

PLHIV Laud Community Services Received during COVID-19 Lock Down

By Blessing Ukpabi



IHVN Community Service Team Member, Mr Joseph Ozigo taking blood sample of Mr Michael Terngu in his house in Abuia. FCT.

ichael Terngu was desperate during the lock-down enforced in March 2020 to prevent COVID-19 spread. His HIV medications were almost running out with barely five days' worth of drugs left at home!

His concern was not just that he could not move to Asokoro District Hospital in Abuja where he accesses care and treatment. Michael wondered if he could get medications at all because the hospital was a designated isolation center.

Josephine T., who has been living with HIV since 2004 was also scared during the lock down. She heard rumours that HIV medications would be diverted for the treatment of COVID-19. "I

don't want to miss this drug, even for one day because I know the implications," she said.

For Comfort Garba, who is also living with HIV, it was not just the fear for unavailability of drugs and how to get them during the lock down that was of concern to her. Pregnant Comfort had traveled to her home town in Kaduna State for a burial and was stuck there. Her concern was for the health of her unborn child especially as she was away from Abuja where she receives treatment.

The worries of Michael, Josephine, Comfort and thousands of other People Living with HIV (PLHIV) were short-lived as Institute of Human Virology Nigeria (IHVN) expanded its community services to provide client-centered care despite the lock down.

IHVN Deputy Director, Prevention, Care and Treatment, Dr. Helen Omuh said that "clients received their drugs in the community and were able to both continue their treatment and have their viral load test done with samples collected in the community, to assess how well they are doing on treatment."

A team of IHVN staff consisting of medical laboratory scientists, nurses, counselors, amongst other health workers, were assigned to different communities to offer services based on client preferences.

For instance, Michael preferred to pick up his drug at a junction close to his house, and his drugs

From the Chief Executive Officer

COVID-19 has impacted our lives in many ways. Part of the measures taken to curb the spread of COVID was the lock down which came with certain barriers. Patients were locked down and unable to go to the health facility to collect the drugs and a number of health facilities were closed.

At the peak of the lock down, we had to act to ensure continued care and treatment for PLHIV. Some of the steps we took include, decentralizing the collection of drugs to either pharmacies or health care centers close to people's homes.

Secondly, we had community workers who were taking the drugs to those that could not go out at all. Then, we combined that with the collection of blood samples for monitoring. We leveraged on the COVID-19 testing teams going out for community testing. IHVN also provided drugs for a longer duration of time for stable patients.

With education of the health care workers, and provision of adequate Personal Protective Equipment (PPE), it was possible for us to continue to provide services for HIV patients and also for tuberculosis patients.

I must commend the efforts of our team and the efforts of the

health care workers, hospital-based staff and the community-based organizations that we work with because they risked their lives in order to do this. As a result, a number of our staff and community-based workers also tested positive for COVID-19. We salute their bravery and service to others in the midst of the pandemic. This edition of IHVN News highlights all these efforts and is for your reading pleasure.



Dr. Pafrick Dakum Chief Executive Officer, Institute of Human Virology, Nigeria

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were given to him there.

"I presented my hospital card to the IHVN staff for documentation and he gave me the HIV medications. I got three months' worth of drugs," he said.

Michael was clustered with other clients in his community who selected him to collect drugs on their behalf using their hospital cards.

"I was happy to get my drugs. I gave the IHVN staff's phone number to the other clients and told them to call him to say thank you." Michael said, beaming with excitement.

Sewuese Terseer, another client living in Mabushi, Abuja, says that when she collected her drug refill at home, she prayed for IHVN. Community Pharmacist, Nnenna Mba speaks with Comfort Garba in front of her pharmacy in Nasarawa State, Nigeria.

"There was no way to get to the facility because there was no movement. I was disturbed. My children were disturbed but someone from IHVN called me, asked about my welfare and drugs remaining.

Then, they came right here to my house to give me the drugs, took my blood for a viral load test and I was happy," she said.

Josephine T and Comfort Garba got their drugs through another clientcentered service, the Community Pharmacy Initiative. Josephine's fears, that her HIV medications would not be available due to rumours, about its diversion for COVID-19 treatment, were allayed when she put a phone call through to the community pharmacy where she had been collecting drug refill before the lock down.

"He (the community pharmacist) told me that my drugs are intact and I relaxed." When it was time to get a refill, I went to the pharmacy to get it." she said.

Comfort Garba, who had been referred to the community pharmacy from her hospital for drug refills before she became pregnant, also called her community pharmacist.

"I called her and told her that I was in my village. We made an arrangement for my niece in Abuia to collect the drug refill. My niece sent it to me through my uncle, a military officer, who happened to be coming to Kaduna at that time," she said. IHVN Program Officer, Prevention, Care and Treatment, Mr. Yaro Ovinlove, noted that more than 3000 clients in the Federal Capital Territory were provided with customized community services.

"Even clients in hard-to-reach communities were reached. We used motorcycles to go to some villages and traced the physical addresses of those whose phone numbers were not going through.

In some cases, we used a coding

system. We dropped drug refills in a trusted community pharmacy, giving them the same code given to the client for drug pick-up," he said. IHVN Deputy Director, Prevention, Care and Treatment, Dr. Helen Omuh, said that lock down restrictions would have resulted in "unsuppressed viral load, development of drug resistance among PLHIV and increased HIV transmission thereby impeding/slowing down the progress towards achieving epidemic control."

She stated that with drug refills, viral load sample collection and other services like tuberculosis screening and preventive therapy, standard of care for PLHIV was maintained.

More than 7,800 clients in the Federal Capital Territory, Nasarawa, Rivers and Kastina states received drug refills from community pharmacies before and during the 2020 COVID-19 lock down.

"We have continued with the community services because we do not plan to change a winning strategy but, rather, strengthen it for better performance," Dr Omuh said.



Biographies of our key staff continue with the Assistant Director Laboratory.

Mr. Abubakar Abdullahi

As Assistant Director, Laboratory, and Head of Department, Clinical Laboratory Services at the Institute of Human Virology Nigeria (IHVN), Mr. Abubakar Abdullahi ensures that quality diagnostic services are provided to support prevention, care and treatment activities of the Institute.

He supervises the development and strengthening of diagnostic algorithms, transfusion safety policies, and capacity development in line with national policies. Mr. Abdullahi also oversees collaborative activities and services such as Early Infant Diagnosis, viral load testing, post-market verification of HIV and TB kits, quality assessment programs and maintenance of laboratory equipment across over 100supported tiered laboratories.

He liaises with funders, stakeholders, partners and the government of Nigeria to support in-country laboratory system strengthening and facilitate innovation in laboratory services to combat HIV/AIDS and other infectious diseases.

His over 30 years of experience has been in medical laboratory science practice, implementing public health programs, capacity building for pre-and in-service laboratory personnel, and organizing transfusion and blood safety programs.

Mr. Abubakar Abdullahi is an alumnus of the Ahmadu Bello University Zaria, Kaduna State and Ambrose Ali University, Ekpoma,



Edo State Nigeria, where he earned a Bachelors Degree and a Masters Degree in Medical Laboratory Science and Immunology respectively. He has participated in several training programs within and outside the country and was a Board Member of the Medical Laboratory Science Council of Nigeria. He is a current member African Society of Laboratory Medicine, Association of Medical Laboratory Scientists of Nigeria, IHVN Mental Health Committee and IHVN Bids Committee. Mr Abdullahi has also served in positions with the Institute such as, Senior Program Officer Laboratory, Program Manager Laboratory Commodity Supply Chain Management & SHARING Laboratory Training Project.

Prior to working in the Institute, he was a Medical Laboratory Scientist in Jos University Teaching Hospital (JUTH). He was also Visiting Senior Lecturer at the School of Medical Laboratory Science, Usman Danfodio University, Sokoto from 2007 to 2016.

His hobbies are reading, driving, and playing table tennis. He is happily married with four children.

WATCH OUT) ... For other Key Staff in the next edition.



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Research Reveals over 3 million Gene Variations Discovery can Improve Health Outcomes in Nigeria says Adebamowo

By Blessing Ukpabi

Researchers in the African Collaborative Center for Microbiome and Genetic Research (ACCME) at the Institute of Human Virology Nigeria (IHVN) have concluded a research revealing over three million gene variations in Africa.

The research, done in collaboration with other researchers across Africa under the Human Heredity and Health in Africa (H3 Africa Consortium), discovered a great deal of gene variations even among people in the same country and region.

ACCME Principal Investigator Prof. Clement Adebamowo, who disclosed this in an interview, said that this novel finding holds great promise for identifying diseases that Nigerians and Africans are vulnerable to, and which drugs will be effective in treating them.

"This research characterized variations in multiple African populations in high level of detail that has not been done before in the world. If you know that certain genetic variations are common in a population, and that the genetic variation is associated with a specific disease, then you can place a program for testing and identifying people who may have that variation. You can also put in place measures to prevent people from having diseases associated with the variation," Prof. Adebamowo said.

He added that the variations revealed through the research, would also give insight into side effects of certain drugs, and history of ethnic populations. **ACCME Principal Investigator**,

Prof. Clement Adebamowo "In this particular study for the Nigerian population, we are reporting the dramatic difference that we saw in the genome of the Berom people of Plateau state. What we found was that the Berom people came to the current location in modern Nigeria by migrating from East

That is interesting because they are genomically different from their

Africa about 1,500 to 2,000 years ago.

genomically different from their surrounding tribes and cultural groups," he said.

Prof. Adebamowo also explained that the use of genomics to trace ancestry helps scientists to understand the distribution of population and the reason for their current location.

"The African population is the oldest human population so we need to know the type of variations present to better understand other human populations."

Prof. Adebamowo urged researchers to utilize the information from the research which has been published in Nature, the prestigious medical journal.

"Any researcher in Nigeria or any part of the world can access this data from the public data base and use it for their own research.

ACCME has data and genomic information on at least 400 other ethno-

linguistic groups in Nigeria. We are analyzing this to determine distribution of disease-causing genes in these tribes," he said.



ACCME Principal Investigator, Prof. Clement Adebamowo

By Luret Dakum

IHVN participates in COVID-19 Clinical Trial

The International Research Center of Excellence (IRCE) at Institute of Human Virology Nigeria (IHVN) has commenced an international study to find safe and

globally with mild or moderate symptoms of the disease.

IRCE Executive Director, Prof. Alash'le Abimiku, stated that the study, which

involves partnering with the National Hospital, Abuja, and University of Abuja Teaching Hospital, Gwagwalada and assessing COVID-19 patients admitted

into their isolation centers.

"The study will utilize infusions of antibodies (hyperimmunoglobulin) from COVID-19 survivors with the aim of evaluating its efficacy at improving the clinical outcome of patients at risk of degenerating with the disease," she said.

Prof. Abimiku expressed hope that findings from the study "could provide a pathway to a treatment option and prevent patients from having a worse progression into the disease in the Nigerian population.

According to the Principal Investigator for the Nigerian Study Center, Dr.

Nnakelu Eriobu, "the duration of the research study is for 12 months or earlier depending on the speed at which participants are enrolled into the

research. In future versions of the research, one or more drugs from a different class, with a different mechanism of action, may be considered."

Dr. Eriobu, said that a research team of doctors, nurses, pharmacists, data managers and other health care workers have been trained on study requirements.

Nigeria is the only African country participating in this research funded by the US National Institutes of Allergy and Infectious Diseases (NIAID) at the National Institutes of Health, and carried out by the International Network for Strategic Initiatives in Global HIV Trials (INSIGHT) of which IHVN is a member.

IHVN has participated in other studies within the INSIGHT clinical network such as the Strategic Timing of Antiretroviral Treatment (START) Study, a clinical trial involving 215 sites in 35 countries. Findings from the START study had shown that, people living with HIV have a considerably lower risk of developing AIDS or other serious illnesses if they start taking antiretroviral treatment sooner.



A cross section of health care providers participate in an orientation on implementation of the research project.

effective treatment for COVID-19.
The study titled, In-patient Treatment with Anti-Corona virus Immunoglobulin (ITAC) is to enroll 500 hospitalized adults

has been approved by National Health Research Ethics Committee (NHREC) and National Agency for Food and Drug Administration and Control (NAFDAC),

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Photo Gallery



Young men come out to be tested at Duduguru community in Obi Local Government Area in Nasarawa State, Nigeria during a 2020 World AIDS Day outreach.



IHVN staff lead a road walk in Lafia, Nasarawa State, to mark World AIDS Day 2020.



(L-R): Dr Mekele Igwe, HIV Focal Person, Rivers Primary Health Care Management Board (HCMB), Permanent Secretary Rivers State Ministry of Health, Dr. Ndidi Chikanele Utchay, Rivers SURGE Project Director, Dr Olayemi Olupitan during a World AIDS Day 2020 event in Port Harcourt to sensitize the public and launch HIV self-test kit.



IHVN staff setting up a mobile tent and van to conduct HIV testing at the National Defence College Clinic in Abuja



(3rd Left) IHVN Chief Executive Officer, Dr Patrick Dakum, with members of the Association of Women Living with HIV (ASWHAN) at a press conference organized by the National Agency for the Control of AIDS (NACA) to commemorate World AIDS Day 2020.



IHVN staff join in the 16 Days Activism against Gender Based Violence (GBV) campaign to raise awareness about preventing gender-based violence.

Health Care Workers Speak on Community Services During the COVID-19 Lock Down

Rita John, a community volunteer among female sex workers shares her experience.

What do you do in the community?

I counsel clients. I work with female sex workers. I also stay here (in the community) to make sure that things go well. I encourage them to use condoms. I tell them that if any client tells them to have sex without condom, that they should come with the person to my house so that I'll get them tested to know their status. Even when the test is HIV negative, I still encourage them not to have unprotected sex.

What did you do during the lock down?



Rita John counsels a client in a community in Abuia

There was no movement so some of them could not travel. Most of our clients kept asking how they are going to get their drugs. I

told them not to worry because IHVN, will make it available for them. Then we went to the client's houses to give them medications. We visit and call them, find out if they have sexually transmitted infections. We reach them with drugs to prevent infections and ensure they do not default in taking their HIV medications.

I hear viral load tests were conducted too...

Yes, the IHVN team came here to take samples

From your interaction with many clients, how do they feel about the community services?

They feel good. Some of them feel like we should keep giving them all the services at home because they don't have transport money to go to the hospital. They really felt good.

Community Pharmacist, Nnenna Mba speaks on community services rendered during the lock down

What do you think about collecting blood samples for viral load test carried out in community pharmacies during the pandemic?

Collecting the blood samples for tests in the

community pharmacy helps us confirm that the patient has done the test. Before, when you give a client a form for the test, some will say they have done the viral load test even though they have not done it.

I also think the chances of mixing up the results here in the community pharmacy will be minimal than in the hospital because they are fewer people. I feel very okay about it. There are a lot of advantages. I don't think that there are any disadvantages.

When you call the clients to tell them about their samples for viral load test to be done in the community pharmacy, what kind of feedback did you get from the clients?

They were happy. There was one man that was begging me to let him know when next viral load tests will be carried out. This last time, he came in for the test and was happy.



Community Pharmacist Nnenna Mba gives drug refills to a client in her pharmacy in Nasarawa State Nigeria

Expert Interview

Educate Opinion Leaders on COVID-19 Vaccine – IRCE Executive Director

There is a fear that the COVID-19 vaccine is aimed to depopulate Africa, do you agree? Why do you think there is so much fear around the vaccine?

This seems to be the same story anytime that a vaccine is being rolled out. We had the same argument when the polio vaccine was being rolled out in Nigeria. I would expect that if that is the plan, then whoever has this grand plan will use vaccines for diseases that are found only in Africa. Right now, most of those getting the vaccines are in the developed nations so how does this

depopulate Africa? I believe that fear comes from the versatility of social media where a lot of misinformation is being spread. We need to provide scientific facts to the opinion leaders and the community so that their questions and concerns are addressed, and the lies being spread via social media is stopped.

Some are indifferent because they don't believe COVID19 is real. What should Nigerians with this belief know about the vaccine?

I believe that the NCDC and the

Presidential Task Force has addressed this issue in great detail from the beginning of the pandemic. A lot of people have come forward and talked about their own battle with the disease or loss of loved ones. The media should play a role in educating our population so they do not die of ignorance.

Do you think Africa can produce a vaccine?

Yes, but I am not sure that it is the best use of Africa's limited resources because of the high level of infrastructure and regulations that guide vaccine production that goes into humans.



Executive Director International Research Center of Excellence (IRCE),

Prof. Alash'le Abimiku

IHVN Surge Projects Make Progress in Achieving HIV Epidemic Control

By Luret Dakum

ince April 2019, Institute of Human Virology Nigeria has implemented the SURGE project in the Federal Capital Territory, Nasarawa State and Rivers State, Nasarawa State.

The project is in response to the Nigeria HIV/AIDS Indicator and Impact Survey (NAIIS) and is aimed at accelerating HIV epidemic control in states identified to have a high HIV prevalence.

In the Federal Capital Territory the NAIIS study showed a prevalence of 1.6%. According to IHVN FCT Senior Program Officer, Dr. Adebayo finding of clients living with HIV has greatly improved. He stated that the positivity yield is 9%, which is higher that the NAAIS estimate of 1.6%. "This has been achieved in both health facility and community-led HIV Testing Services through hotspot mapping in general population and key population sub-groups, index testing/partner notification services, and sexual network testing. As at 14th February, 2021, 67,822 individuals were receiving treatment under the project.

In Nasarawa state, more than 9,600 people living with HIV have been identified and are receiving antiretroviral medications. According to Acting Nasarawa State Manager, Dr. Yakubu Sambo, the project in the state is carrying out HIV testing activities including home-based testing; home visits and home delivery of drugs; use of treatment support specialists and community pharmacies to collect viral load samples.

In Rivers Sate, the NAIIS report revealed that there were an estimated 169,768 people living with HIV yet to be commenced on antiretroviral medication – a 79% treatment gap. State HIV prevalence was pegged at 3.8%, higher than the national prevalence of 1.4%



IHVN staff at Ogu Bolo LGA. Rivers State to provide community services

and the second highest in the country after Akwalbom State. With funding from the US President's Emergency Plan for AIDS Relief (PEPFAR) through the US Centers for Disease Control and Prevention (CDC), IHVN commenced the SURGE project with the goal to bridge the treatment gap from 21% to 81%. Support from the Rivers State Government to waive user fees for people living with HIV, and robust stakeholder involvement has been key

robust stakeholder involvement has bee

IHVN Staff, Mr. Yaro Oyinloye conducting a HIV test during a COVI-19/HIV Community testing outreach in Mabushi, Abuja.

in making progress to achieve HIV epidemic control in Rivers State.

IHVN Rivers SURGE Project Director, Dr. Olayemi Olupitan also notes that strategies such as community testing through hot spot mapping; collaboration with private laboratories, patent medicine vendors and traditional birth attendants have been adopted. The project has also utilized an enhanced peer approach in reaching key populations, and differentiated model-of-care services.

"In line with the objectives of the project to find all PLHIVs, and commence and sustain them on drugs, we identified seven focus Local Government Areas with the highest prevalence rates and unmet needs. Gokana, Khana, Andoni, Degema, Asari-Toru, Bonny and Okrika, have been prioritized for intensified case finding activities," she said. Efforts to achieve epidemic control in the state is already yielding progress as 72, 807 people have been placed on treatment as at 3rd October, 2020. Over two million individuals in the state were also tested for HIV.

As the Institute surges and rapidly increases access to HIV services, the goal remains to ensure that at least 95% of people living with HIV know their status, at least 95% of identified people living with HIV are placed on treatment, and at least 95% of those placed on treatment achieve viral suppression.

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