

OCS QUICK FACTS

Clinical Frailty and the Need for Geriatric Care Models for Older Adults Living with HIV.

Recent OCS findings suggest that policy and service providers need to improve the integration of HIV and geriatric care models to effectively support older adults living with HIV. This study shows that older adults living with HIV in Ontario experience higher rates of clinical frailty, predisposing them to an increased risk for poor health outcomes.

OCS research intern Nicolas Bauer and Dr. Sean Hillier examined clinical frailty among older adults living with HIV participating in OCS, using the modified frailty index (MFI). They classified participants into three stages of frailty: no clinical frailty, pre-frailty, and clinical frailty.

Of the 6,582 OCS participants included in the analysis:

- 52.4% had no clinical frailty, 41.6% were in the pre-frailty stage, and 6% had clinical frailty.
- Pre-frailty and clinical frailty were acquired at mean ages of 44.5 years and 55.6 years, respectively.
- Males had higher prevalence of clinical frailty than females (6.3% vs. 4.3%).

The top four frailty indicators were:

- COPD/pneumonia (17.0%),
- Impaired sensorium (15.4%),
- Non-independent functional status (13.9%),
- Hypertension (13.6%).

Older age was independently associated with higher risk of pre-frailty and clinical frailty. HIV acquisition through intravenous drug use (IVDU) and AIDS diagnosis were independently associated with increased risk of frailty.

For more information, see 2024 International AIDS Conference [abstract](#).

Welcoming new CEO at OHTN

We share with great excitement that Nadine Sookermany joined the OHTN as the new CEO on December 2, 2024.

Nadine brings a wealth of experience, activism, and over two decades of senior leadership in the nonprofit, community health and HIV sectors specializing in community and social services, public health, equity, inclusion and accessibility.



You can read about Nadine's commitments to the HIV community and her areas of expertise on the [OHTN website](#).

We also express our thanks to outgoing Executive Director, Jean Bacon, for her contributions to the OHTN and HIV sector. Jean retired from the OHTN in December. We wish her well!

OCS Questionnaire V.12 Launched

Effective January 2nd, Questionnaire V.12 was launched at all OCS sites following ethics clearance by each site's REB.

In the Questionnaire V.12., we:

- Paused six sections (Discrimination and Trauma, Intimate Partner Violence, Relationships and Sexual Practice, and Sexual Satisfaction);
- Shortened three sections (Immigration and Race, Sense of Hope, Mental Health, Social Support, and HIV Stigma, and Cultural Resources, Health and Social Services);
- Created a new section called Vaccination by revising existing questions on vaccine uptakes (i.e. COVID-19, Influenza, HPV) and introducing new questions on uptake of Meningococcal and Shingles vaccines, and overall vaccine confidence.

For a list of all current topics in the 2025 questionnaire, visit [here](#).

OCS Productivity (April 2024 - September 2024)

During the first and second quarter of 2024-25, data collectors completed a total of 1,087 interviews and consented 122 new OCS participants.

We thank the OCS sites, data collectors, and participants for their dedication and contributions to the OCS.

The Ontario HIV Treatment Network Cohort Study (OCS) is an ongoing research study that collects clinical, social and behavioural information about people living with HIV (PHA) in Ontario. Participation in the study is voluntary, and all personally identifying information of study participants is removed to ensure confidentiality. The OCS was established to improve our understanding of HIV and inform HIV prevention, care and treatment strategies for people living with HIV and groups at risk of HIV infection. For more information about the OCS, please visit ohntcohortstudy.ca or email ocs@ohnt.on.ca.

Patterns of Cannabis Use for Medical Reasons

Even in jurisdictions like Ontario, Canada, where non-medical cannabis is legal, people living with HIV continue to access cannabis through the medical stream. A team led by Sophie G. Coelho, Dr. Jeffrey D. Wardell and Dr. Sergio Rueda recently explored cannabis use with the 2022 OCS data (N = 868; 85.37% men, mean age 51.34 years). They examined the cannabis- and health-related correlates of medical cannabis use among people living with HIV (PLWH) in Ontario. Relatively few participants (n = 122; 14.06%) reported any medical cannabis use, with most (n = 746; 85.94%) reporting exclusive use of non-medical cannabis. Their analysis showed that greater HIV symptom distress, poorer physical-health-related quality of life, more frequent cannabis use, and using smokeless forms of cannabis were each uniquely associated with increased likelihood of using medical cannabis relative to exclusively using non-medical cannabis. Access full publication [here](#).

Updates on OCS Research Proposals and Data Requests/Scans

The OCS Governance Committee approved a new research proposal in December 2024: *Vaccine uptake, knowledge, and confidence in people living with HIV in Ontario*. Led by Catharine Chambers (Public Health Ontario), Ramandip Grewal (University of Toronto), and Tsegaye Bekele (OHTN), this research will examine uptake of four publicly-funded vaccines in Ontario (Influenza, COVID-19, Pneumococcal, and mpox) among OCS participants using data collected between 2021 and 2024. The proposal also includes prospective data collection on uptake of two additional vaccines (Meningococcal and Shingles) and vaccine confidence, starting in 2025. The study team will examine and identify factors (demographic, socio-economic, health outcomes, health behaviours, and HIV clinical markers) associated with vaccine uptake and confidence. Findings from the study will help broaden our understanding of the barriers and facilitators that influence vaccination among people living with HIV.

The OCS team provided two data scans on the need for organ transplant services among OCS participants and on the engagement of young adults (16-25 years) with care after transitioning from pediatric care to adult care. We congratulate the researchers and thank them for engaging with the OCS in their work.

Changes to the OCS Study Team at OHTN

The OCS team said goodbye to Kristen O'Brien, Adanna Obioha, Maxwell Groves, and Namita Prabhu.

Kristen served as the Director of OCS and Biostatistics and made immense contributions to the OCS, including playing a key role in the implementation of the OCS Data Administration Platform (ODAP), construction of the new OCS data warehouse, and overseeing OCS data management and analyses.

Adanna, Health Data Analyst, has been instrumental in data cleaning and analyses as well as the implementation of the ODAP.

Maxwell, IT Support Specialist, provided IT support to the OCS team and ensured the continuation of data collection during COVID-19 related restrictions.

Namita, Data Engineer, has been instrumental in building and optimizing the OCS data warehouse infrastructures.

We are incredibly grateful for the invaluable contributions they have made to the OCS over the years and we wish them success in their future endeavours.

Updates about OCS Intern and Data Collectors

OCS intern Rawan Abulibdeh completed her internship. Rawan applied her training and experience in machine learning models to clean the OCS antiretroviral medication data.

Andrea Shore, data collector at Lakeridge Health, retired from her role. Andrea played a key role in the launch of the Lakeridge Health as a new OCS site in 2021.

We also welcomed five new data collectors at Lakeridge Health: Carly Chisholm, Sarah Dulmage, Cathy Bailey, Rachel White and Timothy D'Eon.

OCS Chair Grant

In October, the OHTN launched a grant for an OCS Chair, which constitutes a salary award for a Principal Investigator of the OCS. This award invited applied scientists with experience in leading large multi-site cohort studies, health research and health data. The full application stage closes on January 31, 2025.