

THE COMMUNITY MONITOR

A Newsletter Publication of the Houston Medical Monitoring Project

Houston Department of Health & Human Services



Just one more thing and we can complete the puzzle.
Houston Medical Monitoring Project (HMMP)



The Community Monitor
Volume 2, Issue 1

In this Issue Page

HMMP Summary of Activities 2004-2007	1
HMMP Pilot Year 2005 Data Collection	2
APHA Presentation on Latinos	4
HMMP Staff Spotlight	5
The Schrader Clinic	5
World AIDS Day 2007	6
HMMP'S Photo Gallery	7
HMMP's Community Spotlight	8

HOUSTON MEDICAL MONITORING PROJECT SUMMARY OF ACTIVITIES, 2004-2007

The Medical Monitoring Project (MMP) is a CDC-funded patient survey designed to learn more about the experiences and needs of people who are receiving HIV care. The Houston Department of Health and Human Services (HDHHS) entered into a cooperative agreement with the Centers for Disease Control and Prevention in the year 2004 to conduct the survey in Houston. Data collection began in June 2005 and is expected to run through the summer of 2010. Houston is one of the 26 sites participating in the MMP.

The project will assess the following aspects of HIV/AIDS care: access to care including prevention and support services; unmet needs of people living with HIV/AIDS; and effectiveness of treatment. As part of the cooperative agreement, HDHHS established a Community Advisory Board (CAB) and a group of consultants to the CAB. The CAB and consultants are responsible for raising awareness of the Houston Medical Monitoring Project (HMMP) and serve as a liaison to people living with HIV/AIDS, healthcare providers, community and care planning groups, underserved communities, and other stakeholders to ensure the equity, quality, and efficacy of the project.

The CAB has been very supportive of the project and has assisted in local provider recruitment efforts. Since its inception, five local CAB meetings have been held in Houston, and two national CAB meetings have been held in Atlanta, with Houston sending a CAB representative. Currently, the CAB is made up of 18 members from local area organizations and 10 Consultants from local and surrounding health departments. Houston is also represented at the national level by an HIV/AIDS practitioner who is a member of the national provider advisory board to the CDC. This board of physicians serves in an advisory capacity to the CDC and the Houston representative has attended two of such national meetings in Atlanta.

Currently, HMMP staff continues to attend outreach events involving stakeholder organizations in the area. Since the inception of the project, Team HMMP has attended a total of 52 events. The purpose of these events is to showcase the project to the community and other stakeholders. The interactions of HMMP staff with potential patients and providers who participate in such events have been helpful. During the 2005-2006 data collection cycle, nine providers participated in the data collection activities.

A total of 200 patients were randomly selected for participation in the data collection activities. As of April 2007, a total of 46 interviews have been conducted and 175 medical chart abstractions of sampled patients completed.

For the 2007 data collection cycle, which is expected to be nationally representative, [...Continue on page 2]



Roundtable Discussion of MMP at the 2007 National HIV Conference in Atlanta, GA



**Houston Medical Monitoring Project
Local Community Advisory Board**

Dan Snare, Chairperson
Bering Omega Community Services

Cathy Wiley, *HDHHS*

Bernie Vasquez, *Center for AIDS*

Amber David, *Bread of Life*

Maria Rodriguez-Barradas, MD
VA Medical Center

Marlene McNeese-Ward, *HDHHS*

Beau Mitts, MPH, *HDHHS*

Tom Giordano, MD
Medical Director, *TSC*

Nancy Miertschin, MPH, *HCHD*

Porfirio Villarreal, *HDHHS*

Charles Henley, *HCPHES*

Roberto Andrade, MD, *TSC*

Sharonda Wright, *NAACP*

Eric Roland, *Legacy Clinic*

Tanvir Bell, MD,
Thomas Street Clinic

**Houston Medical Monitoring Project
Provider Advisory Board Representative**

Hunter Hammill, MD
Primary Health Network of South Texas

**Houston Medical Monitoring Project
Consultants**

Raouf Arafat MD, MPH,
Assistant Director, HDHHS

Herminia Palacio, MD, *HCPHES*

Jean Galloway, MD
Fort Bend County Health and Human Services

Kaye Reynolds, MPH
Fort Bend County Health and Human Services

Cathy Troisi, PhD, *HDHHS*

Lupita Thornton, *HDHHS*

Umir Shah, MD, *HCPHES*

Marcia Wolverton, MPH, *HDHHS*

Paul Simmons
Co-Executive Director, CFA

Houston Medical Monitoring Project Summary of Activities, 2004-2007 [Cont'd from page 1]

HMMP will be working with 14 randomly selected providers. HMMP will interview and abstract medical records of 400 randomly selected patients from these selected providers/facilities. Data collection activities began in November 2007 and end in May, 2008. In preparation for these activities, HMMP staff is undergoing both in-house and CDC-organized data collection and management training programs. Furthermore, HMMP is currently updating the provider sampling frame to ensure that new facilities are captured and closed facilities are removed from the frame. This procedure coupled with annual selection of participating providers, gives every provider an equal opportunity of being selected to participate in the project in any given year. The 2008 data collection activities are expected to begin in the Fall of 2008.

**Houston Medical Monitoring Project (HMMP)
Pilot Year Data Collection (2005)**

The Medical Monitoring Project (MMP) arose out of a need for a nationally representative, population-based surveillance system to assess behaviors, clinical outcomes, and quality of care of people with HIV infection who are receiving care. The surveillance system is based on a three-stage systematic Probability Proportional to Size (PPS) sampling method.

The first stage involved selection of 20 geographic primary sampling units (PSU), including six cities based on AIDS prevalence at the end of 2002. Houston was picked as one of the cities. The second stage involves the development of HIV care facility frame in Houston/Harris County based on caseloads. A total of 107 facilities were sampled including large (more than 100 HIV patients), medium (50-100 HIV patients) and small (less than 50 HIV patients); private and public facilities, Ryan White and non-Ryan White supported facilities. Of this number, 25 were selected to participate in the project. The locations of sampled and selected providers/facilities for 2005 are represented (see accompanying map on page 3). However, only nine of these providers agreed to participate in the project with the distribution pattern indicating that 96% of these facilities were large and 2% each were medium and small facilities, respectively. The third stage of the sampling process involves the patients. Houston surveillance staff worked with 9 of the sampled providers that agreed to participate in the project to develop a list of 3,574 HIV-infected patients who received care (from these providers) during Patient Definition Period (PDP) of May through July of 2005.

Two-hundred out of 3,574 patients sampled from these facilities were selected for data collection (interviews and medical record abstractions, see Table 1). The QDS™ Computer Assisted Personal Interview (CAPI) instrument was used to conduct face-to-face interviews with patients. The Data Collection module creates data files in a binary file format, which are encrypted to preserve the confidentiality of information. Activities at facility and patient levels were tracked on daily basis using standard workbooks provided by the CDC. At close-out of the 2005 data collection activities, a total of 46 in-person interviews and one proxy interview had been conducted, and 175 medical record abstractions were completed. A breakdown of medical record abstractions showed that 175 medical histories of patients with 1,254 surveillance periods were obtained in the selected population. The highest surveillance period encountered within the PDP in the selected patient population was 36 with an average of 7.

The selected population was comprised of 149 males (75%) and 51 females (25%). A breakdown of the selected population along race/ethnic lines (Figure 1) indicated that 92 (45%) were African-American, 57 (29%) were White, 49 (25%) were Hispanic, and 1 (1%) was of Asian origin. The age distribution of study population in comparison to core HIV surveillance data in Houston/Harris County is shown in Figure 2 (HIV/AIDS Reporting System comparison are for cumulative AIDS cases reported from 1981 [...Continue on page 3])



[...Continued from page 2.]

through 12/31/2005¹). The age distribution patterns in both data sources closely mirror each other, indicating that the sample selected for 2005

Table 1: Medical Monitoring Project Data Domains, 2005

Collected by Interview	Collected by Medical Record Abstraction
Demographics	Demographics
Access to health care	Access to health care
Adherence to antiretroviral therapy	AIDS-defining and other illnesses
Unmet need	Laboratory values
Sexual behavior	Prophylaxis
Drug and alcohol use history	Antiretroviral and other medications prescribed
	Substance abuse /Mental Health
	Reproductive Health
	Mortality Data
	Referrals to other facilities/services

data collection was truly representative of the HIV/AIDS community in Houston/Harris County.

The 2005 data collection served as a pilot year for the medical monitoring project, and as such, data collected during this period is not representative data. Consequently, all information obtained from the current data is not conclusive and should be evaluated with care. However, this population-based HIV surveillance project, which collects data from people through interviews and medical record abstractions, promises to increase the representativeness of epidemiology profile data. It will also identify care and treatment

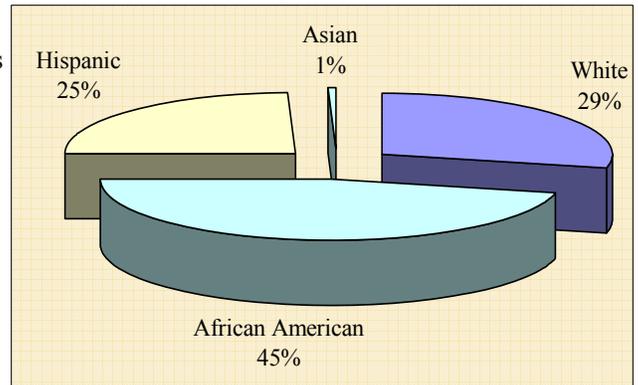


Figure 1: Characteristics of selected study population by race/ethnicity.

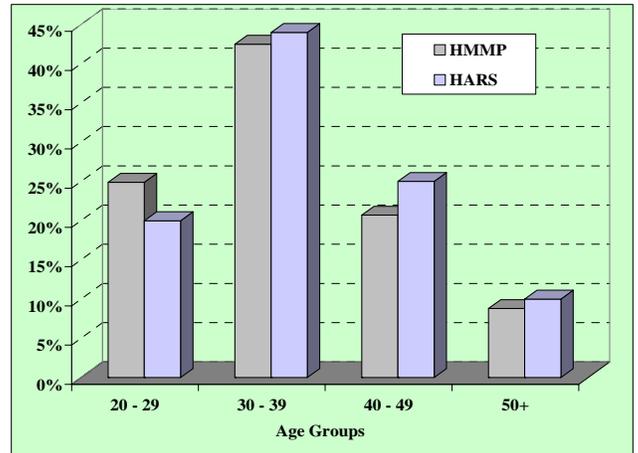
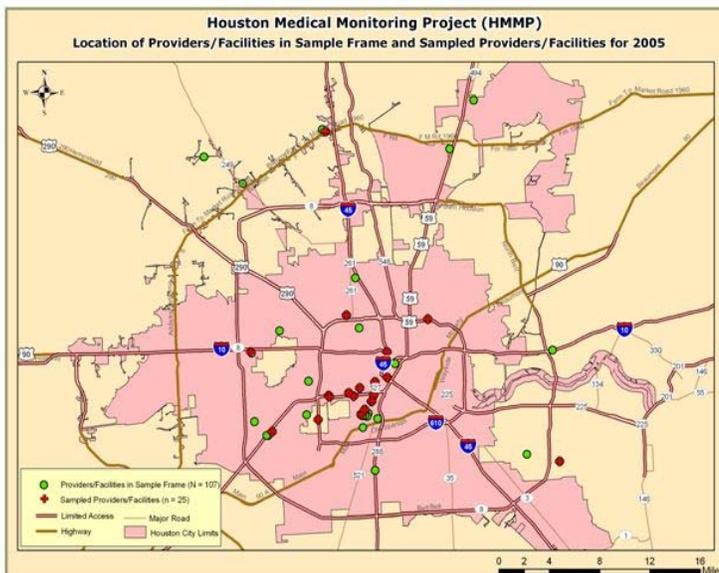


Figure 2: Age distribution of study population in comparison to Core HIV surveillance data in Houston/Harris County²



utilization needs, as well as increase the relevance of data for use at the local level (e.g., for Ryan White Comprehensive AIDS Resources Emergency [CARE] and HIV prevention and care planning groups). As a provider or patient, if you are selected to participate in the project, consider it your chance to help by sharing your experience. This is important because your experience matters, and could help guide decisions that may improve the lives and the quality of care for people living with HIV/AIDS.

References

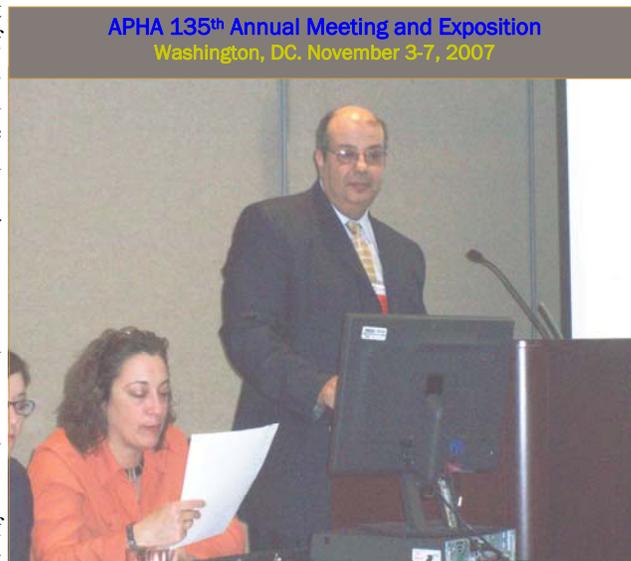
1. CDC: Medical Monitoring Project. Available at <http://www.cdc.gov/hiv/topics/treatment/mmp/index.htm>
2. AIDS: Summary of Houston/Harris County Cases (cumulative – reported 1981 through 12/31/05. Bureau of Epidemiology, Houston Department of Health and Human Services.
3. Houston Medical Monitoring Project (HMMP) Website: <http://www.houstonx.gov/health/Epidemiology/>



A Survival Comparison between HIV+ U.S.-born Latinos and Foreign-born Latinos in Houston, Texas 1990-2001

Dr. Raouf Arafat, Houston Medical Monitoring Project consultant and assistant director of the Houston Department of Health and Human Services, presented a study titled "A Survival Comparison between HIV+ US-born Latinos and Foreign-born Latinos in Houston, Texas 1990-2001" at the recent meeting of the American Public Health Association (APHA). The study was based on Adult/Adolescent Spectrum of HIV/AIDS Disease (ASD) project, CDC National surveillance program, which provides a method for monitoring the trends and full spectrum of the HIV-related illnesses. Other collaborators in the study include Debo Awosika-Olumo MD, MS, MPH, HMMP principal investigator; Marcia Wolverton, MPH, HMMP consultant and ASD principal investigator, James Gomez and Lydwina Anderson, both HMMP staff.

The study examined the incidence density rates between foreign-born and US-born Hispanics in contracting HIV opportunistic infections, the health services utilization and the survivability of the two groups. An attempt was also made in the study to compare the relative risks of substance abuse, mental health conditions, and hepatitis C among foreign-born versus U.S.-born Latinos. The results showed that before the introduction of HAART, the incidence rate for opportunistic infections were generally higher among U.S.-born Latinos compared to foreign-born Latinos prior to 1995. The trend reversed after the introduction of HAART (1995-1996), with foreign-born Latinos experiencing higher rates of opportunistic infections. The health care utilization for the two groups of Latinos was not significantly different, although foreign-born Latinos tend to have longer hospitalization. Of the conditions investigated, including substance abuse, mental health conditions and hepatitis C, the U.S.-born Latinos had less favorable outcomes than foreign-born and were more subject to depression, psychosis and contracting hepatitis C. The Kaplan Meier survival curve indicated a pronounced, and significant difference ($P < 0.001$) between foreign-born and U.S.-born Latinos. The mean survival time for U.S.-born Latinos was 78 months, compared to 95 months for foreign-born Latinos. After adjusting for age and gender difference, and social risk factors in both groups, the significant difference in survival time still remained. The study concluded that HIV positive U.S.-born Latinos have less favorable survival outcomes than foreign-born Latinos.



"Tree of Remembrance" at Ben Taub General Hospital, Houston honored those who have died due to AIDS during World AIDS Day 2007 event.

HMMP Team Attends National Advisory Council Meeting

HMMP team members Dr. Salma Khuwaja, Dr. Tai Fazoranti, Dan Snare, Community Advisory Board chairperson and Dr. Thomas Giordano, Provider Advisory Board representative, attended the project's National Advisory council meeting in Atlanta. Also in attendance were representatives from the 26 project sites and representatives of the Community Advisory Board (CAB) and the Provider Advisory Board (PAB).

The meeting offered an opportunity for the Houston team to interact with other sites and discuss project-related activities and challenges. The ability of the CDC to bring all the participating sites and their advisory council representatives to share their experiences is laudable. Many other organizations like the American Association of HIV Medicine (AAHIVM), Veterans Administration (VA), and the National Association of People Living with AIDS (NAPWA) were also present. The different organizations spoke in support of the MMP and the new system of surveillance, which is expected to collect data from over 30,000 sampled patients by the end of the project cycle in 2010.

STAFF SPOTLIGHT

HMMP Principal Investigator

Dr. Adebowale “Debo” Awosika-Olumo received a Doctor of Medicine degree from Nigeria, a Master’s of Science degree in occupational and environmental health from England, and a Master’s of Public Health degree in public health administration from Northwest Ohio Consortium for Public Health, Medical College of Ohio, Toledo, Ohio.



Awosika-Olumo is currently chief of the Bureau of Epidemiology, Office of Surveillance and Public Health Preparedness, HDHHS. He has managed many programs and analyzed Houston’s data including Adult/Adolescent Spectrum of HIV Disease (ASD) project, Houston’s Survey of HIV Disease and Care (SHDC) and Supplement to HIV/AIDS Surveillance (SHAS).

He has an extensive research background that includes over 20 years of pre-and post-medical doctorate research, and public health experiences in Nigeria, England and United States, respectively. He has authored and co-authored many scientific papers in internationally acclaimed peer-reviewed journals in various fields of medical science, some of which are in the area of HIV/AIDS. Prior to moving to Houston in 2003, he was a consultant clinical research analyst, for IMEx Associates Inc., Cleveland, Ohio and an Adjunct Assistant Professor of Public Health at Bowling Green State University, Cleveland, Ohio.

HMMP Staff Honored

Dr. Osaro Mgbere, HMMP biostatistician/data manager, was among members of the external committees of The Ryan White Planning Council honored with certificates of appreciation at the Council’s 2007 Appreciation Ceremony, for service, dedication, and commitment to people living with HIV/AIDS in the Houston area. Mgbere, who has served as external member of the HIV



THE SCHRADER CLINIC

Dr. Shannon R. Schrader received his Bachelor of Science Degree in biology at the University of Kentucky (May, 1984) in Lexington, Kentucky, and his Doctor of Medicine degree from the University of Louisville School of Medicine in Louisville, Kentucky (May, 1989). He went on to receive the Kentucky Academy of Family Physicians Award upon graduation from medical school. His residency in family medicine was completed at Baylor College of Medicine (June, 1989–June, 1992) and upon graduation he was awarded the Ida and Taylor Pickett Award for outstanding resident.



Schrader is currently the medical director of the Schrader Clinic in Houston. The Schrader Clinic offers family practice, HIV care and other services and seeks to “maintain a professional and compassionate environment for all of their clients.”

He is also the medical director of the Clinical Research Network in Houston and the Body Positive Wellness Center. He served on the Thomas Street Clinic staff from 1995 to 2000, and was the medical director for Amigos Volunteers in Education and Services (AVES) from 1998 to 2001. He has co-authored several publications on HIV and served as investigator for the AmFAR Community Based Clinical Trials Network (1995-1997). Schrader is currently the co-investigator for the Terry Beirn Community Programs for Clinical Research on AIDS (CPCRA).

The Schrader Clinic participated in the HMMP (Houston Medical Monitoring Project) for the 2005 – 2006 data collection period and has demonstrated a continued willingness and interest in contributing to the national effort headed by Center for Diseases Control and Prevention (CDC) and Houston Department of Health and Human Services (HDHHS) for documenting the impact of HIV care for HIV-infected persons in Houston, Texas.

For more information about the Schrader Clinic, please contact the office at 713-526-1717.

Comprehensive Planning committee since 2005 has also been a member of the Joint Epidemiology, and Data Collection Work Groups of the 2007 Houston Area Comprehensive HIV/AIDS Needs Assessment project of The Ryan White Planning Council.





WORLD AIDS DAY 2007



World AIDS Day is organized annually to raise awareness of the impact that AIDS has in society, remember the millions who have died from AIDS and help prevent the spread of HIV. The 2007 event marked the 26th annual World AIDS Day commemoration. The Houston Medical Monitoring Project team participated in the World AIDS Day event held on Saturday December 1, 2007 at the Texas Southern University's Sterling Life Student Center. The event, sponsored by the Houston Department of Health and Human Services (HDHHS), Texas Southern University and numerous community organizations that provide prevention services and treatment for people with HIV or AIDS, featured musical performances by top hip hop and R&B recording artists Mike Jones, Bun B, and Harmoné. Other entertainers that performed at the event include Se7en, J Xavier, Blessed Child, Werner Richmond, Baby Girl, Mookie Jones, MC Wickett Crickett, and the Gay Men's Chorus of Houston. Local AIDS activist Amber David, chair, African American State of Emergency Task Force for HIV/AIDS, gave a keynote address at the ceremony. Local elected officials also gave brief remarks. Community organizations offered free HIV testing, and staff booths provided educational information about HIV, AIDS and local prevention and care services. Participants received various gift items with the message of the day "Stop AIDS. Keep the Promise." The HMMP project team also attended similar events at the University of Houston, Thomas Street Health Center and Ben Tub General Hospital.

Updates on HIV/AIDS Figures in Houston/Harris County!

A total of 24,558 AIDS cases from Houston and Harris County have been reported to HDHHS since the epidemic started in 1981. Cases of new HIV infection reported to HDHHS between 1999 and September 2007 total 14,585. Fifty-four percent of the new HIV infections are among blacks, 24 percent, white; 21 percent, Hispanics and 1 percent, others.



AIDS QUILT at University of Houston, World AIDS Day 2007 event.



Brian Goldberg and James Gomez, HMMP staff with one of the presenters at the U of H, World AIDS Day 2007 event.



"Take the Lead, Stop AIDS and Keep the Promise" HIV/AIDS Core Surveillance Team, HDHHS, during World AIDS Day 2007 commemoration.



National Women and Girls HIV/AIDS Awareness Day 2007 at Thomas Street Health Center, Houston, Texas.

HMMP'S PHOTO GALLERY



HMMP CAB members during a meeting in June 2007.



HMMP Consultant, Dr. Raouf Arafat during Q & A session at APHA 2007 after his presentation on survival comparison of US- and foreign-born HIV+ Latinos.



St Hope Foundation staff at the National African-American Testing Day, 2007.



HMMP staff, Lydwina Anderson at the St Hope Foundation National African-American Testing Day, 2007.



In support of the Cause: Dr. Debo, HMMP and Dan Snare, CAB Chairperson at AIDS WALK HOUSTON, 2007.



Brian Goldberg, HMMP staff and Jeff Meyer MD of HDHHS at the 2007 National HIV Conference in Atlanta, Georgia.



HMMP PI explains a point on his poster to a participant at the ISDS 2007 Conference in Indianapolis, IN. October, 2007.



James Gomez, Surveillance Investigator staffing HMMP booth during HIV Men Summit in Houston, Texas. November, 2007.



2007 National HIV Conference, Atlanta, Georgia



HMMP'S COMMUNITY SPOTLIGHT

Thomas Street Health Center*The nation's first freestanding HIV/AIDS treatment facility*

The Thomas Street Health Center opened in 1989 and was the nation's first freestanding HIV/AIDS treatment facility. The center treats approximately 60% of Harris County's HIV/AIDS clients, and provides services for more than 15,000 patients' visits annually. The clinic population consists of 51% African American, 26% Hispanic, and 23% Caucasian.

Some of the many medical services and programs provided at the Health center are:

- ◆ Primary HIV medical care,
- ◆ Metabolic clinic,
- ◆ Anal Dysphasia clinic,
- ◆ Neurology, Gynecology, Oncology, ENT clinic,
- ◆ Psychiatry, Obstetrics, Pain Management clinic,
- ◆ Radiology, Rheumatology,
- ◆ Well Woman,
- ◆ Adolescent Program and Hepatitis C.

Extended services offered at the Clinic are:

Chaplaincy services, mentoring program, child care, patient education, dietician consultants, blood transfusion, laboratory, patient advocacy, wellness program, physical therapy, pharmacy, social services, TB control services, chemotherapy, translation assistance, volunteer services



substance abuse counseling and drug reimbursement assistance.

The Thomas Street Health Center is located at 2015 Thomas Street near downtown Houston.

Hours of operations are:

Monday – Friday 7:30am – 4:30pm.

The clinic is closed on weekends and holidays.

For more information please, call the center at (713) 873-4000.

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POSTAGE

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ADDRESS LABEL

