions for HIV Field Services



Methods

Study Population

HIV+ individuals with a sequence reported to NC surveillance through 2019. Sequences generated by:

 Drug-resistance genotypes from commercial labs (2010-2019)

De-novo NGS with Primer-ID from

diagnostic samples tested at the NC State Lab (2018-2019)

VL reported 2014-2020: estimated % time spent above 1500 c/mL using linear interpolation

nextHIV Pipeline

 Platform for real-time HIV surveillance for importing sequences, generating clusters and phylogenies, and interactive reports

- Consensus sequences trimmed to overlapping regions covering PR/RT
- Clusters are constructed from pairwise genetic distances (TN-93), connecting edges <1.5% difference

Cluster Analyses

• Clusters with ≥1 **recent diagnosis** (2017-2019) and only nodes adjacent to recent diagnoses (<1.5% distance) were analyzed • Sub-clusters within larger clusters were

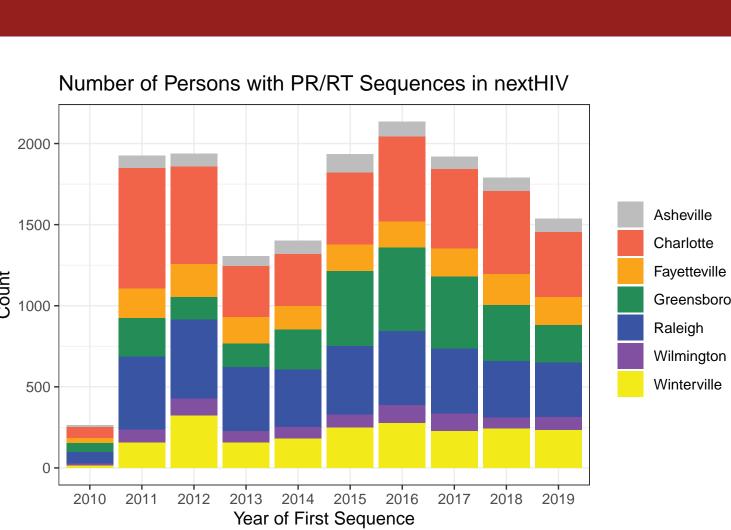
identified using community edge betweenness algorithm in igraph R

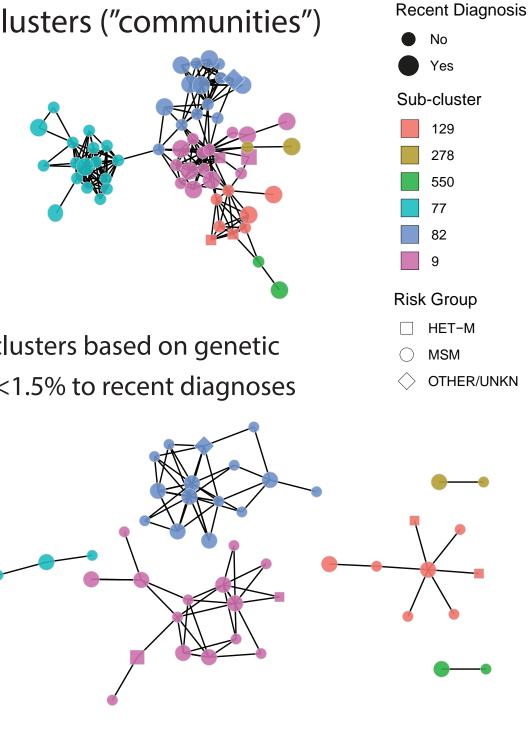
Prompt cases were defined as members without VLs or persistent/rising viremia (VL>200 c/mL) in past 12 months (2019)

Cluster based measures:

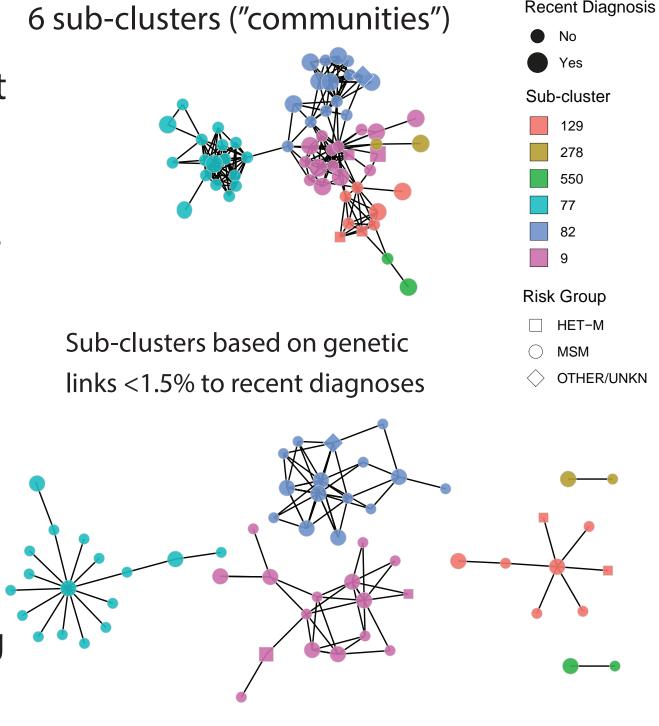
Prompt Density = average node degree among prompt cases in cluster **Recent Density** = average node degree among

all recent diagnoses in cluster





Example Large Cluster





Statewide HIV-1 Transmission Cluster Detection and Prioritization for Response





Results

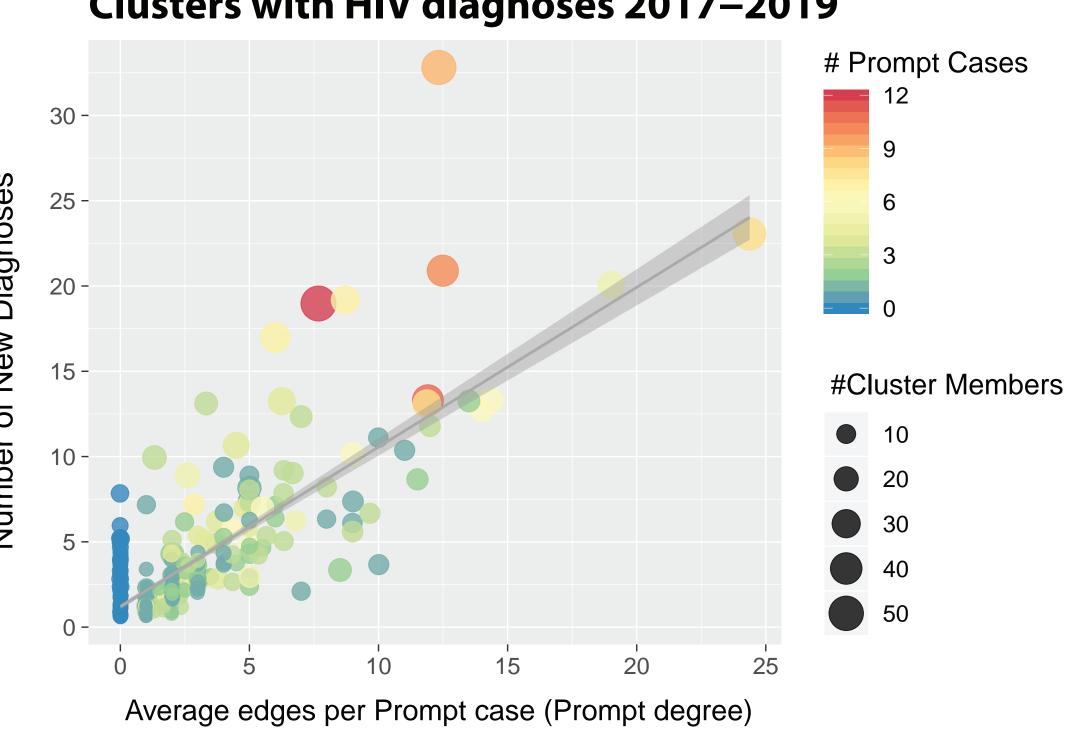
Study Population

- 16,480 Persons had 24,798 PR/RT sequences - 2,690 were diagnosed 2017-2019
- 13,790 were diagnosed <2017
- 2,820 Persons were cluster members
- 1,555 Recent diagnoses (58% of all recent)
- 1,265 Past diagnoses (9% of all past)
- Recent diagnoses in clusters vs. not clustered:
- 68% vs. 47% MSM risk
- 59% vs. 36% age <30 years at diagnosis

Cluster members, stratified by Prompt cases

Characteristic, n (%)	PPrompt Case			
	Yes	No	Total	
	(n=632)	(n=2188)	(n=282	
Recent Diagnosis*	245 (38.8%)	1310 (59.9%)	1555 (55	
Risk Group*				
MSM	416 (65.8%)	1559 (71.3%)	1975 (70	
HET-Male	107 (16.9%)	264 (12.1%)	371 (13	
HET-Female	66 (10.4%)	195 (8.9%)	261 (9	
Black/AA Race*	479 (75.8%)	1459 (66.7%)	1938 (68	
Age <30 years*	457 (72.3%)	1372 (62.7%)	1829 (64	
Mean % VL >1500,	68.2	16.7		
median (IQR)*	(25.9 <i>,</i> 96.6)	(6.9, 51.1)	(8.0, 6	
	· · · · · · · · · · · · · · · · · · ·	I		

*P<0.01



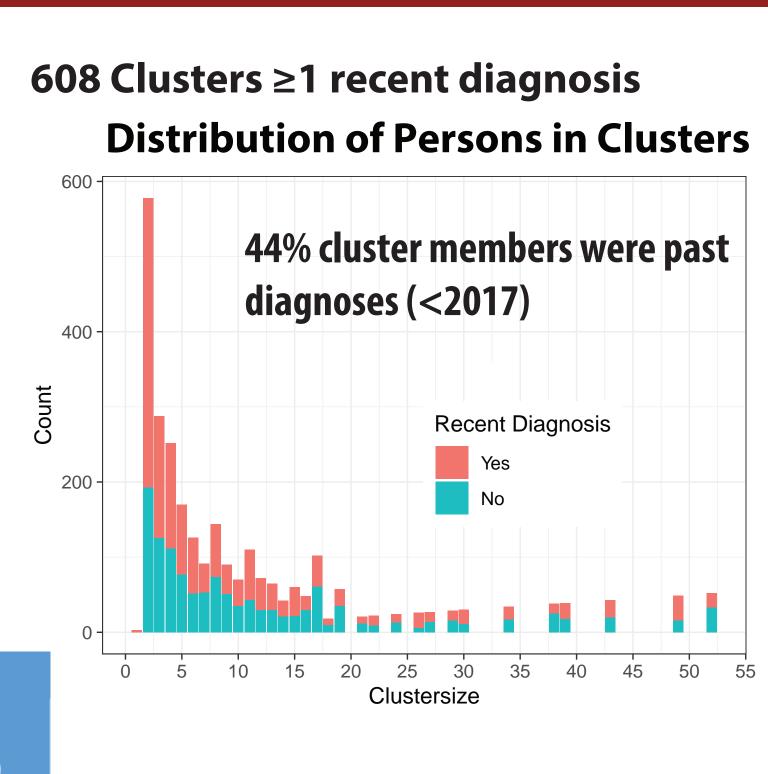
Example Cluster 49 members

- 33 Recent Diagnoses - 9 Prompt Cases - Prompt Density (avg node degree) = 12 Risk Group HET-M MSM OTHER PWID-M Prompt Degree **Recent Diagnosis** No Yes

Characteristics of Clusters by Number of Recent Diagnoses

Mean (SD)	Number of Recent Didiagnoses			
	≥5 (n=71)	<5 (n=537)	Total (n=608)	
Cluster Size	18.1 (15.1)	4.2 (6.1)	5.8 (8.9)	
Prompt Density*	6.2 (4.6)	0.8 (1.2)	1.5 (2.6)	
Prompt Cases*	3.4 (2.8)	0.7 (1.0)	1.0 (1.6)	
n (%)				
0	9 (12.7%)	274 (51.0%)	283 (46.5%)	
1	12 (16.9%)	177 (33.0%)	189 (31.1%)	
2-9	47 (66.2%)	86 (16.0%)	133 (21.9%)	
≥10	3 (4.2%)	0 (0.0%)	3 (0.5%)	
Recent Density	8.3 (5.0)	2.0 (1.7)	2.7 (3.1)	
Recent Diagnoses	9.0 (5.2)	1.7 (0.9)	2.6 (3.1)	
*P<0.01				

Clusters with HIV diagnoses 2017–2019



5.1%

0.0%) 3.2% 9.3%) 8.7% 4.9%) 22.9 69.2)

22% cluster members were Prompt **cases** (no evidence viral suppression in 2019)

 Prompt cases have higher transmission risk potential (time observed above 1500 c/mL): cases had a median of 68% average observed time viremic

• **53%** Clusters (n=323/608) had ≥**1** Prompt case

 Number or recent diagnoses is correlated with number of prompt cases and the density of edges among prompt cases in clusters

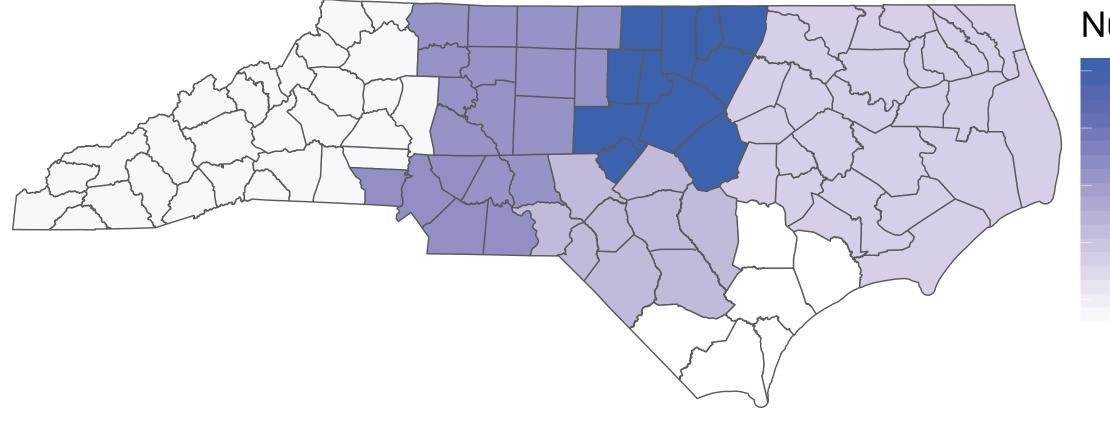
• Clusters with \geq 5 recent cases have mean **Prompt Density** of 6.2 vs. 0.8 for clusters <5 recent cases (average node degree among all Prompt cases in cluster) • **Priority clusters** defined as ≥5 recent

cases and prompt density >5 yields 45 clusters

Conclusions

- available

Prompt Members in 45 Priority Clusters by Field Service Region



Additional Information

Contact info: Ann M. Dennis, MD Division of Infectious Diseases University of North Carolina at Chapel H adennis@med.unc.edu @ann_dennisMD

The project described was supported by the National Institute of Allergy and Infectious Diseases (NIAID), NIH, through Grant Award Number R01AI135970. The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH.

We thank the NC Communicable Disease Branch and the NC SLPH staff who have helped this research, especially Jason Maxwell, John Barnhart, Christy Crowley, and Kristle Vogle, as well as those involved in the HIV PROMPT project

We developed a system to automate cluster detection and analysis using statewide surveillance data allowing **dynamic reporting** as new data are

>50% of recent diagnoses (2017-2019) were in clusters; 44% of members were **past diagnoses** with <1.5% genetic distance to recent diagnoses We developed metrics to prioritize clusters based on number of recent diagnoses and **high network connectivity** of individuals without evidence of viral suppression Allocation of intensified retention support and partner services to such prioritized clusters may be

high yield for field services

Number of Members

30 20

