

# CONFERENCE REPORT

BRUSSELS 1-2 JULY 2022

Royal Academies for Science  
and the Arts of Belgium

# CONTENTS

<b>EXECUTIVE SUMMARY</b>	<b>3</b>
<hr/>	
<b>PLENARY AND WORKSHOP SUMMARIES</b>	<b>4</b>
• Plenaries	4
• Workshops	8
<hr/>	
<b>SCIENTIFIC PROGRAMME</b>	<b>11</b>
<hr/>	
<b>YING ORGANISING COMMITTEE AND FACULTY</b>	<b>13</b>
<hr/>	
<b>THE GOBAL SPREAD OF ATTENDEES</b>	<b>14</b>
<hr/>	
<b>EVALUATION REPORT</b>	<b>17</b>
• Evaluation Methodology	17
• A Few Findings	17
• Attendee Testimonials	18
• Next Steps	19
• Results	20
<hr/>	
<b>KEY MESSAGES</b>	<b>32</b>
<hr/>	
<b>ACKNOWLEDGEMENTS</b>	<b>33</b>

# EXECUTIVE SUMMARY

The fourth EACS European Young Investigators (YING) conference took place on 1-2 July 2022 in Brussels, Belgium at the Royal Academies for Science and the Arts. This two-day event included presentations, plenary sessions and workshops, organised by a scientific committee composed of young experts. The YING educational project aims to foster deeper and more frequent exchanges among young HIV experts across Europe.

At four plenary sessions, spread over both days, experts presented latest research and thinking in four key areas:

- Knowledge gaps in SARS CoV-2 and HIV
- Tops and flops in the field
- Equality, diversity, and inclusion
- Vaccination and cure

Participants then had chance to join workshops for more interactive debate on:

- Examples of successful 90-90-90
- Translation of research into clinical practice
- Complex clinical cases
- Public and patient involvement

Speakers and audience members thought the event identified challenges and opportunities for research and clinicians, fostering collaboration around Europe and beyond. The most recent developments in the fields of HIV treatment and prevention and the ongoing search for a cure were all discussed. Some of the most interesting cases and successes were presented and examined, to see what can be learned and built on moving forward. Progress towards meeting agreed targets and work to continue improving trials were all offered as examples of best practice for HIV experts, while at the same time reminding participants that almost 38 million people worldwide are currently living with HIV, with 2.2 million of these in the WHO European Region alone.

Major world events since the previous YING conference in December 2020 were also discussed in the context of HIV treatments and research and for people living with HIV. The COVID-19 pandemic, which forced the previous 2020 conference to be held online, has had implications for the diagnosis and treatment of HIV, while understanding of links between the two viruses is still evolving. The Russian invasion of Ukraine in February 2022 has also added to the challenges of identifying and supporting people living with HIV, with key infrastructure in Ukraine damaged and many people displaced by the war.

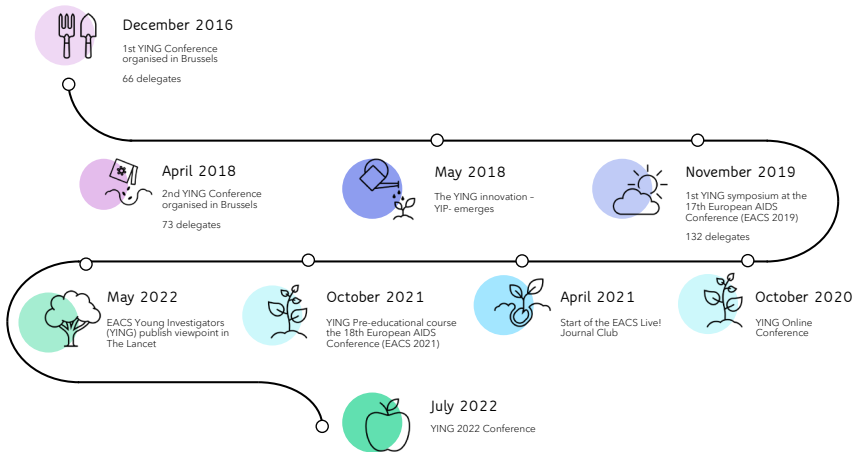
The YING 2022 conference has been accredited by the European Accreditation Council for Continuing Medical Education (EACCME®) for a maximum of 8 European CME credits (ECMEC®s).

# PLENARY AND WORKSHOP SUMMARIES

## PLENARIES

### Opening address

“Who are the YINGers at YING 2022?”, asked **Annemarie Wensing**, YING Organising Committee chair, opening the two-day conference. She explained that the event brought together about 59 participants aged under 35, from 23 countries, to “create a core group of highly motivated clinicians.” The audience then heard a brief overview of YING from Tristan Barber, YING Organising Committee vice-chair, who set out the roles of the YING Faculty and YING Organising Committee - including a welcome to new committee member, Oana Săndulescu.



EACS President **Sanjay Bhagani** then addressed the conference by video link. He remarked that this is “an exciting time to come together: to be able to exchange science and views, to think about research and the future.” He said EACS was “very, very proud” of all that YING has achieved, particularly through the last two difficult years. “You have all kept together and developed new thinking about HIV care,” he explained, notably in the context of the situation in Ukraine. Moving forward, “there are so many more new and exciting things coming up,” concluded the president.

## Knowledge gaps in SARS CoV-2 and HIV

The opening address was followed by twin presentations on the challenges of understanding links between SARS CoV-2, widely known as COVID-19, and HIV. The treatment of COVID-19 has clearly affected the provision of treatment and care for other conditions, including HIV. At the same time, people living with HIV are at a greater risk of infection and severe disease from viruses such as COVID-19, but links between the two have been difficult to assess. Laura Waters presented knowledge gaps and research needs, along with possible implications for future trials and research, when it comes to HIV and COVID-19. She said for instance early studies suggested that mortality rates for people living with HIV who were also infected with COVID-19 could be 1.5-3 fold higher than average. But she added that these studies in some cases suffered from selection bias, inadequate control and missing information. The effect social media has on spreading misinformation about risks and treatments, such as hydroxychloroquine, or natural and vaccine-induced immunity, was also set out as a complicating factor. Knowledge gaps and research challenges mentioned include socioeconomic circumstances, including racism and access to healthcare, and co-morbidities of patients.

Speaker

**Laura Waters**

## Equality, diversity, and inclusion in trials and why it matters

"It takes all sorts to make a world," said Regine Lehnert, opening the second speakers' session of the first day. This means that, for the comprehensive clinical development of HIV treatment drugs, many factors will be of relevance. The two main variables in the disease will always be the patient and the virus but, as a global epidemic, HIV/AIDS also faces regional specificities. Relevant patient characteristics range from age and weight to geography and behaviour. In phase one trials, she made the case for a focus on heterogeneity (diversity) across studies, with a move to homogeneity (equality) at phase two. For phase three and clinical drug development, within-study heterogeneity of populations is likely to increase. She reminded participants of the relevance of the Charter of Fundamental Rights in the EU when it comes to non-discrimination.

Speaker

**Regine Lehnert**

*(Disclaimer: Every effort has been made to ensure that the information contained in Regine Lehnert's presentation is accurate and true. The views and opinions expressed in her presentation are those of the presenter and do not necessarily reflect the official policy or position, e.g. of the Federal Institute for Drugs and Medical Devices or the European Medicines Agency (EMA).)*

## YING research ideas across Europe

The potential need for a unified European network of scientists was a focus for the next panel. Speakers set out lessons learned from existing European initiatives, including YING. To have a positive impact on the almost 3 million people living with HIV in Europe, the two speakers said this framework should include developing care for people among the displaced populations of Ukraine. An HIV emergency care framework, including guidelines or advice for testing, therapies, supplies and finance, could be promoted through European coordination. YING can also help groups deal with challenges and pitfalls, including funding opportunities, geopolitics, and access to the right skill set or scientific network.

### Speakers

**Agata Skrzat-Klapaczyńska**

**Casper Rokx**

## Tops and flops in HIV research

A second day of talks and presentations opened with a look at the most recent developments in the field of HIV treatment and prevention, including updates in guidelines and ways to incorporate newer treatment options in clinical practice. Oana Săndulescu began with a consideration of the difference between “good” research and a “good” article, with the first needed to answer a relevant medical question, be reproducible, and be applied in clinical practice, while a good article will clearly summarise main findings and study limitations and clarify generalisations. Examples of recent relevant articles, for instance on HIV and COVID-19 as “the juxtaposition of two pandemics”, and research, such as that into “Cabotegravir for HIV prevention in Cisgender Men and Transgender Women,” were then shared. The research in focus throughout looked to prevent, treat and/or cure HIV.

### Speaker

**Oana Săndulescu**

## HIV cure and targeted immunotherapies

Finding an HIV cure remains a high priority to bring an end to the HIV pandemic. Major challenges include the persistence of the viral reservoir, the virus genetic variability, immune dysfunction, and poor understanding of correlates of protection and post-ART rebound. This lecture looked at current knowledge of HIV and potential cures, including positive news that human models of HIV remission have revealed distinct mechanisms for long-term virus control. Federico Perdomo-Celis reminded the audience of the many reasons why we need an HIV cure. These include improving quality of life for people living with HIV, and that providing long-term antiretroviral therapy (ART) is “not sustainable nor scalable.” An understanding of the “deep latency” of the HIV reservoir is needed to see why we do not yet have a cure for the virus. HIV natural controllers and post-treatment controllers were also set out. The speaker concluded that HIV cure strategies should include early initiation of ART and the administration of combined interventions.

Speaker

**Federico Perdomo-Celis**

## Closing speech

The YING Scientific Programme was a wonderful opportunity for young Europeans to meet for the first time or to renew collaborations, said Annemarie Wensing, closing the two-day event. She reminded participants that, while they were sharing ideas in Brussels, “There is a war going on, Europeans are giving their lives for freedom and shared European values.” Her overview of the event’s presentations and workshops gave a summary of the information shared and priorities identified and asked attendees to stay connected in solidarity. Her parting message for all was “Be elegant, nuanced but don’t be afraid to make mistakes and dare to present yourself.”

Speaker

**Annemarie Wensing**

# WORKSHOPS

## Complex clinical cases

This workshop had four breakout sessions of its own. At each of these, group leaders presented interesting clinical cases on HIV, STI and PrEP (pre-exposure prophylaxis) for discussion. In each breakout group, participants considered various complex cases. Patient characteristics and medical history were explained in each case, along with symptoms and early results. Debate then turned around possible diagnoses, examinations and treatments, with audience members asked to give their opinions based on the information shared.

The first group looked at cases including differential diagnosis of a persistent cough, concluding that there is a “complex and long pathway for the differential diagnosis of pulmonary lesions in patients with HIV infection.” Group two considered cases including one of multiple CNS infections in a treatment-experienced young woman who grew up with HIV and was reminded that COVID-19 may have played a role in the unfavourable outcome. Group three discussed for instance HIV among transgender and non-binary people, and was asked how trans-friendly medical services, especially PrEP services, could be developed and improved. Finally, breakout group four looked at cases of bone disease, including a case of osteoporosis in an HIV/HBV co-infected patient on the antiretroviral therapy (ART) containing tenofovir disoproxil fumarate (TDF), in Ukraine.

### Workshop leaders

**Markus Bickel,**  
**Agnès Libois,**  
**Silvia Nozza**



## Examples of successful 90-90-90

A separate workshop looked at progress made towards reaching 90-90-90 targets in Europe and beyond. The session opened with a reminder that, in 2020, 2.2 million people in Europe were living with HIV, and 104,000 were diagnosed with HIV. In Western Europe, the 90% diagnosis target was met in 2020, but targets for ART and viral suppression were missed. Around the rest of Europe, all three targets were missed. Home testing or self-testing was suggested as a solution to boost diagnosis rates, along with information campaigns, including for sex workers and migrants. Poor management of ART sites and fear of side effects were among many barriers to reaching the 90% treatment target. Potential solutions include face-to-face meetings, and reminder calls for appointments. Major barriers to the viral suppression target include viral resistance and "therapeutic fatigue," or poor adherence to treatment programmes. Effective intervention needs to be developed to resolve these challenges. The workshop concluded 90-90-90 "can and must" be achieved, that 73% of all people living with HIV in Europe are virally suppressed, but that gaps in reaching the targets exist, in particular in Eastern Europe and Central Asia.

### Workshop leaders

**Maximilian C. Aichelburg,**  
**Adrian Curran,**  
**Oana Săndulescu,**  
**Marta Vasylev**

## Public & patient involvement

This workshop reviewed the importance of public and patient involvement (PPI) at all stages of research, as well as considering potential major barriers to effective PPI. The group was reminded that PPI means research done with or by patients, carers and the public - rather than research into or about patients, carers and the public. PPI can help improve study design and improve the understanding of patient needs, including real life problems. The workshop recommended using PPI at every stage of research, ideally from the very beginning, when costs are lowest and the highest impact is likely to be created. Barriers identified ranged from a lack of time or funding to unsupportive teams and cultural issues. Training, mentoring, and access to information about funding - alongside an increased use of virtual meetings - were among solutions suggested.

### Workshop leaders

**Tristan Barber,**  
**Magdalena Ankiersztein Bartczak,**  
**Ben Cromarty,**  
**David Haerry,**  
**Tetiana Kyrychenko**

## Translation of research into clinical practice

This workshop asked questions about why study outcomes and insights are often not quickly put into practice to the benefit of patients. Most participants had about 6 years' experience working with HIV, but this ranged from 1 to 18. Case studies discussed here included research into COVID-19 vaccination in people with HIV. This research had found for instance that HIV infection is associated with worse COVID-19 outcomes, with the vaccine resulting in a lower antibody response in HIV positive cases, and that systematic vaccination of people living with HIV should therefore have the highest priority, with the aim of prompt and high vaccination coverage. However, 14% of participants said people living with HIV had not been a priority vaccination group in their country, while 2 in 3 (66%) said these people had not yet received a fourth dose of a COVID-19 vaccine. The group aimed through discussion to promote a toolset to recognise hurdles and opportunities, in order better to translate research into clinical practice.

### Workshop leaders

**Christine Gilles,**

**Casper Rokx,**

**Agata Skrzat-Klapaczyńska**

# SCIENTIFIC PROGRAMME

## FRIDAY, 1 JULY (11:45 – 18:00)

**11:45 - 12:45**    **Welcome & Lunch**

**12:45 - 13:00**    **Address from the Organising Committee and EACS  
President Sanjay Bhagani**

**13:00 - 14:30**    **Plenary Session**

13:00 - 13:45    **Knowledge gaps in SARS CoV-2 and HIV**

CHAIR: ANNEMARIE WENSING, NETHERLANDS

SPEAKER: LAURA WATERS, UNITED KINGDOM (30 MIN + 15 MIN Q&A)

13:45 - 14:30    **Equality, diversity, and inclusion in trials and why it matters**

CHAIR: TRISTAN BARBER, UNITED KINGDOM

SPEAKER: REGINE LEHNERT, GERMANY (30 MIN + 15 MIN Q&A)

**14:30 - 15:00**    **Coffee Break**

**15:00 - 16:10**    **Breakout Session 1** Four workshops running at the same time  
**Examples of successful 90-90-90**

MODERATORS: MAXIMILIAN C. AICHELBERG, AUSTRIA & ADRIAN CURRAN,  
SPAIN & OANA SÂNDULESCU, ROMANIA & MARTA VASYLYEV, UKRAINE

**Translation of research into clinical practice**

MODERATORS: CHRISTINE GILLES, BELGIUM & CASPER ROKX, NETHERLANDS  
& AGATA SKRZAT-KŁAPACZYŃSKA, POLAND

**Complex clinical cases**

MODERATORS: MARKUS BICKEL, GERMANY & AGNÈS LIBOIS, BELGIUM  
& SILVIA NOZZA, ITALY

**Public and patient involvement**

MODERATORS: TRISTAN BARBER, UNITED KINGDOM & MAGDALENA  
ANKIERSZTEJN-BARTCZAK, POLAND & BEN CROMARTY, UNITED KINGDOM  
& DAVID HAERRY, SWITZERLAND & TETIANA KYRYCHENKO, UKRAINE

**16:10 - 16:15**    **Rotation**

**16:15 - 17:25**    **Breakout Session 2** Four workshops running at the same time

**17:25 - 17:30**    **Rotation**

**17:30 - 18:00**    **Plenary session**

**YING research ideas across Europe**

SPEAKERS: CASPER ROKX, NETHERLANDS & AGATA SKRZAT-KŁAPACZYŃSKA,  
POLAND (20 MIN + 10 MIN Q&A)

**19:00 - 22:00**    **Dinner**

HOUSE OF THE CAPITAL REGION, 2-4 RUE ROYALE, 1000 BRUSSELS

## SATURDAY, 2 JULY (8:30 – 13:30)

### 8:30 - 10:00 **Plenary Session**

#### 8:30 - 9:15 **Tops and flops**

CHAIRS: JOSÉ BERNARDINO, SPAIN & JASMINI ALAGARATNAM, UNITED KINGDOM

SPEAKER: OANA SÂNDULESCU, ROMANIA (30 MIN + 15 MIN Q&A)

#### 9:15 - 10:00 **Vaccination and cure**

CHAIR: JOSÉ BERNARDINO, SPAIN

SPEAKER: FEDERICO PERDOMO-CELIS, FRANCE (30 MIN + 15 MIN Q&A)

### 10:00 - 10:30 **Coffee Break**

### 10:30 - 11:40 **Breakout Session 3 Four workshops running at the same time** **Examples of successful 90-90-90**

MODERATORS: MAXIMILIAN C. AICHELBERG, AUSTRIA & ADRIAN CURRAN, SPAIN & OANA SÂNDULESCU, ROMANIA & MARTA VASYLYEV, UKRAINE

#### **Translation of research into clinical practice**

MODERATORS: CHRISTINE GILLES, BELGIUM & CASPER ROKX, NETHERLANDS & AGATA SKRZAT-KŁAPACZYŃSKA, POLAND

#### **Complex clinical cases**

MODERATORS: MARKUS BICKEL, GERMANY & AGNÈS LIBOIS, BELGIUM & SILVIA NOZZA, ITALY

#### **Public and patient involvement**

MODERATORS: MAGDALENA ANKIERSTZEJN-BARTCZAK, POLAND & BEN CROMARTY, UNITED KINGDOM & DAVID HAERRY, SWITZERLAND & TETIANA KYRYCHENKO, UKRAINE

### 11:40 - 11:45 **Rotation**

### 11:45 - 12:55 **Breakout Session 4 Four workshops running at the same time**

### 12:55 - 13:00 **Rotation**

### 13:00 - 13:20 **Plenary Session**

#### **Workshops reporting**

SPEAKER: ANNEMARIE WENSING, NETHERLANDS

### 13:20 - 13:30 **Closing Remarks**

SPEAKER: ANNEMARIE WENSING, NETHERLANDS

# YING ORGANISING COMMITTEE AND FACULTY 2022

## EACS PRESIDENT

### **Sanjay Bhagani**

Royal Free Hospital,  
London, United Kingdom

## ORGANISING COMMITTEE

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Utrecht, Netherlands

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### **Magdalena Ankiersztejn-Bartczak**

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### **Ben Cromarty**

Ukcab, Mrc Ctu Ppi Group,  
United Kingdom

### **David Haerry**

Swiss Academic Foundation On Education/  
European Aids Treatment Group (EATG),  
Bern, Switzerland

### **Tetiana Kyrychenko**

Poltava Regional Hiv/Aids Prevention And  
Control Center,  
Poltava, Ukraine

### **Regine Lehnert**

Federal Institute For Drugs And Medical  
Devices,  
Bonn, Germany

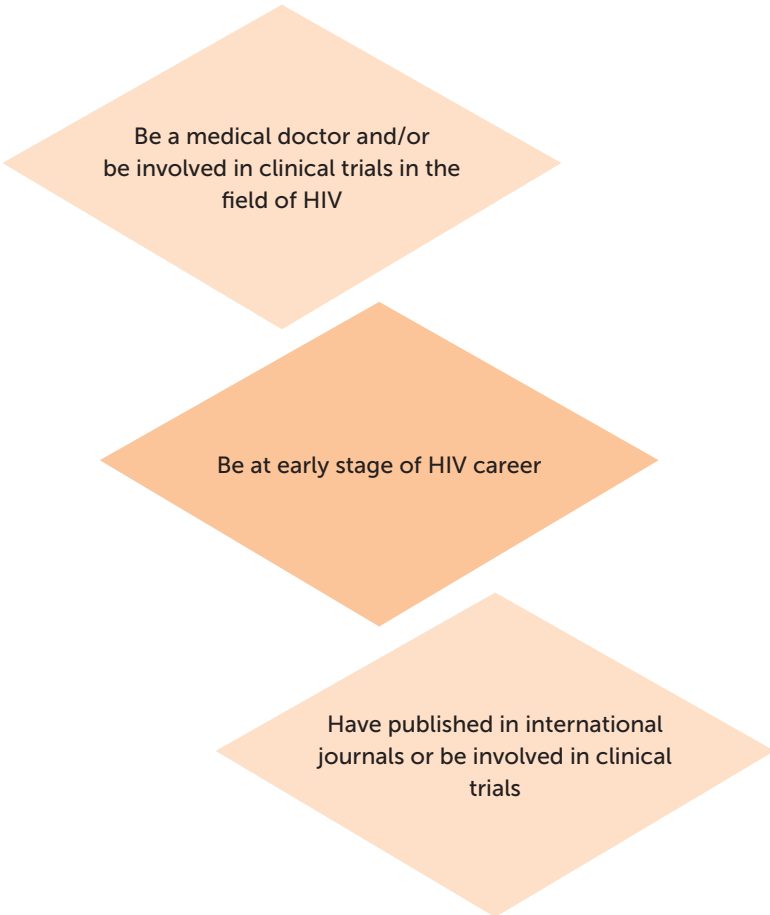
### **Federico Perdomo-Celis**

Institut Pasteur,  
Paris, France

# THE GLOBAL SPREAD OF ATTENDEES

## YING 2022 Attendees

This two-day conference targeted young experts specialised in the field of HIV/AIDS. The participants had to fulfil the following criteria to be invited to the conference:



Be a medical doctor and/or  
be involved in clinical trials in the  
field of HIV

Be at early stage of HIV career

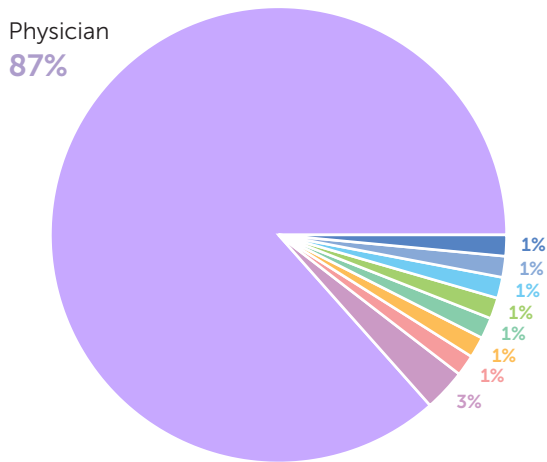
Have published in international  
journals or be involved in clinical  
trials

The 57 attendees came from 22 countries and represented the four EACS European regions (East, North, South, West).



Austria	1	Malta	1
Belgium	1	Moldova	1
Bulgaria	1	Netherlands	4
Denmark	1	Poland	4
France	2	Portugal	3
Germany	2	Romania	5
Greece	2	Spain	5
Hungary	1	Switzerland	1
Ireland	4	Turkey	3
Italy	5	Ukraine	4
Lithuania	2	United Kingdom	4

Among them, **87%** of participants-respondents described themselves as Physicians whilst 3% described themselves as "Other".



- Physician
- Epidemiologist
- NGO
- Postdoctoral researcher (Epidemiologist-Biostatistician)
- Consulting physician at the university hospital, teaching assistant
- Researcher
- Academic researcher
- Medical doctor, PhD Candidate
- MD, PhD, Teacher assistant



## Evaluation Methodology

At the end of the conference, participants were invited to complete an evaluation survey containing 26 questions. The evaluation had 67 respondents. Almost all HIV departments where the respondents work treat at least 30 HIV patients per month. Only four departments treated no HIV patients at all, while seven treated 200, rising to 500 for three of the departments here considered. 87% of participant-respondents described themselves as physicians.

## A Few Findings

Perhaps best of all, every one of the 67 participants found the event useful. More than two thirds (67%) said it was very useful, with 31% ranking it useful and just 1% choosing the lowest ranking of only fairly useful.

Overall, participants found the event was useful and important, as well as saying it appealed to different levels of clinicians.

All participants agreed that **Content** was presented clearly, with 64% even saying they strongly agreed that it was.

No respondent said the **Programme** or the **Organisation** of the event was poor or very poor. The programme itself was ranked excellent by 63% of participants and good by 33%, with 4% choosing fairly good. Organisation was ranked excellent by an overwhelming 84% and good by 16%.

More than three quarters (78%) of respondents said the event very much fulfilled their **Educational Goals** and expected learning outcomes. A further 21% said it somewhat fulfilled these goals, although for 1% the response was not much.

Turning to whether the presented information was well balanced and consistently supported by a valid scientific evidence base, 93% said very much while 7% said somewhat.

Asked how they would evaluate the quality of the **Formative Method** used? 70% said excellent while 30% went for good.

More than 9 out of 10 (91%) agreed that all the faculty members provided their potential conflict of interest declaration with the sponsor as a second slide of their presentation. 4% of respondents disagreed and 1% were undecided.

Similarly, **94%** agreed that the information was overall free of commercial and other bias: free of commercial influence, while the remaining 6% said yes, for the majority. **69%** strongly agreed that the educational activity was well planned and presented, with the remaining 31% agreeing. Even more encouragingly, **93%** evaluated the work of the EACS Secretariat in charge of participation in the conference as excellent, with the rest saying it was good. The registration process was also said to be excellent (94%) or good (6%). Information on travel and accommodation was excellent (84%) or good (16%)

The first **plenary session**, on *Knowledge gaps in SARS CoV-2 and HIV*, and the fifth, on *Vaccination and cure*, were the most highly ranked among participants, with 69% in each case classing these extremely useful. Overall, however, more than half of participants classed every plenary as useful or extremely useful. The second plenary, on *Equality, diversity, and inclusion in trials and why it matters*, gathered the most negative comments, with 6% of participants saying it was not useful. For the plenary on knowledge gaps and the third on *YING research ideas across Europe*, 1% and 3% respectively opted for not useful.

Turning to the **workshops**, 1% (just one respondent) said the workshop on complex clinical cases was not useful. Another 12% said they were undecided on the usefulness of this session or did not attend. All other workshops were considered at least fairly useful by almost all participants, with between 7 and 10% undecided. The workshop on *Public and Patient Involvement* gathered the most positive score, with **63%** saying it was extremely useful and an additional 25% saying useful.

## Attendee Testimonials

Participants were also asked to say what they liked best about the conference, and what was most useful for their professional activity. Networking was a popular response, but others included: good speakers, interesting presentations, the interesting lecture on the future of HIV, the overall organisation and the chance for exchanges. Specific comments on highlights were:

*"The discussions between faculty and the participants, because I've learned how others react, treat, evaluate the patients in their country,"*

*"The opportunity to learn about relevant and current hot topics in HIV from world experts, and the opportunity to meet with and chat with many young clinicians and scientists at similar career stages,"*

*"The scientific presentations in the first half of the days, especially about inclusion in clinical trials: among all the presentations, this was the one that is unique, as we usually do not hear in a such detailed way about this topic in clinical conferences."*

One innovative element singled out for praise was

*"The workshops PPI, translation of research and 90-90-90 were an excellent opportunity to discuss and show how different European countries are, and the need for good implementation research."*

Asked for suggestions to improve future conferences and what they liked least about the 2022 event, participants said:

*"It was too short, I think a longer period with a few more workshops and presentations would be more useful,"*

*"We should leave enough time for open discussion in the workshops,"*

*"Instead of the early start on the first day, ideally, I would have preferred to have arrived the night before and started the first day at 9am."*

One comment suggested that the session on equality, diversity and inclusivity could in future be improved by making it more relevant and accessible.

Many participants felt there could have been more time for discussions, questions and answers and learner engagement, with 7% of participants saying this aspect was poor and less than half (48%) classing it excellent.

## Next steps

Some 57% of participants said the information learnt would be very much implemented in their practice and an additional 39% said it would be somewhat. Just 4% said the information would be not much or not at all implemented in their practice.

They were then asked to give examples of how the event would influence their practice. Answers ranged from the general ***"I will share my knowledge with others in my country"*** and ***"I was able to meet people from other countries which will help in next studies,"*** to the specific ***"As a way to overcome barriers for the first 90, we are planning an informative general clinical session in the hospital about HIV and clinical Indicators"*** and ***"To try to offer integrated care for HIV patients - to try to include patients into studies, to take into consideration their opinion about medication,"*** or ***"Rethinking the way to include patients and their affected family member in clinical studies, especially about couples and their exposed uninfected child."***

Almost half (**48%**) agreed and an additional 22% strongly agreed that they even intended to **“modify/change my clinical practice based on this educational activity.”** Just 1% disagreed.

Encouragingly, more than half (**52%**) agreed and 12% strongly agreed their office and practice systems could accommodate these changes. Only 6% disagreed. At the same time, 51% agreed and 15% strongly agreed that their patients could also accommodate these changes. Just 3% disagreed, while the remainder neither agreed nor disagreed.

However, patient access to the treatments provided could be a barrier to implementing these changes. **30%** agreed and 10% strongly agreed that it would, while 19% disagreed and 10% even strongly disagreed.

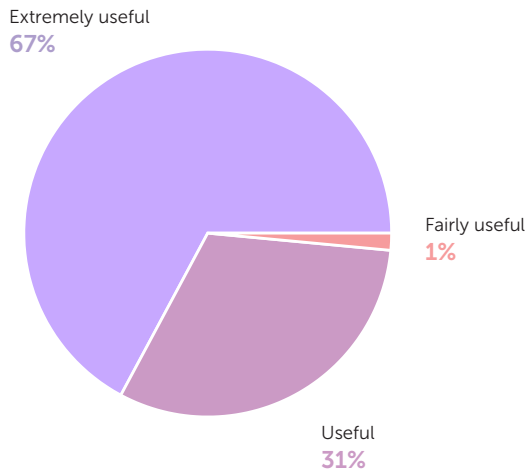
Perhaps unsurprisingly, **97%** then said they **would recommend the next EACS YING conference to colleagues**, with even the remaining 3% opting for probably.

Other topics that could be of interest for the next conference, as suggested by participants, included: HIV vaccine, co-morbidities, STIs, HIV cure, and women living with HIV.

## Results

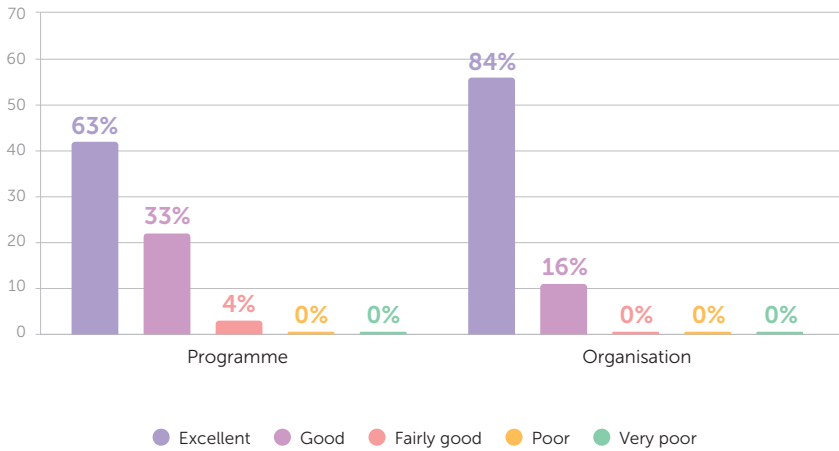
### 1/ How useful for your professional activity did you find this event?

67 responses



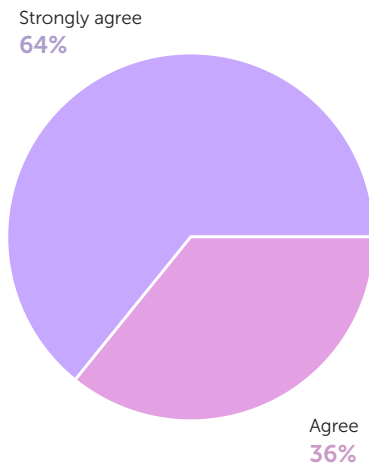
## 2/ What was your overall impression of this event?

67 responses



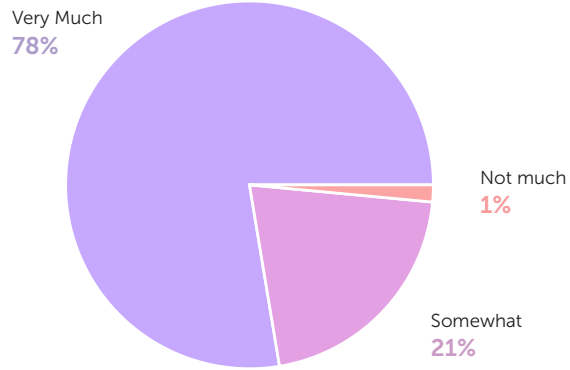
## 3/ Was content presented clearly?

67 responses



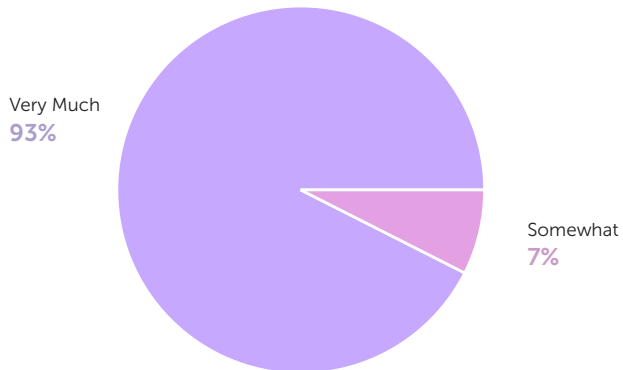
**6/ Did the event full your educational goals and expected learning outcomes?**

67 responses



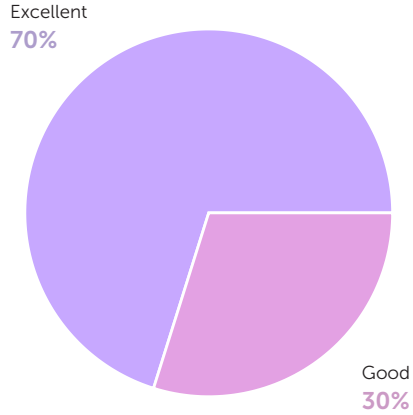
**7/ Was the presented information well balanced and consistently supported by a valid scientific evidence base?**

67 responses



## 8/ How do you evaluate the quality of the formative method used?

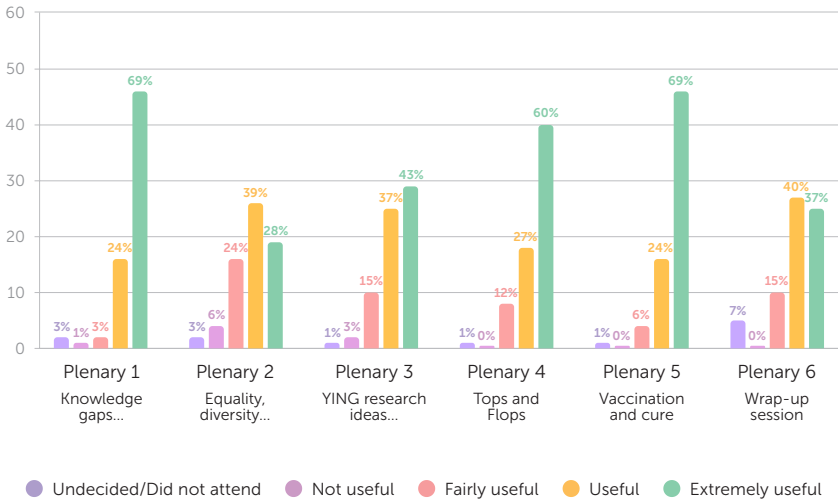
67 responses



## 9/ How useful was each session?

67 responses

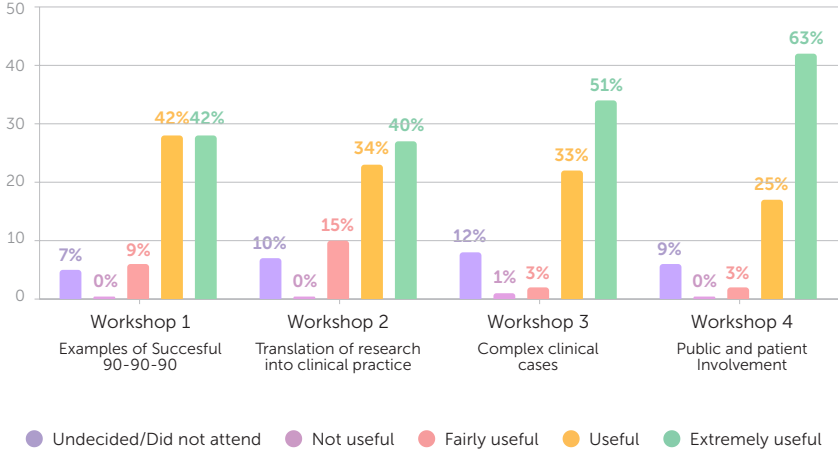
### PLENARY SESSIONS



### 9/ How useful was each session?

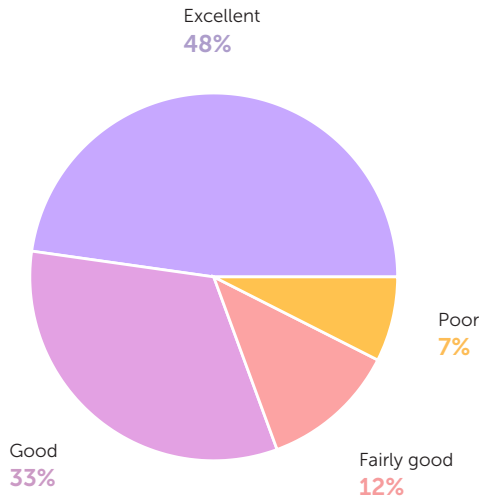
67 responses

#### WORKSHOPS



### 10/ Was there adequate time available for discussions, questions & answers and learner engagement?

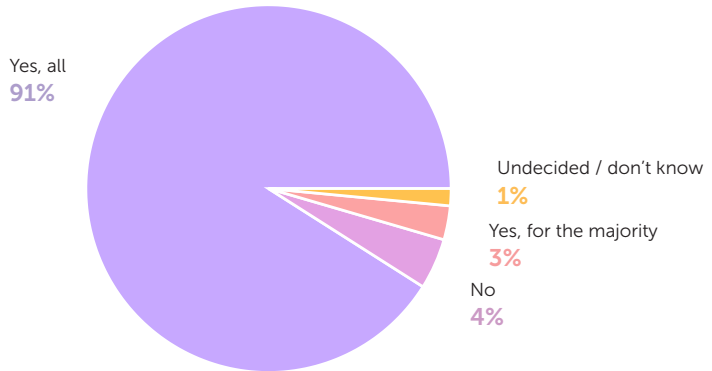
67 responses





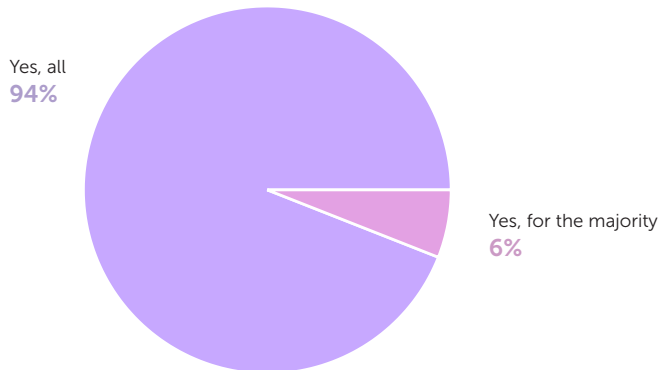
**11/ Did all the faculty members provide their potential conflict of interest declaration with the sponsor(s) as a second slide of their presentation?**

67 responses



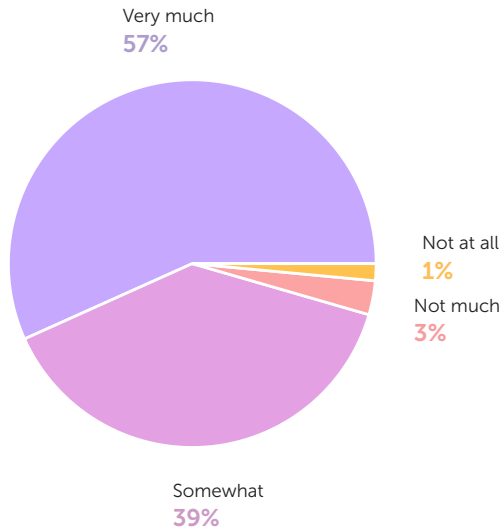
**12/ Do you agree that the information was overall free of commercial and other bias (free of commercial influence)?**

67 responses



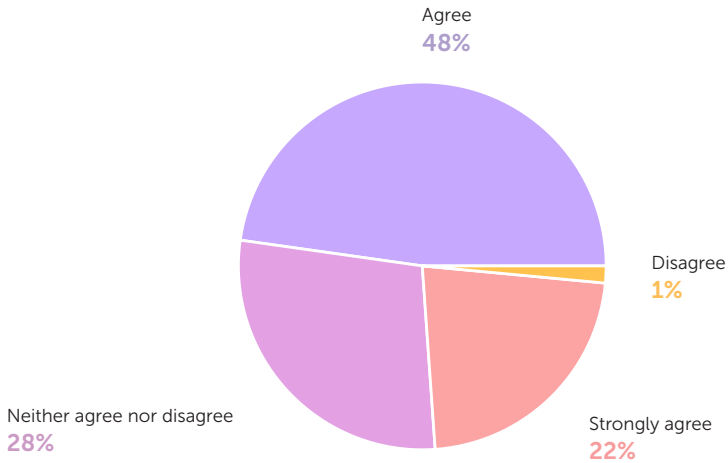
**13/ Will the information you learnt be implemented in your practice?**

67 responses



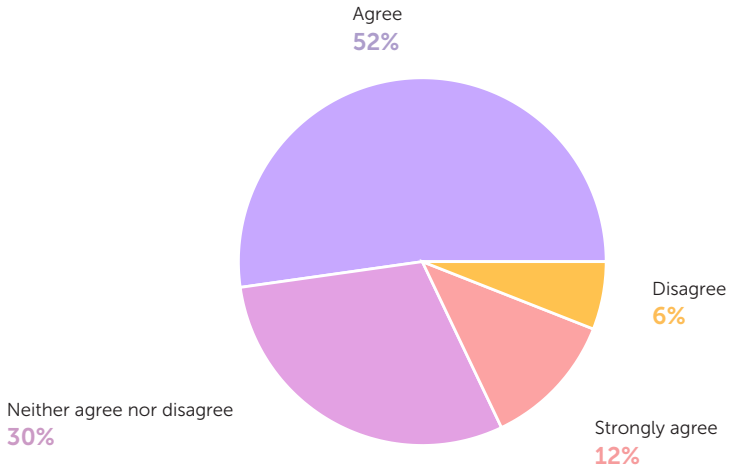
**14/ Do you intend to modify/change my clinical practice based on this educational activity?**

67 responses



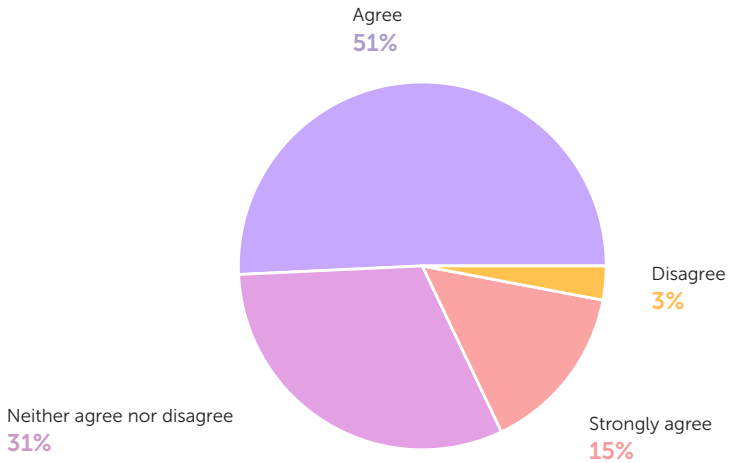
**15/ Can your office and practice systems accommodate these changes?**

67 responses



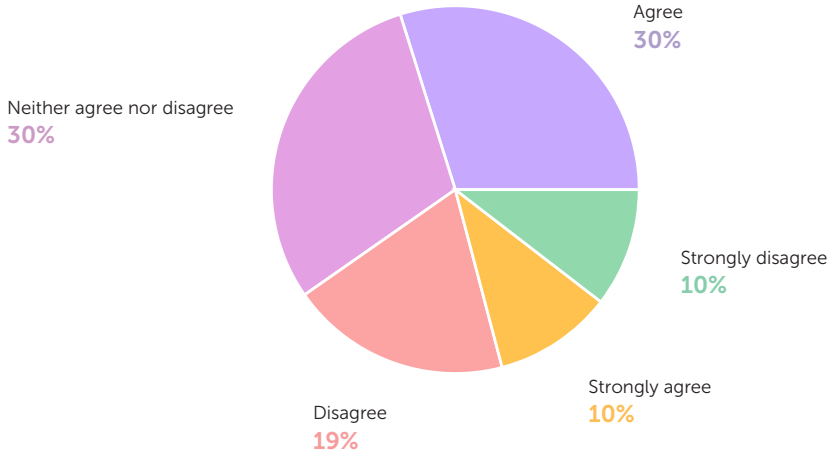
**16/ Can your patients accommodate these changes?**

67 responses



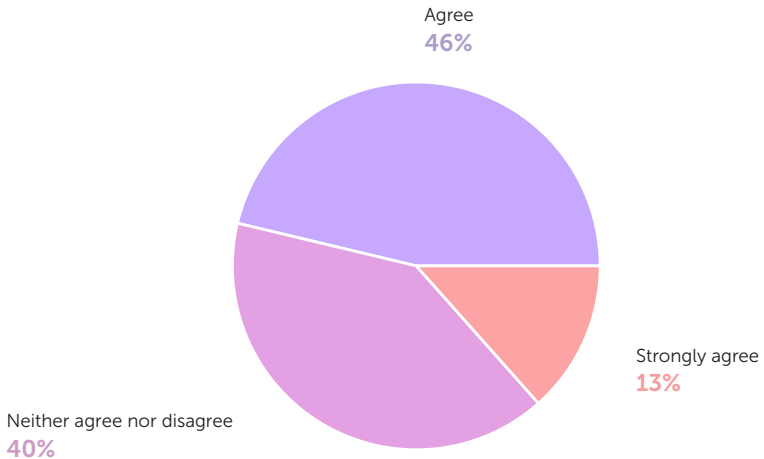
**17/ Will patient access to the treatments provided be a barrier to implementing these changes?**

67 responses



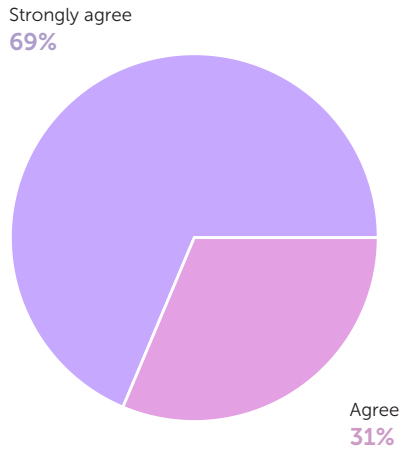
**18/ On average, how did you utilise the patient treatment strategies described in this educational activity prior to your participation?**

67 responses



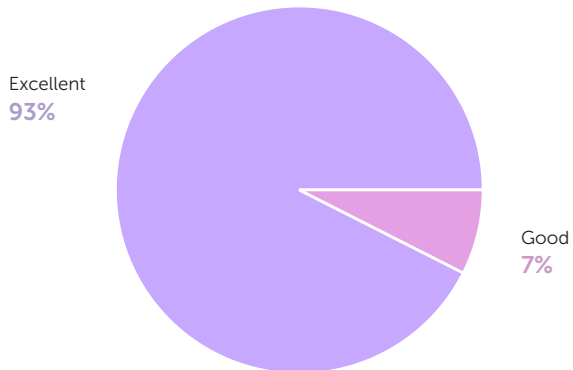
**20/ Was the educational activity well planned and presented?**

67 responses



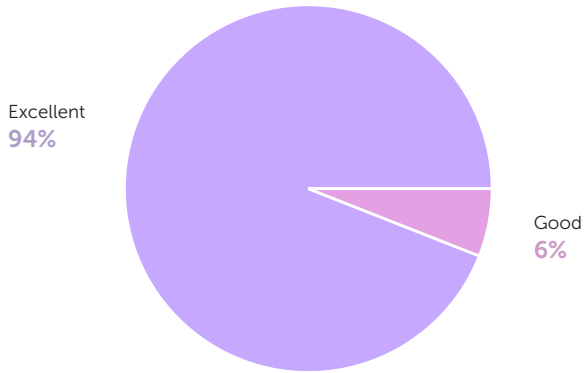
**21/ How do you evaluate the work of the EACS Secretariat in charge of your participation in the conference?**

67 responses



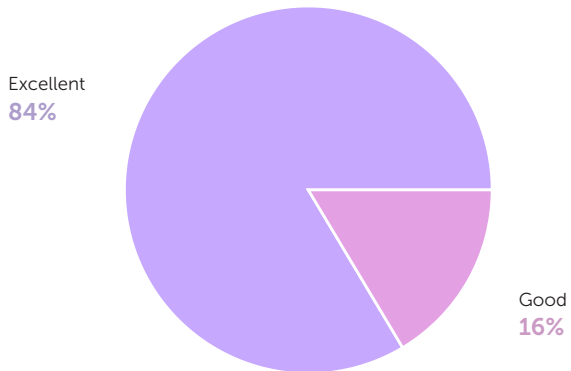
**22/ How was the registration process for you?**

67 responses



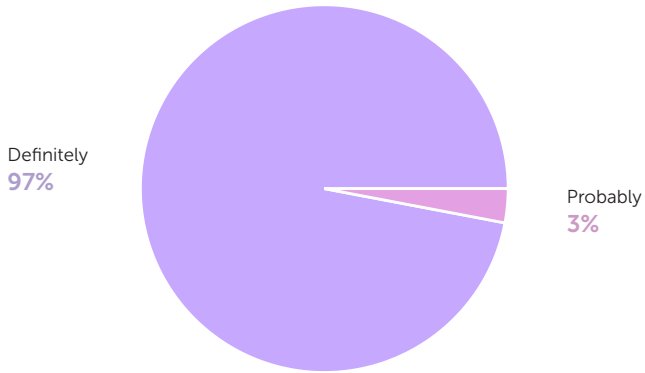
**23/ How do you evaluate information provided about your travel and accommodation?**

67 responses



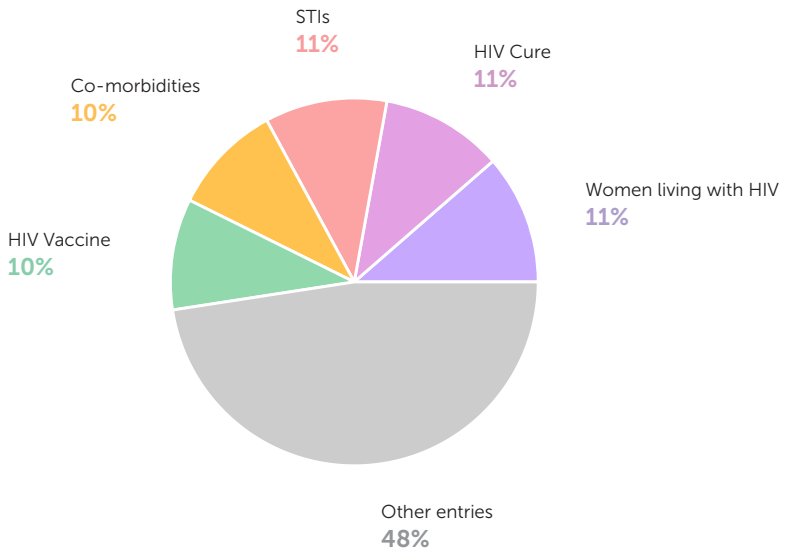
**24/ Would you recommend the EACS YING conference to your colleagues?**

67 responses



**25/ Which topics would you be interested in for the next YING conference?**

67 responses



# KEY MESSAGES

## 1. Unpredictability

The need to be ready for new challenges is clearer than ever. The sudden emergence of a new virus, COVID-19, and its implications for people living with HIV, has been described as “the juxtaposition of two pandemics.” At the same time, the outbreak of violence in Ukraine has raised multiple problems for identifying and treating patients in or fleeing a war zone.

## 2. Inclusivity

Open discussion is vital. This means fostering dialogue and exchange between clinicians. It also means focusing on good communication with patients, families, faculties and the broader pool of experts.

## 3. Diversity

There is a need for an open, balanced and inclusive approach to HIV research and support. In studies, heterogeneity (diversity) has to be balanced with homogeneity (equality) throughout. The examination of equality, diversity and inclusivity in trials must be as relevant and accessible as possible, to the benefit of all.

## 4. Accessibility

Support and treatment for people living with HIV must be accessible for all, but outcomes from good studies are often not quickly put into practice to the benefit of patients. Most participants at the 2022 conference said they would modify their clinical practice based on insights learned, but almost half believed patient access to treatments would be a barrier to implementing changes.

## 5. Innovation

There has been much positive news led by innovation in the search for mechanisms for long-term virus control. Work around for instance complex clinical cases shows that the HIV care, research and education community remains very innovative. Interest in finding a vaccine and/or cure for HIV is high but there is here still much to understand and overcome.

## 6. Europe

There is a potential need for a unified European network of scientists. This would foster freedom and shared European values across the HIV community towards reaching 90-90-90. Only in Western Europe has the 90% diagnosis target been met as of 2020. Across all European countries the 90% ART and viral suppression targets were missed.



# ACKNOWLEDGEMENTS

On behalf of the YING Organising Committee, we would like to thank the expert speakers who were involved. It would not have been possible to create such a successful programme without them. We are truly grateful for their investment and look forward to working with them all again in the future. Their names and countries are all below:

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Jenny Bischoff, Germany  
Ana Micaela Caixeiro, Portugal  
Adriana Cervo, Italy  
Ben Cromarty, United Kingdom  
Adrian Curran, Spain  
Jesper Damsgaard Gunst, Denmark  
Christine Gilles, Belgium  
David Haerry, Switzerland  
Adrienn Hanuska, Hungary  
Irina Ianache, Romania  
Burcu Isik Goren, Turkey  
Dagny Krankowska, Poland  
Tetiana Kyrychenko, Ukraine  
Regine Lehnert, Germany  
Laura Levi, France  
Agnès Libois, Belgium  
Tetiana Melnyk, Ukraine  
Silvia Nozza, Italy  
Federico Perdomo-Celis, France  
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Oana Săndulescu, Romania  
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Annemarie Wensing, Netherlands

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The European AIDS Clinical Society wishes to express their thanks to their host the Royal Academies for Science and the Arts of Belgium



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DES SCIENCES, DES LETTRES ET DES BEAUX-ARTS  
DE BELGIQUE

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