EUROPEAN COMMISSION – DG SANCO

PROGRAMME OF COMMUNITY ACTION ON THE PREVENTION OF AIDS AND CERTAIN OTHER COMMUNICABLE DISEASES

EuroHIV: HIV/AIDS surveillance in Europe

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Interim activity report

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Key words: HIV, AIDS, surveillance, public health, Europe
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  - HIV/AIDS Surveillance in Europe end-year report 2005; N°73 (cover page)
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- VIII. Progress reports of workpackage 7 “Estimation of HIV incidence using serological assays”
Executive Summary

Introduction: HIV remains a major public health concern in Europe. The surveillance of HIV and AIDS is a major tool for the control of infection and the development of prevention and treatment and care services. EuroHIV is the European network for the surveillance of HIV/AIDS, first established in 1984 and is one of the disease-specific surveillance programmes, established by the Decision 2119/98/EC of the European Parliament and of the Council, for the epidemiological surveillance and control of communicable diseases in the European Community. Geographically, EuroHIV covers 53 countries of the WHO European Region and is an official WHO and UNAIDS collaborating centre.

Aims and objectives: The aim of EuroHIV is to understand, improve and share surveillance data on HIV infection and AIDS in Europe in order to better inform disease prevention, control and care. The specific objectives include:

- To maintain and further develop the EuroHIV network;
- To collect, analyse and report standardised surveillance data on HIV/AIDS;
- To assess trends, evaluate disease burden and characterise affected populations;
- To estimate HIV incidence in high-risk groups using recently developed serological assays and promote the use of these assays in Europe;
- To strengthen collaboration with third countries and WHO;
- To collaborate closely with the new European Centre for Disease Prevention and Control (ECDC), with the aim of integrating EuroHIV activities within the new centre;
- To disseminate information via the EuroHIV website;
- To play a lead role in developing and guiding HIV/AIDS surveillance at European level.

Methodology: The following data are collected annually from the national correspondents in the 53 countries of the WHO European Region: individual and anonymous AIDS cases reported on the basis of the 1993 European AIDS surveillance case definition; HIV cases reported as either aggregated or individual and anonymous data according to a common case definition of HIV infection; number of HIV tests undertaken (excluding screening of blood donation and unlinked anonymous testing); HIV prevalence data (including methods used and prevalence levels) in a number of specific populations (e.g. pregnant women, blood donors, injecting drug users etc) are compiled in the European HIV Prevalence Database.

Results: data collected, validated, analysed for HIV and AIDS case reports until the end of December 2005. Data compiled on HIV prevalence studies among specific populations of commercial sex workers (CSW), patients attending sexually transmitted infections (STI) and patients diagnosed with tuberculosis. Data disseminated with distribution of the European Non Aggregate AIDS Data Set (ENAADS) and HIV/AIDS Surveillance in Europe reports number 72 (Mid-year 2005 including HIV prevalence data on blood donations, pregnant women and men who have sex with men) and 73 (HIV and AIDS case reports declared by the end of 2005).

Deliverables made available in 2006:
D1.1: Reports of steering group meetings
D1.2: Report of the first European HIV/AIDS surveillance meetings
D2.1: Release of the European Non-Aggregate AIDS dataset for 2006
D2.2: HIV/AIDS surveillance: HIV AIDS cases - annual report for 2006
D5.1: Documentation of European HIV/AIDS surveillance methods and procedures
D6.1: Inclusion of data from third countries of the WHO European region in appropriate deliverables
D8.1: Half-yearly update of EuroHIV website
D8.3: Peer-reviewed scientific articles (2 per year) and conference presentations.
INTRODUCTION

HIV remains a major public health concern in Europe. In Western Europe, the dynamics of the epidemic have changed with an increasing proportion of persons infected through heterosexual contact and a shift towards more socially vulnerable, disadvantaged communities including ethnic minorities and migrants from countries with generalised HIV epidemics. Eastern Europe and Central Asia has been described by UNAIDS as the region of the world with the fastest growing epidemic. During the past 5 years, many countries of the former Soviet Union have been severely affected by HIV epidemics that continue to spread as a result of injecting drug use.

EuroHIV is the European network for the surveillance of HIV/AIDS and has been part-funded by DG SANCO since 1996. EuroHIV was first established in 1984 as the World Health Organisation (WHO) Collaborating Centre for AIDS, at the request of WHO and the French Ministry of Health, to coordinate the surveillance of AIDS at European level. The centre became known as the European Centre for the Epidemiological Monitoring of HIV/AIDS. Since 1999, it is one of the disease-specific surveillance programmes, established by the Decision 2119/98/EC of the European Parliament and of the Council, for the epidemiological surveillance and control of communicable diseases in the European Community. In November 1999, the European Centre was incorporated into the Institut de Veille Sanitaire (InVS).

Geographically, EuroHIV covers 53 countries of the WHO European Region and is an official WHO and UNAIDS collaborating centre.

EUROHIV AIMS AND OBJECTIVES

The aim of EuroHIV is to understand, improve and share surveillance data on HIV infection and AIDS in Europe in order to better inform disease prevention, control and care. The specific objectives of EuroHIV include:

- To maintain and further develop the EuroHIV network with all EU member states, acceding countries, candidate countries, EFTA-EEA countries and third countries of the WHO European Region;
- To collect, analyse and report standardised surveillance data on HIV/AIDS;
- To assess trends, evaluate disease burden and characterise affected populations;
- To estimate HIV incidence in high-risk groups using recently developed serological assays and promote the use of these assays in Europe;
- To strengthen collaboration with third countries (e.g. former USSR and Yugoslavia) and WHO;
- To collaborate closely with the new European Centre for Disease Prevention and Control (ECDC), with the aim of integrating EuroHIV activities within the new centre;
- To use the EuroHIV website to disseminate information to European policymakers, health professionals and the general public;
- To play a lead role in developing and guiding HIV/AIDS surveillance at European level.

METHODOLOGY

Areas of work

- Coordinating the development of surveillance strategies including surveillance tools and case definitions at European level;
- Developing and managing the European HIV/AIDS databases;
- Describing national surveillance systems;
- Analysing data and disseminating its results;
• Providing expertise to national and international organisations;
• Providing technical assistance to countries.

General principles
• Geographically, EuroHIV covers the entire WHO European Region which, since June 2006 comprises 53 countries, with the partition of Serbia and Montenegro (see list in Annex I).
• EuroHIV is guided by a Steering Group to assess the progress and results of current activities and to propose the development of new activities (subject to agreement of national correspondents).
• EU countries participate in EuroHIV according to Decision 2119/98/EC of the European Parliament and of the Council; the participation of other countries of the WHO European Region is voluntary. One correspondent per country is designated in the institution that is officially recognised by the national health authorities for the surveillance of HIV/AIDS.
• European surveillance strategies and methods (e.g. case definitions, type and format of collected data) are decided by consensus among the national representatives of participating countries.
• Data collected within EuroHIV are anonymous and standardised, based on common case definitions and common core variables that have been defined according to their availability in each country.
• EuroHIV collaborates closely with international organisations (ECDC, WHO, UNAIDS, EMCDDA) and other European surveillance networks (EuroTB, ESSTI) regarding surveillance development, and data collection and exchange. In particular, collaboration with ECDC is with the ultimate objective of assuring a smooth integration of EuroHIV activities within the work of the ECDC.
• Results are widely disseminated.

AIDS case reporting
Organisation and flow of information
Annually, national surveillance coordinators from the participating countries provide individual anonymous data on all AIDS cases reported since the beginning of the epidemic. These national data are then merged into the European Non Aggregate AIDS Data Set (ENAADS). A public version of ENAADS, prepared annually, is sent to the national correspondents and international organisations, and made available upon request to other public health professionals.

Case definition
Data are reported on the basis of the 1993 European AIDS surveillance case definition, which has been adopted by the European Commission in Decision 2002/253/EC laying down case definitions for reporting of communicable diseases to the Community network. These same case definitions, with minor modifications (change of age limit of paediatric AIDS cases from <13 to <15), will be adopted in the new definitions to be adopted by the ECDC.

Collected variables
The list and format of collected variables are described in the ENAADS data file specification (Annex II).

Under-reporting and delays in reporting
Data are routinely presented with adjustments for reporting delays, using a methodology developed by EuroHIV, to take into account delays between AIDS diagnosis and reporting in order to assess AIDS incidence trends.
HIV case reporting

Organisation and flow of information

Reporting of diagnosed HIV infections began at different times in different European countries and is now implemented in most countries. The European HIV reporting system was set up in 1999.

Anonymous, individual, and updated data on all cases ever reported nationally are reported to EuroHIV annually, according to a standard data file specification, by the national surveillance coordinators of the countries able to provide individual data. After validation, these data are merged into the European HIV Infection Data Set (EHIDS). From other countries, aggregate data are reported annually, with no updating of previously reported data.

Case definition

A case of HIV infection is defined as an individual 18 months or older with HIV infection confirmed by laboratory according to country definitions and requirements, diagnosed at any clinical stage, including AIDS, and not previously reported in that country. Adult/adolescent cases are defined as those aged 13 years and over, and paediatric cases as those less than 13 years. For cases aged less than 18 months at diagnosis, at least one direct detection HIV test (non-antibody based) is required for reporting. This case definition has also been adopted in Decision 2002/253/EC, and with minor modifications, will be adopted in the new ECDC case definitions.

Reported HIV cases represent mostly new diagnoses; only a minority of reported cases has been diagnosed (but not reported) previously, and when this is the case, the previous diagnosis was frequently made anonymously or in another country.

Collected variables

The list and format of collected variables are described in the EHIDS data file specification (Annex II).

HIV testing activities

Reporting of HIV diagnosis is highly dependent on HIV testing patterns and may not reflect HIV incidence because HIV-infected persons may not be tested for HIV until late in the course of their infection. To help in interpreting HIV reporting data, annual numbers of HIV tests performed for diagnostic purposes are collected and presented once a year.

HIV prevalence in specific populations

HIV prevalence data (including methods used and prevalence levels) in a number of specific populations (e.g. pregnant women, blood donors, injecting drug users etc) are compiled in the European HIV Prevalence Database. Studies are included according to the criteria of study representativeness, adequate sample size and time period.

An internet application for exchange and request for data, as well as for data consultation has now been developed and is one of the project deliverables (deliverable 3.2.). Using the internet application, national correspondents will be able to input directly study results, which will then be validated by the EuroHIV team and then included into the database.

PROJECT ADMINISTRATION

The full EuroHIV team consists of 2.5 full time epidemiologists (including the project leader), 2 part-time scientists (0.1 FTE biostatistician and 0.8 FTE data analyst) and a 1 full-time programme administrator as well as 2 part-time IT support staff (0.2 FTE of an IT specialist and 0.1 FTE webmaster). For 2006, the EuroHIV team consisted of a full complement of staff.
The list of countries, institutions and persons involved in EuroHIV is provided in Annex I including country correspondents and national institutions participating in EuroHIV, Steering Group members, and EuroHIV staff.

**PROJECT OPERATIONS AND ACTIVITIES**

During the period 1\textsuperscript{st} January to 31\textsuperscript{st} December 2006, the following operations and activities were carried out.

**Data collection, analysis and dissemination**

- Individual and anonymous data on cases of AIDS and HIV infections were collected for end year 2005 (aggregated HIV reporting data for certain countries still not able to provide individual-level data).
- Validation of the annual collection of HIV and AIDS cases
- Information on national HIV testing patterns in 2005 (total numbers of HIV tests performed excluding blood screening and unlinked anonymous testing) were collected as background information to interpret HIV reporting data.
- Compilation and validation of HIV prevalence data (data collected include methods used and prevalence levels) were compiled for the following populations:
  - Commercial sex workers (CSW)
  - Patients attending sexually transmitted infections (STI) clinics
  - Patients diagnosed with tuberculosis
- Analysis of HIV/AIDS surveillance data including HIV and AIDS case reports, HIV testing activities, and HIV prevalence data.
- Dissemination of the public version of the European Non Aggregate AIDS Data Set (ENAADS), made available in October 2006 (month 22).
- Availability of HIV/AIDS surveillance data on the website for public consultation.
- HIV and AIDS surveillance data were published in the following reports (Annex VI):
  - HIV/AIDS Surveillance in Europe. Mid-year 2005 (No. 72): HIV prevalence data on blood donations, pregnant women and men who have sex with men (MSM).
- The report of HIV and AIDS surveillance data among patients with sexually transmitted infections, commercial sex workers and HIV and TB co-infection is now being finalised (Mid-year 2006 No. 74; in press) and will be circulated to national correspondents for validation prior to publication.
- A survey of national HIV/AIDS surveillance activities and practices within the WHO European region was completed in 2006. Responses were received from 44 of 52 countries in WHO Europe and 26 of the 27 European Union Member States. A draft report of the survey results was circulated at the EuroHIV meeting of national correspondents (November 2006; month 23) for consultation. A draft report with technical recommendations is now being finalised and will be circulated among Steering Group members and national correspondents for a final consultation and validation prior to publication.
- Continuing progress of workpackage 7 “Estimation of HIV incidence using serological assays” (see Annex VIII). There has been an exchange of technical expertise and quality control panels between University Francois Rabelais at Tours and the Health Protection Agency (deliverable 7.2). The protocol for the evaluation of the different serological assays was circulated and, at present, six national centres have been recruited to develop estimates of incidence.
Strengthening the European HIV/AIDS surveillance network of collaborators

EuroHIV Steering Group
Two meetings of the EuroHIV Steering Group were held on 7th April and 15th November 2006. The minutes for both Steering Group meetings have been circulated (see Annex III). The EuroHIV Steering Group advises and monitors the progress of the EuroHIV team in achieving its programme aims and objectives by assisting in the following objectives:

- To identify priorities and advise EuroHIV on directions for future activities on HIV/AIDS surveillance in Europe, and to promote the use of surveillance data in prevention activities;
- To guide and advise EuroHIV on scientific matters regarding current HIV/AIDS surveillance activities, including collection, utilisation and dissemination of data;
- To participate in EuroHIV’s technical workshops on specific surveillance topics;
- To review EuroHIV’s technical guidelines and documents on HIV/AIDS surveillance;
- To promote collaborations between EuroHIV, WHO/UNAIDS and specific countries.

Training workshop for EuroHIV national correspondents
In collaboration with UNAIDS and WHO Europe, EuroHIV organised a two-day training workshop on methods for HIV/AIDS estimates and projections in low-level and concentrated epidemics. The aim of the workshop was to provide an overview of estimating HIV prevalence in populations with low-level or concentrated epidemics and provide training to make short-term projections for the HIV/AIDS epidemic. The workshop was held over two days (5th and 6th April 2006) in St. Maurice, France. In total, 31 national participants representing 28 European countries attended the training workshop. A meeting report, including a full programme and evaluation of the training, is available (Annex IV).

Meeting of EuroHIV national correspondents
The meeting of EuroHIV national correspondents took place at the Institute de Veille Sanitaire, St. Maurice, France on the 16th and 17th November 2006. National correspondents from 36 European countries met to review the developments and innovations pertinent to HIV surveillance in Europe. Minutes of the meeting, including a full programme and presentations, have been circulated (month 26) and available in Annex V.

Preparation of Standard Operating Procedures
A document outlining the Standard Operating Procedures (SOP) for the EuroHIV project was prepared and delivered to the European Centre for Disease Prevention and Control (ECDC) as well as to the European Commission (deliverable 5.1).

Expertise, collaborations, field trips
Several collaborations and participation in workshops and meetings took place throughout the period including the following:

Consultation “CDC Adult/Adolescent HIV Case Definition/HIV Disease Classification System for Public Health Surveillance” organised by Centre for Disease Control, 26th/27th June 2006, Atlanta, United States of America. (Participation Isabelle Devaux).


Presentation “Youth and HIV Epidemic in Central and Eastern Europe” at the international conference “Youth Sexuality and Sexuality Education in the Context of HIV/AIDS Prevention in Europe, especially in Central and Eastern Europe” organised by ASTRA Network, 8th/9th September 2006, Warsaw, Poland. (Participation Giedrius Likatavicius).


Meeting of experts on HIV/AIDS surveillance organised by “Northern Dimension partnership on Health and Social Well being (NDPHS)” 5th October 2006, Paris, France. (Participation Isabelle Devaux and Giedrius Likatavicius).


Participation at the steering group (27th/28th June 2006) and annual meeting (28th/29th November 2006) of the European Surveillance of Sexually Transmitted Infections (ESSTI) project, London, United Kingdom. (Participation Anthony Nardone).

OUTPUTS AND RESULTS

Reports
Two half-yearly surveillance report HIV/AIDS surveillance reports have been published in this period (Annex VI):

- The mid-year 2005 issue (No. 72) of the HIV/AIDS Surveillance in Europe (Annex IV), in which analysis of the following data are presented:
  - Reporting of cases of HIV infection to mid-year 2005
  - Prevalence of HIV infection in blood donations
  - Prevalence of HIV infection in antenatal clinic attendees
  - Prevalence of HIV infection and high risk behaviours in MSM

- The end-year 2005 issue (No. 73) of the half-yearly surveillance report HIV/AIDS Surveillance in Europe was published in December 2006 (Annex IV). It includes the following data:
  - Reporting of cases of HIV infection and AIDS to end 2005
  - Total annual numbers of diagnostic HIV tests to end 2005

The draft of two reports are being finalised and will undergo a validation procedure before publication:

- The mid-year 2006 issue (No. 74) of the half-yearly surveillance report HIV/AIDS Surveillance in Europe, in which analysis of the following data are presented:
  - Update of HIV and AIDS case reports to end -year 2005
  - Prevalence of HIV infection among STI clinic attendees
  - Prevalence of HIV infection among commercial sex workers
  - HIV and TB co-morbidity in Europe

- A draft of the report of the survey of national HIV/AIDS surveillance activities and practices within the WHO European region of was circulated at the EuroHIV meeting of national correspondents (November 2006; month 23) for consultation and validation.
Scientific communications

Copies of articles and abstracts are available in Annex VII. The following articles were submitted and/or published in 2006:


The following scientific abstracts were presented as oral communications at scientific conferences:

- Likatavičius G for the study group ANRS-Coquelicot. “HCV and HIV transmission among drug users in France” at the international conference “Hepatitis C and drug use: from awareness to action” organised by CEEHRN, 10th/11th March 2006, Vilnius, Lithuania.

The following scientific abstracts were presented as posters at scientific conferences:


**DATA DISSEMINATION**

Data on AIDS and HIV infection are disseminated world-wide through the following media:

- The half-yearly reports of “*HIV/AIDS Surveillance in Europe*” have been printed and distributed.
  - HIV/AIDS Surveillance in Europe. Mid-year 2005 (No. 72) (deliverable 3.1.1)
  - HIV/AIDS Surveillance in Europe. End-year 2005 (No. 73) (deliverable 2.2.2)
- Slides sets for presentations, available on Internet.
- Internet website (www.eurohiv.org) from where the above report and updated sets of slides on the epidemiological situation of HIV in Europe can be downloaded.
- The following databases are currently available for data consultation and querying
  - HIV and AIDS case reports can be queried using a direct link from the EuroHIV website to the WHO Europe Central Centralized Information System for Infectious Diseases (CISID) (deliverable 8.2)
- EuroHIV European HIV prevalence database can now be queried from the EuroHIV website and a facility to allow direct data inputting by approved national correspondents is also available (deliverable 3.1).

- Scientific publications and communications (Annex VII).
- The public version of ENAADS for 2006 has been made available to all EuroHIV national correspondents, the European Commission, WHO and UNAIDS (deliverable 2.1.2).
## PROJECT DELIVERABLES

*Revised delivery dates are those as presented in the interim report for 2005.*

<table>
<thead>
<tr>
<th>Deliverable number</th>
<th>Deliverable title</th>
<th>Delivery date (original)</th>
<th>Delivery date (revised)*</th>
<th>Status and comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>D1.1</td>
<td>Reports of steering group meetings</td>
<td>two/year</td>
<td>two/year</td>
<td>Reports delivered (copies available Annex III)</td>
</tr>
<tr>
<td>D1.2</td>
<td>Reports of European HIV/AIDS surveillance meetings</td>
<td>18,36</td>
<td>23,36</td>
<td>The report of the first European HIV/AIDS surveillance meeting (held in month 23) has been delivered (Annex V).</td>
</tr>
<tr>
<td>D2.1</td>
<td>Release of the European Non-Aggregate AIDS dataset</td>
<td>7,20,32</td>
<td>7,20,32</td>
<td>Delivered in month 23 to national and international correspondents.</td>
</tr>
<tr>
<td>D3.1</td>
<td>HIV/AIDS surveillance in Europe: HIV prevalence in specific populations - annual report</td>
<td>6,18,30</td>
<td>11,23,35</td>
<td>The first report (revised schedule due in month 11) was delivered in month 15 (deliverable 3.1.1; Annex VI). A draft of the second report (deliverable 3.1.2) is being finalised before circulation among national correspondents for validation and should be published by month 30.</td>
</tr>
<tr>
<td>D3.2</td>
<td>European HIV prevalence database</td>
<td>11</td>
<td>20</td>
<td>The European HIV Prevalence Database is now available on-line for both data inputting and consultation by the steering group (month 26) and national correspondents (month 28).</td>
</tr>
<tr>
<td>D4.1</td>
<td>National HIV surveillance methods: report of survey</td>
<td>18</td>
<td>23</td>
<td>The survey on national HIV surveillance methods was completed in autumn 2006 (month 21). A draft report was circulated to national correspondents at the EuroHIV correspondents’ meeting (month 23) for validation of results and updating of data. The draft report has since been revised, with a discussion of the results and drawing up of initial recommendations (deliverable 4.2), which will be circulated to national correspondents prior to publication.</td>
</tr>
<tr>
<td>D4.2</td>
<td>Technical recommendations and guidelines for improving HIV/AIDS surveillance methods and data comparability across Europe</td>
<td>24</td>
<td>27</td>
<td>A draft of the report, including technical recommendations is being finalised (see above) before it being circulated for consultation with national correspondents and other international organisations (i.e. ECDC and WHO).</td>
</tr>
<tr>
<td>Deliverable number</td>
<td>Deliverable title</td>
<td>Delivery date (original)</td>
<td>Delivery date (revised)*</td>
<td>Status and comments</td>
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<tr>
<td>D5.1</td>
<td>Documentation of European HIV/AIDS surveillance methods and procedures</td>
<td>24</td>
<td>24</td>
<td>Delivered in month 21.</td>
</tr>
<tr>
<td>D6.1</td>
<td>Data from third countries of the WHO European region will be included in the deliverables: 2.1, 2.2, 3.1, 3.2, 4.1 and 4.2.</td>
<td>11</td>
<td>11</td>
<td>Delivered as appropriate.</td>
</tr>
<tr>
<td>D7.1</td>
<td>Pilot study to estimate HIV incidence, using two serological assays: report</td>
<td>15</td>
<td>32</td>
<td>Work on this deliverable is now well advanced (see Annex VIII). A protocol was distributed in July (month 18) and recruitment of six national institutes, rather than the original five (listed in Annex VIII), was completed by month 24. The first deliveries of samples from national institutes were received by the Health Protection Agency (HPA) in January 2007 (month 25) and testing is underway. A workshop to present and discuss results is planned for May (14th and 15th) 2007 in London.</td>
</tr>
<tr>
<td>D7.2</td>
<td>Performance and comparability of serological assays and feasibility of technological transfer: report</td>
<td>12</td>
<td>30</td>
<td>Work on this deliverable is now well advanced (see Annex VIII). There has been an exchange of technical expertise and quality control panels between University Francois Rabelais at Tours and the HPA (deliverable 7.2). The panel of 1,000 samples has now been tested (month 26) at the HPA and a report is now being prepared.</td>
</tr>
<tr>
<td>D8.1</td>
<td>Half-yearly update of EuroHIV website</td>
<td>6-monthly</td>
<td>6-monthly</td>
<td>Delivered as appropriate.</td>
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<tr>
<td>D8.2</td>
<td>New online data query application for HIV and AIDS case reporting</td>
<td>15</td>
<td>24</td>
<td>In collaboration with World Health Organization Regional Office in Europe, an on-line query application for HIV and AIDS case reporting is now available at the CISID website (month 26) and can be accessed directly from the EuroHIV website.</td>
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<tr>
<td>D8.3</td>
<td>Peer-reviewed scientific articles (at least 2 per year) and conference presentations.</td>
<td>7,12</td>
<td>7,12</td>
<td>Two peer-reviewed scientific articles were published (Annex VII). Furthermore, work was presented at the international AIDS conference in Canada (1 oral poster and 3 posters) as well as oral presentations at the 16th ECCMID conference and the 7th Nordic Baltic Infectious Disease Conference and at the Institut de Veille Sanitaire conference (Annex VII).</td>
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**REVISED PROJECT GANT CHART**
(as presented in first interim report 2005)

**EuroHIV timechart**

<table>
<thead>
<tr>
<th>Task Name</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
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<tbody>
<tr>
<td>WP1: Coordination</td>
<td>Qtr 1</td>
<td>Qtr 2</td>
<td>Qtr 3</td>
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<tr>
<td>WP2: Core HIV/AIDS surveillance</td>
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<td>WP3: HIV prevalence in specific populations</td>
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<td>WP4: Improving standardisation of HIV/AIDS surveillance</td>
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<td>WP5: Preparation for integration of HIV/AIDS surveillance into the ECDC</td>
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<td>WP6: Collaboration with third countries of the WHO European Region</td>
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<tr>
<td>WP7: Estimation of HIV incidence using serological assays</td>
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<tr>
<td>WP8: Information dissemination</td>
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</tbody>
</table>

| X | = original deliverable date | R | = revised deliverable date |

- WP1: Coordination
  - D1.1 Report of Steering Group meetings (2 per year)
  - D1.2 Report of European HIV/AIDS surveillance meetings (2x)
- WP2: Core HIV/AIDS surveillance
  - D2.1 European Non-Aggregate AIDS Dataset - public database annual release
  - D2.2 Report "HIV/AIDS Surveillance in Europe": case reporting
- WP3: HIV prevalence in specific populations
  - D3.1 Report "HIV/AIDS Surveillance in Europe": HIV prevalence in specific populations
  - D3.2 Online European HIV Prevalence Database
- WP4: Improving standardisation of HIV/AIDS surveillance
  - D4.1 National HIV/AIDS surveillance methods: report of survey
  - D4.2 Technical recommendations for improving HIV/AIDS surveillance methods
- WP5: Preparation for integration of HIV/AIDS surveillance into the ECDC
  - D5.1 Documentation of European HIV/AIDS surveillance methods and procedures
- WP6: Collaboration with third countries of the WHO European Region
  - D6.1 Data from third countries to be included in the deliverables D2.1, D2.2, D3.1, D4.1, D4.2
- WP7: Estimation of HIV incidence using serological assays
  - D7.1 Pilot study to estimate HIV incidence using two serological assays: study report
  - D7.2 Performance and comparability of serological assays and feasibility of technology transfer: report
- WP8: Information dissemination
  - D8.1 Half yearly updates of the EuroHIV website
  - D8.2 New online data query application for HIV and AIDS case reporting
  - D9.3 Peer-reviewed scientific articles (at least 2 per year) and conference presentations