

The Ontario HIV Treatment Network annual report 2003

OHTN 5th Annual Research Day

Delta Chelsea Hotel, Toronto November 28-29, 2002



Mark Wainberg, Sean Rourke, Brian Cornelson, Ken Rosenthal, Stephen Squibb



Lynne Leonard, Liviana Calzavara



Dale Butterill, John Lavis



Robin Weir, Deborah Randall-Wood, Joan Lesmond



Erin MacDonald, Charu Kaushic, Amy Gillgrass, Tara Graham



Sean Hosein, Ron Rosenes



Esther Tharao, Lea Narciso

cover photo (from top left): Gary Rubin, Rob McKay, Brian Cornelson, Stephen Squibb, Carol Swantee, Owen Ryan, Brenda Done, Jennifer Furtney, Vicki Kett, Anita Rachlis, Patricia Balough, Karen Copeland, Lisa Bromley, Sean Rourke, Bob Leahy

MISSION STATEMENT

To be a collaborative network of excellence among consumers, providers and other stakeholders that provides leadership and develops and advances policy related to the optimal care and treatment of people living with HIV in Ontario. In so doing, the Ontario HIV Treatment Network (OHTN) strives to ensure timely access to state of the art health care. respect consumer options, ensure consumer and provider education and support, address emerging issues and seek appropriate funding *in the treatment and management* of HIV in Ontario.

VISION

To ensure excellence in care and treatment of people living with HIV in Ontario, while respecting the rights of individuals to choice and confidentiality.

Letter from the Co-chairs

The OHTN was established five years ago as an initiative of the Ontario Ministry of Health and Long Term Care, and has become a major force in advancing research and clinical excellence in HIV/AIDS in Ontario and Canada. Through the hard work and dedication of the staff, volunteers and the many other stakeholders, we have made great progress in implementing the strategic programs that were established to fulfill our mission. These programs are the Investigator Driven Research Program (IDRP), the Priority Initiatives Program (PIP) and the HIV Information Infrastructure Project (HIIP).

A key contributor to our accomplishments over these past five years has been Patricia Balogh, the Executive Director of the OHTN since its inception. Patricia left the OHTN in February 2003 and her tremendous contribution to the development of the OHTN is recognized and very much appreciated. We are fortunate to have retained Dr. Jay Browne, former Director of the AIDS Bureau, as interim Executive Director pending completion of our recruitment for the position of Executive Director.

There have been other staff changes at the OHTN over the past year as well. Four staff positions were eliminated in order to devote more funds to research activities. The role of Dr. Ahmed Bayoumi as Director of Science was modified to permit better congruency with his other responsibilities; he is now Director of Research.

Research activities have flourished in the Investigator Driven Research Program, coordinated by Tom Fleming and Carol Major. Research generated within the OHTN from HOOD data as well as independent research funded by OHTN was well received at national and international symposia, reflecting the maturation of the organization's work. IDRP's Scientific Review Committee comprises renowned researchers from Canada, the United States and abroad and is headed by Dr. Mark Wainberg of Montreal. The OHTN continues to support promising upcoming researchers through its various scholarship awards. The Annual Research Day, led by Dr. Sean Rourke, proved to be a tremendous success.

The Priority Initiatives Program, coordinated by William Lau, has evolved from its inception as a stakeholder driven program to its present role of funding research proposals on priority areas targeted by the OHTN in consultation with its stakeholders.

The HIV Information Infrastructure Project has made great advances under the leadership of Bob Duck. HIIP has progressed through the development and testing phases and is now being used in major clinical sites in Ottawa and Toronto. The implementation of the HIIP modules into more HIV clinical sites is moving into high gear over the next few years, further enriching the research database built on the legacy of the HOOD database.

Based on the solid foundation of our first five years, we look forward to strengthening our mission and our contribution to HIV/AIDS care and research. We plan to initiate an external evaluation and develop a strategic plan over the next year in order to enhance the success of the organization.

We look forward to your continued support as we continue to mature as an organization and enhance our capacity to contribute to the lives of people with HIV/AIDS.

~ Dr. Brian Cornelson ~ Stephen Squibb Co-chairs. Board of Directors

Letter from the Interim Executive Director

I have been Interim Executive Director since May 27th, 2003. It has been a personal learning experience to bear witness to the present status of an organization that I helped initiate. It is a real privilege for me to now be part of a program that I saw as a dream of PHA leadership for many years. Sadly, some are no longer with us except in spirit and memory.

All of our stakeholders including the staff and volunteers can be very proud of the work of the Ontario HIV Treatment Network (OHTN). Major achievements for 2002-2003 include:

- a successful fifth annual Research Day;
- numerous abstracts presented at national and international conferences;
- the creation and deployment of a Microsoft SQL Server version of the HIIP Clinical Management System (CMS) software;
- the completion of the comprehensive HIIP Research Polices; and
- the Ambassador Committee presented its evaluation of antiretroviral utilization in Ontario at the annual conference of the Canadian Association for Population Therapeutics.

While some of the programs are in transition and face significant challenges, I believe all of the OHTN programs are on track and solidly moving forward. This annual report reflects my positive comments.

Future work, in conjunction with the Executive Committee, will focus on the OHTN Board development and membership selection process. Evaluation and strategic planning processes are key to shaping the OHTN's continued success.

In conclusion, I am grateful for the opportunity to be the Interim Executive Director.

Jay Browne, Interim Executive Director

OHTN Volunteers 2002-2003

The following volunteers from across Ontario represent the Ontario HIV Treatment
Network's five stakeholder groups: people living with HIV, researchers, clinicians, AIDS service organizations, and government. The work of the OHTN is made possible through the vital contribution of our dedicated volunteers. If we have omitted any name in error, we apologize.

Note: All volunteers are Ontario-based unless otherwise noted.

BOARD OF DIRECTORS

Dr. Brian Cornelson (Co-Chair) Stephen Squibb (Co-Chair)

Dr. Lisa Bromley Dr. Karen Copeland

Brenda Done Jennifer Furtney Dr. John Goodhew

Vicki Kett
Rob MacKay
Frank McGee
Dr. Anita Rachlis
Dr. Sean Rourke
Owen Ryan
Carol Swantee

FINANCE COMMITTEE

Vicki Kett Bob Leahy John Mountain Owen Ryan Stephen Squibb

EXECUTIVE COMMITTEE

Dr. Brian Cornelson Brenda Done Bob Leahy Stephen Squibb

HIIP ADVISORY COMMITTEE

Dr. Don Kilby (Chair)
Robert Desarmia
Tony Di Pede
Mary Grondin
Steve Harris
Maggie Lopes
Rob MacKay

Dr. Robert Remis
Jackie Roberts

Daniel Robillard (deceased)

Jim Truax Pius White

Ex-Officio Members

Mario Cordoba Mark Fisher Frank McGee Dr. Anita Rachlis Carol Swantee

Corresponding Members

Brent Fraser
Dr. Ken Rosenthal
Larry Stump
HIIP Research

Advisory Committee

Dr. Robert Remis (Chair)
Dr. Ahmed Bayoumi
Dr. Jim Brunton
Maggie Lopes
Dr. Peggy Millson
Dr. Ted Myers
Jackie Roberts
Pius White

Dr. Wendy Wobeser
HIIP Research Policy
Working Group

Maggie Lopes (Chair) Dr. Ahmed Bayoumi Dr. Evan Collins

Dr. Winston Husbands Dr. Carol Strike

Legal Ethical Committee

Rob MacKay (Chair)

Dr. Ahmed Bayoumi

Tony Di Pede Mary Grondin Dr. Don Kilby Rodney Kort Maggie Lopes

Technical Requirements Committee

Mark Fisher (Chair) Mario Cordoba Dr. Don Kilby Rob MacKay

PRIORITY ADVISORY COMMITTEE

Brenda Done (Chair)
Dr. Lisa Bromley
Jennifer Furtney

Vicki Kett Carl Orr

Dr. Stanley Read Owen Ryan Esther Tharao

Active Living, Work and Health

Working Group

Stephanie Nixon (Chair) Louise Binder, LLD (Hon)

Pamela Bowes
Ken King
Don Phaneuf
Dr. Greg Robinson
Dr. Patty Solomon
Robert Vanidour

Ambassador Committee

Dr. Anita Rachlis (Chair)

Pamela Bowes Frank McGee Ilona Torontali **Complementary Therapies**

Working Group

Laurette Lévy (Chair) Dr. Gordon Arbess Dr. Heather Boon Dr. Kymm Feldman

Sean Hosein

Dr. Debbie Kopansky-Giles

Devan Nambiar Ron Rosenes Derek Thaczuk

Emerging Technology

Working Group

Dr. Stanley Read (Chair)

Sean Hosein
Dr. John Kim
Dr. Colin Kovacs
Francis Mandy
Frank McGee
Dr. Anita Rachlis
Dr. Paul Sandstrom
Carol Swantee
Dr. Sharon Walmsley

PHA's in Prison Working Group

Matthew Perry (Chair) Anne Marie DiCenso

Giselle Dias
Sarah Flicker
Dr. Peter Ford
Dr. Eudice Goldberg
Laverne Monette
Heather J.Topps

SCIENTIFIC REVIEW COMMITTEE

Dr. Mark Wainberg (Chair) (Montreal)
Dr. Karen Copeland (ex officio)

Dr. Sean Rourke (ex officio)

Basic Science

Dr. Alan Landay (Chicago)

Dr. Richard Harrigan (Vancouver)

Sean Hosein

Dr. Mario Ostrowski

Clinical Science

Dr. Rodger Macarthur (Michigan)

Dr. Anita Rachlis

Deborah Randall Woods

Dr. Fiona Smaill

Epidemiology

Dr. Chris Archibald

Dr. Eduard Beck (Montreal)

Dr. Robert Remis Esther Tharao

Socio Behavioral

Dr. Barry Adam Dr. Louise Balfour

Dr. Thomas Patterson (California)

Dr. Winston Husbands

Research Day

Planning Committee

Dr. Sean Rourke (Chair) Dr. Alan Cochrane Dr. Bill Flanagan

Vicki Kett
Dr. John Lavis
Dr. Lynne Leonard
Frank McGee
Lea Narciso
Stephanie Nixon

Dr. Gregory Robinson

Dr. Mark Wainberg (Montreal)

Dr. Sharon Walmsley

Investigator Driven Research Program

The Investigator Driven Research Program (IDRP) is unique among research funding bodies. The strong community voice and multi-disciplinary perspective are incorporated into the Scientific Review Committee's peer review process. While community participation is a fundamental principle for the OHTN, it is unusual for scientific review organizations to support full community participation in their review process. This year, every project funded by the IDRP met both the program's rigorous scientific and community involvement requirements. The OHTN is fortunate to have Dr. Mark Wainberg as Chair of the Scientific Review Committee, supported by a panel of national and international HIV researchers and community members, as well as more than seventy external reviewers.

The IDRP continues to be the major source of HIV research funding for Ontario researchers. After five years, projects are now beginning to produce substantial results. World-class scientists carry out projects spanning the range of science from social science/epidemiology to basic/clinical science. Social science and epidemiology projects included exploring social and risk networks of intravenous drug users, understanding the behaviours and beliefs of the East African communities, and HIV prevention research. Basic/clinical science examples included studying the impact of sexually transmitted diseases on HIV, understanding the immune system, and predicting patient response to specific therapies. There were more than thirty scientific presentations from OHTN supported scientists at the XIV International AIDS Conference.

The fifth annual Research Day held in November 2002 was an outstanding success! Under the excellent leadership of Dr. Sean Rourke, Chair of the Planning Committee, the event attracted more than 300 participants and 150 abstract submissions. A major focus of the meeting was knowledge transfer — facilitating the communication of research findings between researchers and the people who use the information. Knowledge transfer will help to improve practice or change policies.

In summary, the IDRP has implemented a comprehensive and inclusive approach to project selection and continues to support Ontario HIV scientists. We look forward to continuing the focus on knowledge transfer at Research Day 2003.

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Investigator Driven Research Program funded research 2002-2003

The following researchers were awarded funds by the IDRP between July 2002 and June 2003

RESEARCH OPERATING GRANT

Dr. Johane Allard – \$475,573 (3 year) Non-alcoholic fatty liver disease (NAFLD) in HIV: The role of nutritional interventions

Dr. Jonathan Angel – \$176,000 (2 year)Regulation of IL-7 Receptor (CD127)
Expression and Function on Circulating
CD8+ T Cell and Developing Thymocytes
by HIV Infection

Dr. Ahmed Bayoumi – \$66,600 (1 year)
The Cost-Effectiveness of Treating People
Living with HIV: A Program of Research

Dr. Liviana Calzavara – \$259,546 (2 year)Understanding HIV/AIDS Issues in East
African Communities in Toronto: A Survey
of Health-related Behaviours, Beliefs,
Attitudes and Knowledge

Dr. Rolf P.G. van Heeswijk – \$92,600 (1 year) The value of ABCB1 genotyping as a tool to predict the pharmacokinetics of protease inhibitors

Dr. Rupert Kaul – \$148,000 (2 year)Cellular immune control of HIV-1 in the genital tract of infected men and women

Dr. Peggy Millson – \$98,550 (2 year)Exploring the Social and Risk Networks of Male and Female Injection Drug
Users in Toronto

Dr. Scott Gray-Owen – \$160,000 (2 year) Impact of Neisseria gonorrhea on HIV-1 Replication and Immunity

Dr. Wendy Wobeser – \$191,984 (2 year) Lactic acid metabolism in persons infected with HIV. Predicting abnormalities in lactate production and clearance related to treatment and liver disease and measuring the effect of vitamin supplementation and changes in therapeutic regimen

CAREER SCIENTIST AWARDS

Dr. Peggy Millson – \$71,500/year (2 year)
Epidemiological and Behavioural
Studies of Injection Drug Users at Risk
for HIV/AIDS in Ontario

Dr. Ted Myers – \$71,500/year (5 year)
Multi-dimensional Understanding of
Responses to the Changing HIV/AIDS
Epidemic: Community Contexts, Sexual
and Drug Use Risk Behaviour and
Interventions

POSTDOCTORAL FELLOWSHIPS

Dr. Julie Maggi – \$48,500/year (2 year)The impact of personality characteristics on adherence to medication treatment in HIV disease

Dr. Colleen Millikin – \$38,500/year (2 year) Neurocognitive functioning in HIV/AIDS: Impact of HAART and time-course of response

Dr. Jin Su – \$48,500/year (2 year)
Correlation of CTL diversification with
AIDS progression in DNA/MVA Vaccinated
Macaques

Dr. Jill Tinmouth – \$48,500/year (1 year)
The role of lactose intolerance in HIVrelated chronic non-infectious diarrhea

SCHOLARSHIP AWARDS

Dr. Rolf P. G. van Heeswijk – \$51,500/year (5 year)

The value of ABCB1 genotyping as a tool to predict the pharmacokinetics of protease inhibitors

Dr. Lynne Leonard – \$51,500/year (5 year) HIV and Hepatitis C Virus Co-Infection among Injection Drug Users: Directions for Prevention

STUDENTSHIP AWARDS

Agatha Komsic - \$19,530/year (2 year)
Regulation of IL-7 Receptor (CD127)
Expression on Circulating CDB + T Cells

Natasha Christie – \$19,530/year (2 year) Understanding the Viral and Immunological Significance of CTL Epitopes in HIV Infection

Kim Marsh – \$19,530/year (2 year) Sam68DeltaC: Molecular mechanisms of REV inhibition

Reza Nazari – \$19,530/year (2 year)
A novel gene therapy strategy
inactivation of HIV-1 Provirus DNS

Kelly O'Brien - \$19,530/year (2 year) Disability and HIV/AIDS: Evaluation of an instrument to address body structure/function, activity and participation for people living with HIV/AIDS

Erin Warriner – \$19,530/year (2 year)
Endocrine and immune correlates of
neurocognitive impairments in HIV/AIDS

Priority Initiatives Program

The Priority Initiatives Program (PIP) supports time-limited projects that fall within the OHTN mandate and are consistent with the priorities as identified by our stakeholders through the various working groups and committees.

In 2002 - 2003, PIP funded 16 projects in the total amount of \$855,867. Our comprehensive approach to addressing priority issues, by including academic and community-based initiatives, is one of the unique characteristics of PIP. The Priority Advisory Committee also demonstrated leadership in dealing with emerging priorities that included funding of projects on counseling for injection drug users and on HIV-positive parents from endemic countries.

The Ambassador Committee presented its recently completed evaluation of antiretroviral utilization in Ontario (1998 - 2002) at the annual conference of the Canadian Association for Population Therapeutics in Quebec City. The Committee also widened its consultations with stakeholders to address issues related to reforming the current funding and distribution arrangements through Ontario's Special Drugs Program for the antiretroviral drugs: AZT, ddl and ddC.

PIP takes a strong role in initiating community relevant projects that aim to impact both policy and practice. In 2003, PIP will restructure in response to the newly released "Proposed HIV/AIDS Strategy for Ontario to 2008". The new structure will consist of three streams:

- Care and Treatment:
- Education and Prevention: and
- Health Services and Access to Care.

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The determinants of health will inform all three streams. This new structure will allow for a more comprehensive process in addressing emerging priority issues in Ontario.

I would like to take this opportunity to thank Brenda Done (Chair of the Priority Advisory Committee) and all our volunteers for their expertise, dedication and contribution.

William Lau, PIP Coordinator

Priority Initiatives Program funded research 2002-2003

The following projects were awarded one-time funding by PIP between April 2002 and March 2003

Dr. Beverley Antle - \$78,702

Worry, Guilt and Loss: Exploring the needs and concerns of HIV-positive parents from endemic countries

Dr. Lizanne Béïque – \$100,000

Internet-Based Post-Marketing Surveillance System for Patients with HIV/AIDS

Glen Brown and Associates - \$10,000

People with HIV/AIDS Issues Relating to Ontario Disability Support Program: A Policy Paper

Glen Brown and Associates - \$2,247

Creating, funding, hosting and supporting a provincial advocate/ ombudsperson for issues relating to the Ontario Disability Support Program: A Feasibility Study

Glen Brown and Associates - \$18,743

Improving and Accessing Ontario
Disability Support Program for
PHAs: A Strategy Conference

Giselle Dias, Todd Minerson - \$15,000

The impact and accessibility of communities and prison services for male prisoners in Ontario: Protocol development

Giselle Dias, Gurpreet Singh Johal – \$200,000

HIV/AIDS & Hepatitis C Research Study for Men in Federal Institutions in Ontario

Dr. Susan King - \$100,000

Perinatal exposure to antiretroviral therapy in infants born to HIV infected mothers: evaluation of toxicity using mitochondrial DNA and lactate levels

Dr. Debbie Kopansky-Giles – \$36,625

Collection of Complementary and Alternative Medicine (CAM) Treatment Data for the HIIP (HIV Information Infrastructure Program): A Pilot Project

Dr. Clifford Lingwood - \$25,000

Therapeutic exploitation of the role of the glycolipid, globotriaosyl ceramide, in HIV infection

Edward Mills – \$25,000

HIV/AIDS Natural Treatment (HANT) Database and Linkage Project

Dr. Peggy Millson - \$27,000

Development and delivery of community-based para-professional

counselling for injection drug users living with or at high risk for HIV/AIDS

Dr. Patty Solomon, Dr. Dale Guenter – \$84.000

Prevalence of Participation and Activity Limitations in Person with HIV/AIDS in Ontario

Dr. Rolf P. G. van Heeswijk - \$63,750

The effects of co-administration of carotenoids on the pharmaco-kinetics of protease inhibitors in HIV-1-infected patients

Dr. Rolf P. G. van Heeswijk - \$25,000

Development of a bioanalytical method for measurement of the intracellular concentrations of protease inhibitors

Dr. Sharon Walmsley - \$44,800

Development and clinical assessment of a new T-20 genotypic resistance assay

HIV Information Infrastructure Project

The HIV information Infrastructure Project (HIIP) made dramatic progress on all fronts in 2002-2003:

- Development
- Beta Testing
- Implementation Planning
- Training
- ▶ HOOD HIIP Transition
- Research

Momentum is building as we move into the active recruitment and province-wide implementation phase of the HIIP Clinical Management System (CMS).

Development:

Development of the Microsoft SQL Server version of the HIIP CMS software was completed during 2002-2003. Significant software development milestones were achieved. We look forward to completing the remaining development tasks and initiating full deployment in 2003-2004.

Beta Testing:

Beta testing took some giant steps forward during the past year at all three sites:

- the University of Ottawa Health Services, Ottawa;
- Yonge-Eglinton Medical Centre, Toronto; and
- ▶ Sunnybrook and Women's College Health Sciences Centre, Toronto.

These beta sites represent the different HIV clinical practice models in the province: a large university-based clinic, a primary care physician group, and a hospital-based outpatient clinic. Lessons learned from this implementation provided valuable insights for our plan to roll out across the province.

Implementation Planning:

The implementation plan was approved by the HIIP Advisory Committee in 2002-2003. The plan outlines a systematic approach for implementation in over 100 sites province-wide.

Training:

The OHTN initiated the creation of supplementary training materials and expanded its scope to include primary training and materials. Our experience with testing demonstrated the importance of training to the overall success of the project.

HOOD – HIIP Transition:

The HIV Ontario Observational Database (HOOD), on which the foundation of the HIIP Project is built, remains a vital source of information for active current research in Ontario. A transition plan for the conversion of the HOOD database to the Central Research Database (CRD) has been initiated and will be implemented in tandem with HIIP site recruitment.

Research:

The research team within the HIIP has had another successful year. The HIIP research team, in collaboration with other Ontario researchers, presented numerous abstracts at national and international conferences. In addition to this work, we maintain the integrity of the HOOD data, provide reports to our stakeholder community, and respond to data requests from researchers.

The HOOD continues to expand and actively follows just over 2700 persons living with HIV/AIDS in Ontario. Adverse events information has been collected for approximately 2100 HOOD participants.

The HIIP research staff hosted a workshop for HOOD data collectors and data entry staff on maintaining data quality for research. The sessions focused on standardization of data collection and methods to ensure the integrity of the HOOD data.

July 2002 brought the first issue of the HIIP Research Update, a regular series of reports based on the data collected as part of the HOOD project. Cover stories have focused on topics relevant to our stakeholders: viral load and CD4 count trends in Ontario, and adverse event distribution in Ontario. We have also provided customized outputs to clinics that have contributed data to the HOOD project.

The HIIP Research policies were approved by the OHTN Board of Directors in March 2003. The policies are the product of a process involving a working group of stakeholder representatives. The Research team is now working on the implementation phase of the policies.

I would like to take this opportunity to thank all our volunteers for their commitment and contribution. The passing of our valued colleague Daniel Robillard (HIIP advisory committee member) this year, has reminded us all of the importance and urgency of the HIIP project to HIV research and the clinical management of HIV in Ontario.

Robert Duck, Director of HIIP

HIV Information Infrastructure Project research 2002-2003

The following research projects were conducted by internal staff and external collaborators

10th CONFERENCE ON RETROVIRUSES AND OPPORTUNISTIC INFECTIONS 2003

Gender is Associated With Virologic Rebound and CD4 Cell Increases in Those Initiating Highly Active Antiretroviral Therapy: An Observational Study

T. Forte, A.M. Bayoumi, P. Millson, P. Villeneuve, R.S. Remis, C. Major

STATISTICAL SOCIETY OF CANADA ANNUAL MEETING 2003

Using A Matched-Cohort In Order To Validate The Effectiveness Of An Intervention In HIV Routine Practice C.M. Goia, A. M. Bayoumi, S. Gardner

E - HEALTH 2003: A CATALYST FOR CHANGE

Privacy and Security of Electronic Patient Records in Changing Times (oral presentation) R. Hudder

How to Customize Implementations in a Large-scale Clinical Management System Rollout K. Roshan, R. Hudder CANADIAN ASSOCIATION FOR HIV RESEARCH (CAHR) 2003

Community-Based Research and the HIIP/HOOD Database

A.L.E. Andrews, L.A. Narciso, C.M. Goia, T. Forte, L. Brown, A.M. Bayoumi

Representativeness of the HIV Ontario Observational Database (HOOD)

T. Forte, A. M. Bayoumi, R. S. Remis, C. Swantee, A. Andrews, C.M. Goia, P. Millson, A. Rachlis, G. Robinson

Differences Between Men and Women in Adverse Events After Initiating Protease Inhibitor Therapy

T. Forte, A. M. Bayoumi, K. Yemm, P. Millson, A. Rachlis, G. Robinson

The Imputation Of Missing
Date Values In Antiretroviral
Medication Data

C.M. Goia, S. Gardner, A. Andrews, T. Forte, G. Robinson, A. Rachlis, A.M. Bayoumi

Data Considerations When Converting From Manual Extraction To Electronic Extractions R. Hudder Effects of Electronic Patient Record (EPR) Design on an Observational Research Database R. Hudder

How To Get Clinicians To Accept the Electronic Medical Record Z. Lee, R. Hudder

Adverse Events – Data Capture for Research
M. Ostan, K. Yemm

Review of Antiretroviral Utilization In Ontario: Impact on Policy A. Rachlis, C. Jones, C. Major, R. Remis, B. Marshall, L. Tennant, I. Torontali, C. Marshall, P. Balogh, P. Bowes, F. McGee

How Policy Decisions Made for the Implementation of a HIV Specific Clinical Management System Affect All Patients K. Roshan

OHTN Staff

The following are OHTN's staff

in our three program areas:

Investigator Driven Research

Program (IDRP); Priority Initiatives

Program (PIP); and HIV

Information Infrastructure Project

(HIIP) - including the HIV Ontario

Observational Database (HOOD).

INTERIM EXECUTIVE DIRECTOR

Jay Browne

EXECUTIVE DIRECTOR (to Feb 03)

Patricia Balogh

Amy Andrews

research assistant, HIIP

Susan Barruch

admin coordinator

Dr. Ahmed Bayoumi

director of science, HIIP (to Jul 02)

Linda Brown

research admin assistant, HIIP

Elaine Coyle

admin assistant, executive director

(to Mar 03)

Beverly Deutsch

admin assistant, PIP

Robert Duck

director, HIIP

Tom Fleming

research administrator, IDRP

Tonia Forte

research assistant, HIIP

Renée Fournier

admin assistant, communications

(to Mar 03)

Cristina Goia

biostatistician, HIIP

Gerrardus Heddema

user acceptance tester, HIIP

(to Dec 02)

Paul Henman

project manager, HIIP

Robert Hudder

database administrator, HIIP

Teij Janki

IT coordinator

William Lau

coordinator, PIP

Zun Lee

clinic relations coordinator, HIIP

Rose Lising

program assistant, IDRP

Carol Major

research coordinator, IDRP

Peter Marchand

financial coordinator

Michelle Ostan

research & informatics

coordinator, HIIP

Kam Roshan

business process analyst, HIIP

Chelvi Srishankar

user acceptance tester, HIIP

Sherine Sterling

admin assistant, HIIP (to Mar 03)

Polly Thompson

communications coordinator

(to Mar 03)

Ann Toth

help desk coordinator, HIIP

Sergiy Tyshchenko

programmer

Misa Yoshizaki

receptionist

HOOD Data Entry Team

Kevin Challacombe

Joe Sorbara

Kevin Yemm

HOOD Data Collectors

Daryl Bell

Fran Clark

Brenda Done

Lisa Green

Gail Howlett

Nancy McFarland

Jane McKinley

Anja McNeil

Cathy Parent

Pat Rivet

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Andrea Sharp

Suzanne Sharples

Beth Watson-Brooker

Financial Statement 2002-2003

As Interim Chair, I am pleased to submit the audited statements of the OHTN for fiscal year 2002 - 2003. I wish to thank the members of the Finance Committee for their hard work and dedication to the vision of the OHTN.

~ Vicki Ridout Kett

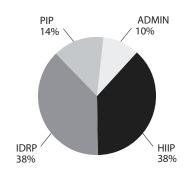
Note: These statements were audited by PricewaterhouseCoopers and approval from the OHTN Board of Directors is still pending.

	2003	2002
ASSETS	\$	\$
Current assets		
Cash	1,430,351	1,197,964
Accounts receivable	39,602	83,485
Prepaids	15,569	13,605
	1,485,522	1,295,054
PROPERTY, PLANT AND EQUIPMENT	115,060	108,344
	1,600,582	1,403,398
LIABILITIES		
Current liabilities		
Accounts payable and accrued liabilities	1,431,055	1,091,904
Deferred revenue	115,060	108,344
	1,546,115	1,200,248
NET ASSETS		
Net assets invested		
in property, plant and equipment	115,060	108,344
Unrestricted net assets (deficit)	(60,593)	94,806
	54,467	203,150
	1,600,582	1,403,398

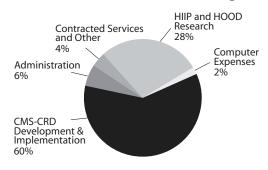
	2003	2002
REVENUE	\$	\$
Grant from AIDS Bureau	8,000,000	7,865,802
Amortization of deferred revenue	77,161	587,657
	8,077,161	8,453,459
Interest	47,725	100,060
	8,124,886	8,553,519
EXPENDITURES		
Priority Initiatives Program	1,037,823	1,057,425
Investigator Driven Research Program	2,901,433	2,824,006
HIV Information Infrastructure Project		
and HIV Ontario Observational Database	1,804,659	1,849,995
Salaries and benefits	1,880,835	1,568,785
Office administration and rent	368,508	462,501
Amortization	77,161	587,657
	8,070,419	8,350,369
SURPLUS OF REVENUE OVER EXPENDITURES	54,467	203,150
DIRECT DECREASE IN NET ASSETS	(203,150)	(563,886)
NET ASSETS – BEGINNING OF YEAR	203,150	563,886
NET ASSETS – END OF YEAR	54,467	203,150

OHTN Resource Allocation

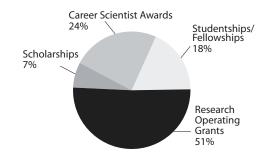
How Our Dollars Are Spent



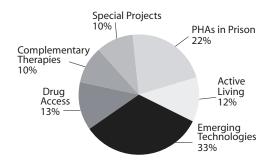
HIV Information Infrastructure Program



Investigator Driven Research Program



Priority Initiatives Program



OHTN Staff and Volunteers



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