



QUICK FACTS

Comorbidity among People Living with HIV in Ontario

Among 3,101 OCS participants who self-reported comorbidity information between 2020 and 2023:

- Mean age: 53.2 years
- 62% were aged ≥50 years
- 77% were male
- 75% were diagnosed with HIV for ≥10 years

High Burden of Comorbidities

- 84% reported ≥1 comorbidity
- 35% reported a mental health condition
- 26% reported hypertension
- 26% reported hyperlipidemia
- 13% reported diabetes

Participants with higher odds of having any comorbidity were:

- Aged ≥50 years (aOR 2.59, 95% CI 2.06–3.25)
- Diagnosed with HIV for ≥10 years (aOR 2.01, 95% CI 1.48–2.72)
- People who inject drugs (PWID) (aOR 2.88, 95% CI 1.43–5.83)

African, Caribbean and Black (ACB) participants had lower reported odds of any comorbidity (aOR 0.56, 95% CI 0.44–0.72).

Mental Health Pattern

- Younger adults (<50 years) had higher odds of reporting a mental health condition.
- Older adults (≥50 years) had 47% lower adjusted odds (aOR 0.53, 95% CI 0.45–0.64).
- Higher adjusted odds of mental health comorbidity were also observed among PWID, GBMSM and women.

Key Takeaway

- Comorbidity was highly prevalent among OCS participants, with greater overall burden among older participants and those living longer with diagnosed HIV.
- Mental health burden was greater among younger adults and some priority populations.



Quarterly Update
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OCS Publications

Five-year disability trajectories and the associated factors among adults aging with HIV in the OCS

This analysis led by Dr. Tai-Te Su and Dr. Kelly O'Brien, followed more than 1,800 adults living with HIV in Ontario from 2019 to 2023 to better understand patterns of disability and their associated factors. They identified three groups: low disability (28%), moderate disability (53%), and high disability (19%). People in the moderate and high disability groups experienced greater fluctuations in disability from year to year, showing that disability is not always stable. Additionally, people were more likely to experience high disability if they had lower income, more health conditions, smoked, recently used substances, or experienced greater HIV stigma. Women were also more likely to experience high disability. In contrast, higher income and greater social support were linked with lower disability.

Their findings show that experiences of disability among people aging with HIV are diverse and can change over time. The team notes that reducing HIV stigma, strengthening social support, supporting healthy behaviors, and addressing financial barriers may help improve health and well-being for people aging with HIV. Access the full publication [here](#).

Uptake of influenza, pneumococcal, and COVID-19 vaccines among people living with HIV: Findings from the OCS

A team led by Dr. Catharine Chambers (Public Health Ontario) and Tsegaye Bekele (OHTN) used OCS data to estimate uptake of influenza, pneumococcal, and COVID-19 vaccines among people engaged in HIV care in Ontario and identified demographic, socio-behavioural, and clinical factors associated with vaccine uptake. They found that uptake exceeded 70% for all three vaccines, with the highest uptake (almost 90%) observed for two or more doses of COVID-19 vaccines. These coverage estimates among people living with HIV were higher than those found for Canadian adults but fell short of national immunization coverage goals.

The team recommends that interventions that address predisposing, enabling, and need factors associated with vaccine uptake may help improve access and promote vaccine confidence, particularly for individuals at high risk of severe respiratory infections. Access the full publication [here](#).

New Site Investigator at UHN

Dr. Alice Zhabokritsky has joined the OCS team as the new site principal investigator at University Health Network, succeeding Dr. Sharon Walmsley. Dr. Zhabokritsky is an Infectious Diseases physician and Clinician Investigator at the UHN and Mount Sinai Hospital and a staff physician at the Immunodeficiency Clinic at the Toronto General Hospital. She obtained an MSc in Clinical Epidemiology at the IHPME at the University of Toronto and completed a postdoctoral fellowship with the CIHR-Canadian HIV Trials Network (CTN+), where she now serves as a Treatment and Management Think Tank co-lead. Through her clinical and research work, she aims to better understand the complexities of aging with HIV to support healthy aging in older adults living with HIV.

Extending Gratitude to Dr. Sharon Walmsley

The OCS Team extends its deepest gratitude to Dr. Sharon Walmsley for her longstanding support of the cohort, and for years of leadership in HIV research and clinical care.

Based at the Immunodeficiency Clinic at the Toronto Hospital, University Health Network, Dr. Walmsley is an internationally-recognized pioneer in studies of HIV therapy, with significant contributions in prevention and management of co-infections, studies of HIV in women and girls, and aging well in HIV. She is also a passionate advocate for trainees and early career researchers, and has mentored countless emerging investigators.

We thank Dr. Walmsley for her extensive support for the OCS, and most importantly, for her dedication to improving the lives of people living with HIV in Ontario and beyond.

OCS Seminar Series Continued

In April, Min Xi, a PhD candidate in Epidemiology at the Dalla Lana School of Public Health, discussed trends in healthcare costs, key cost drivers, persistent disparities across populations among people living with HIV.

In May, Dr. Tanya Lazor, a health services researcher and clinical social worker, shared the trajectory of change in cannabis use among people living with HIV — shaped by evolving social norms, legalization, and broader systemic factors. She also discussed how this insight can inform more responsive, equitable HIV care.

In June, Shahryar Murshed, Research Coordinator, and Preeti Sharma, Clinical Research Associate, from Sunnybrook Research Institute, shared their expertise and decades-long experiences in conducting the OCS research, including recruitment, consent, and participant engagement and retention at Sunnybrook.

OCS Governance Committee Updates

Aaron Bowerman and Y.Y. Chan completed their second terms on the Committee. We extend our thanks to them for their service over the past six years and their contributions to the OCS and advancing understanding of HIV in Ontario.

We are pleased to share that Co-Chair Ruth Cameron has agreed to extend her role for an additional one year-year term, following the conclusion of her second term in June 2026. We thank Ruth for her ongoing commitment to the OCS. For the full list of Committee members, visit the [OCS Website](#).

OCS Site Staff Updates

We welcomed two new site Research Associates to the team: Michela Paumard at Windsor Regional Hospital and Bea Pellar at Maple Leaf.

We bid farewell to two site RAs: Bradie Ordog from Lakeridge Positive Care Clinic and Jessica Lepage from Health Sciences North.

We thank all outgoing and remaining site staff for their 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 (PLHIV) 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 ohtncohortstudy.ca or email ocs@ohtn.on.ca.