

**Most Significant Contributions**

I am a demographer who is currently involved in prospective observational epidemiologic research into the impact of antiretroviral therapy on quality of life and survivorship and interested in issues regarding access to antiretroviral therapy in developing nations. Along with Dr Julio Montaner, I am the site investigator of the VaxGen phase III HIV vaccine efficacy trial being conducted in Vancouver and other sites in North America and Europe. I am also the director of Population Health Program and the manager of HIV/AIDS province-wide drug distribution and treatment program at the British Columbia Centre for Excellence in HIV/AIDS. In addition to my work in HIV, I have a long-standing interest in First Nations health. While completing my PhD in Australia from 1988 to 1991, I was involved in assessing cardiovascular risk factors and mortality of Australian Aborigines living in several rural communities in western New South Wales. Furthermore, I have past experience working with genealogical data from small native communities in British Columbia as well as analyzing vital statistics and health data for First Nations populations. Since completing my PhD in 1992 I have published over 140 peer-reviewed publications. Over this time period I have also supervised or advised 15 PhD and MSc students resulting in over 50 co-authored publications including two from my graduate demography class (Wood et al. *Lancet*, 2000; 355: 2095-2100; and Lacaille D et al. *Journal of Rheumatology*, 2001; 28:2315-2319). I currently hold a career award from the Michael Smith Foundation for Health Research.

His most significant contributions to HIV research include:

**STUDIES MONITORING SEROINCIDENCE AND DETERMINANTS OF HIV INFECTION AND RISK BEHAVIOUR AMONG GAY AND BISEXUAL MEN**

My contribution in this area can be best exemplified by a paper published in the *Lancet* (1994; 344: 1120-24). In this natural history study of a cohort of HIV-positive gay and bisexual men, we demonstrate that the lower socioeconomic status decreases the length of survival. In particular, we show that low baseline income was significantly associated with shorter survival from HIV infection to death even after adjustment for CD4 count, age at infection, year of infection and use of HIV therapies and prophylaxis. This association does not appear to be due to unequal access to care or to so-called downward drift.

**STUDIES MEASURING THE IMPACT OF HIV INFECTION ON POPULATION HEALTH**

My primary goal in the area of population health research has been examining the impact of HIV on patterns of mortality, migration and hospitalization in Canada. My work in this area can be best highlighted by two studies. In a recently published study in the *Lancet* (2000; 355: 2095-2100) we show that although there are barriers to widespread HIV treatment, limited use of antiretrovirals could have an immediate impact on South Africa's AIDS epidemic. In the second study published in *AIDS*, (1998; 12: (16): 2203-2209), we estimated the potential direct cost of making triple combination therapy widely available to HIV-positive adults and children throughout the world. Our results demonstrate that the cost of making combination antiretroviral therapy available worldwide would be exceedingly high, especially in countries with limited financial resources. This work was originally based on research initiated by Evan Wood and Paula Braitstein as part of my graduated class in Demography (HCEP528).

**STUDIES EVALUATING THE IMPACT OF ANTIRETROVIRAL THERAPY ON THE HEALTH AND WELL-BEING OF PERSONS WITH HIV DISEASE**

My research interests in treatment issues are an outcome of my responsibility as the manager of the Centre's HIV/AIDS Drug Treatment Program. My work in this area can be best highlighted by two

studies published in JAMA. In the first study published in JAMA (1998; 279: 450-54) we demonstrated a significant reduction in mortality and AIDS-free survival for HIV infected individuals who initiated therapy with regimens including stavudine or lamivudine compared to those who initiated therapy with regimes limited to zidovudine, didanosine and zalcitabine. In the second study (JAMA 2000; 286: 2568-2577) we demonstrate uniformly low rates of disease progression to AIDS and death among patients starting antiretroviral therapy with CD4 cell counts of at least 200/μL. Progression to AIDS and death was clustered among patients starting therapy with CD4 cell counts less than 200/μL. This second study has had a significant impact on clinical practice in this country as well as internationally. Because of research by us and others, current guidelines no longer recommend initiating antiretroviral therapy at CD4 cell counts above 350/μL. Most recently, along with other members of our group I have participated in a much larger multi-centre cohort study that confirms our published JAMA results (Lancet 2002; 360: 119-129).

## Publications

### Refereed Publications - Articles

#### I. Refereed articles

1. Wood E, Tyndall MW, Spittal PM, Li K, Anis AH, Hogg RS, Montaner JSG, O'Shaughnessy MV, Schechter MT. Impact of supply-side policies for control of illicit drugs in the face of the AIDS and overdose epidemics: investigation of a massive heroin seizure Canadian Medical Association Journal 2003; 168(2):165-9.
2. Craib KJ, Spittal PM, Wood E, Laliberte N, Hogg RS, Li K, Heath K, Tyndall MW, O'Shaughnessy MV, Schechter MT. Risk factors for elevated HIV incidence among Aboriginal injection drug users in Vancouver. Canadian Medical Association Journal 2003 168(1):19-24
3. Hogg RS, Craib KJP, Pi D, Lee SS, Minuk GY, Shapiro CM, Schechter MT, O'Shaughnessy MV. Health and socioeconomic status differences among antibody hepatitis C positive and negative transfusion recipients, 1986-1990. Canadian Journal of Public Health, 2003, 94 (2) 130-134.
4. Heath KV, Montaner JSG, Bondy G, Singer J, O'Shaughnessy MV, Hogg RS. Emerging drug toxicities of highly active antiretroviral therapy for human immunodeficiency virus (HIV) infection. Current Drug Targets, 2003 (1):13-22.
5. Ratner P.A., Johnson JL., Shoveller JA., Chan K, Martindale SL, Schilder AJ., Botnick MR, Hogg RS. Non-consensual sex experienced by men who have sex with men: Prevalence and association with mental health. Patient Education and Counseling 2003 49(1):67-74.
6. Press N, Tyndall MW, Wood E, Hogg RS, Montaner JSG. Virologic and immunologic response, clinical progression and highly active antiretroviral therapy. Journal of Acquired Immune Deficiency Syndromes and Human Retrovirology 2002, Supplement 3: S11-17.
7. Brumme ZL, Dong WW, Chan KJ, Hogg RS, Montaner JS, O'Shaughnessy MV, Harrigan PR. Influence of polymorphisms within the CX3CR1 and MDR-1 genes on initial antiretroviral therapy response. AIDS 2003 Jan 24;17(2):201-8

8. Wood E, Kerr T, Spittal PM, Li K, Small W, Tyndall MW, Hogg RS, O'Shaughnessy MV, Schechter MT. The potential public health and community impacts of safer injecting facilities: evidence from a cohort of injection drug users. *Journal of Acquired Immune Deficiency Syndromes and Human Retrovirology* 2003 32(1):2-8
9. Wood E, Hogg RS, Yip B, Harrigan PR, O'Shaughnessy MV, Montaner JSG. Is there a baseline CD4 cell count that precludes response to modern antiretroviral therapy? *AIDS* 2003; 17: 711-720.
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12. Lee N, Hogg RS, Yip B, Harrigan PR, Harris M, O'Shaughnessy MV, Montaner JSG. Rates of disease progression among persons initiating multiple drug rescue therapy. *The Journal of Infectious Diseases*, 2003: 188; 137-41
13. Braitstein P, Li K, Tyndall M, Spittal P, O'Shaughnessy M, Schilder A, Johnston C, Hogg RS, Schechter MT. Sexual violence among a cohort of injection drug users. *Social Science & Medicine*. 2003 57(3):561-9.
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15. Palepu A, Tyndall M, Yip B, O'Shaughnessy MV, Hogg RS, Montaner JS. Impaired virologic response to highly active antiretroviral therapy associated with ongoing injection drug use. *Journal of Acquired Immune Deficiency Syndromes* 2003: 32(5):522-6.
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17. The Antiretroviral Therapy (ART) Cohort Collaboration (Part of the writing committee). Prognostic importance of initial response in HIV-1 infected patients starting potent antiretroviral therapy: analysis of prospective studies. *The Lancet* 2003 362: 679-86.
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62. S. Dhalla, S. Strathdee, D. Patrick, T. Kerr, R. Hogg. HIV vaccine preparedness studies in North America, 1995-2005. : AIDS 2006 - XVI International AIDS Conference: Abstract no. TUPE0425

### **Invited Presentations**

April 2000 Fourth International Workshop on HIV Observational Databases, Marbella, Spain. "Lipodystrophy-associated morphologic and metabolic abnormalities in a large population-based observational HIV/AIDS treatment database."

May 2000 First National Conference on Adherence in HIV, Milan, Italy. "Metodi per misurare l'adesione: stato dell'arte e implicazioni pratiche."

April 2001 Whistler HIV Update, Whistler BC, "Factors Affecting ART Effectiveness."

April 2001 Gay men building local knowledge. Community-based research in HIV prevention and health promotion, Vancouver, BC, "HIV infections among young gay men in Vancouver."

May 2001 First National Conference on Hepatitis C, Montreal, Quebec, "Quality of Life: A Social Perspective."

May 2007

**Other Presentations**

February 2002 Rounds, Department of Health Care and Epidemiology, "HAART-Less: Current evidence and future implications."

**Activities/Contributions**

**Editorships**

1994-present Editor, Forecast

1995-present. Co-editor with Dr. Julio Montaner, AIDS Update column, BC Medical Journal

1999-present Editorial Board, AIDS

**Reviewer**

1992 Preventive Medicine

1994 Social Science and Medicine

1995 Canadian Medical Association Journal

1995-present National Health Research Development Program

1996-present AIDS

1996-present Canadian Medical Association Journal

1996-present Clinical and Investigative Medicine

1998 Medical Research Council

1998 Journal of Acquired Immunodeficiency Syndromes and Human Retrovirology

1999 The American Journal of Managed Care

1999 Drug and Alcohol Dependence

1999 Journal of the American Medical Association

1997 The Lancet

2000 Drugs

2000 PharmacoEconomics

**External Examiner**

1995 Iris B. Moczuk, Masters in Social work, UBC, Acted as external university examiner.

1995 Darren Smith, Masters in Social work, UBC, Acted as external university examiner.

1999 Shawna Faber, Doctor of Philosophy, Educational Psychology and Special Education, UBC, Acted as chair.

2001 Maria Cristina Barroetavena, Doctor of Philosophy, Department of Health Care and Epidemiology, UBC, Acted as departmental examiner.

2001 Kelli I. Stajduhar, Doctor of Philosophy, Faculty of Nursing, UBC, Acted as chair.

**Service to the University**

1995- 2006 Thesis Screening Panel, Department of Health Care and Epidemiology

1999- 2001 Chair, Thesis Screening Panel, Department of Health Care and Epidemiology.

2003- 2006 MD/PhD selection committee

**Service to the Community**

1987-present Canadian Ethnology Association

1988-1991 Australian Population Association

1990-present Population Association of America

1992-present Canadian Association for HIV Research

1992-present International AIDS Society

1993-present Canadian Population Association

1994-present Society for Applied Anthropology

1996-present Fellow, Society for Applied Anthropology

1997-present American Association for the Advancement of Science

2000-2002 Provincial AIDS Advisory Committee, British Columbia, Ministry of Health

**Memberships on Scholarly Committees**

1993-present Committee on Drug Evaluation and Therapy, British Columbia Centre for Excellence in HIV/AIDS

1995-1999 Community research advisory committee, British Columbia Centre for Excellence in HIV/AIDS

1995-present Health Research Support Group, St. Paul's Hospital

1996-2000 Committee member, NHRDP, Population Health Grant Review Committee

1997-2000 Committee member, BCHRF, Studentship Committee

1997-2000 Committee member, BCHRF Population Health Grant Review Committee

2000 Committee member, Hepatitis C Working Group, Blood-Borne pathogens Division, Laboratory Centre for Disease Control, Health Canada,

2000 Committee member, Hepatitis A Working Group, Blood-Borne pathogens Division, Laboratory Centre for Disease Control, Health Canada

2001-present Public, Community and Population Health Grants Committee, Canadian Institutes of Health Research

2001-2003 Council member, Canadian Association for HIV Research

**Consultancies**

Hepatitis C Working Group, Blood Borne Pathogens Division, LCDC, 1998

Part of group of researchers asked to estimate the number of persons infected with Hepatitis C through blood transfusion.