

# YALE UNIVERSITY AIDS PROGRAM FACULTY



Name: Frederick L Altice

Title: Professor

Department: Medicine (Infectious Diseases)

Address: 135 College Street, Suite 323

Contact Phone #: 203.737.2883

Email address: Frederick.altice@yale.edu

## **PROFILE 2016**

### **KEY PUBLICATIONS (JUL 2015 – JUN 2016)**

1. Altice FL, Azbel L, Stone J, Brooks-Pollock E, Smyrnov P, Dvoriak S, Taxman FS, El-Bassel N, Martin NK, Booth R, Stover H, Dolan K, Vickerman P. The perfect storm: incarceration and the high-risk environment perpetuating transmission of HIV, hepatitis C virus, and tuberculosis in Eastern Europe and Central Asia. *Lancet*. 2016;388(10050):1228-48. PMID: 27427455; PMCID: PMC5087988.
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8. Bojko MJ, Mazhnaya A, Marcus R, Makarenko I, Islam Z, Filippovych S, Dvoriak S, Altice FL. The Future of Opioid Agonist Therapies in Ukraine: A Qualitative Assessment of Multilevel Barriers and Ways Forward to Promote Retention in Treatment. *J Subst Abuse Treat*. 2016;66:37-47. PMID: 27211995; PMCID: PMC4919997.
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10. Copenhaver M, Shrestha R, Wickersham JA, Weikum D, Altice FL. An Exploratory Factor Analysis of a Brief Self-Report Scale to Detect Neurocognitive Impairment Among Participants Enrolled in Methadone Maintenance Therapy. *J Subst Abuse Treat*. 2016;63:61-5. Epub 2016/02/18. PMID: 26879859; PMCID: PMC4775373.
11. Csete J, Kamarulzaman A, Kazatchkine M, Altice F, Balicki M, Buxton J, Cepeda J, Comfort M, Goosby E, Goulao J, Hart C, Kerr T, Lajous AM, Lewis S, Martin N, Mejia D, Camacho A, Mathieson D, Obot I, Ogunrombi A, Sherman S, Stone J, Vallath N, Vickerman P, Zabransky T, Beyrer C. Public health and international drug policy. *Lancet*. 2016;387(10026):1427-80. PMID: 27021149; PMCID: PMC5042332.
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## KEY GRANTS

**NIDA R01 DA043125 (Altice, Principal Investigator)**

**10/01/16 - 09/30/21**

Title: Integrating Addiction Treatment and HIV Services into Primary Care Clinics in Ukraine

Description: Three proposed evidence-based practices will reinforce the Collaborative Care Model elements to promote healthcare integration. Project **ECHO** (**E**xtension for **C**ommunity **H**ealthcare **O**utcomes) uses a collaborative learning environment to continuously train, coach, and reinforce specialty care practices (e.g., managing comorbidities) for non-specialist physicians using tele-education technology. Quality Improvement (QI) techniques change clinical and organizational processes to achieve desired outcomes, provide analytical tools, and ensure stakeholder engagement. Pay-for-performance (P4P) incentives encourage physicians to achieve a core set of outcomes based on quality health indicators (QHIs), which are based on pre-specified process measures that yield the best P4P results. Study aims: **1)** To compare both primary (composite QHI score) and secondary (individual QHI scores, quality of life, and stigma) outcomes in 1,350 PWIDs receiving MMT from 15 regions (clusters) and 45 clinical settings using a stratified, phase-in, cluster-controlled design over 24 months. After stratifying PWIDs based on current receipt of MMT, they will be randomized to receive MMT in specialty addiction clinics (N=450) or in an *ECHO-IC/QI-enhanced* primary care clinic with (N=450) or without (N=450) P4P incentives; **2)** Using a multi-level implementation science framework, we will examine the contribution of client, clinician, and organizational factors that contribute to attaining optimal comprehensive QHI scores in the 1,350 recruited PWIDs in aim 1; and **3)** To conduct a cost-effectiveness analysis (CEA) of integrating MMT into primary care, with or without P4P, compared to a control group of PWIDs receiving MMT in addiction specialty settings. Significance is based on Ukraine's high burden of HIV and other comorbidities in PWIDs, its regional leadership role in healthcare reform, and its priority to strengthen primary care. Innovation is reflected in strengthening of primary care through MMT integration using a nationwide RCT cluster design linked to an implementation science framework that provides empiric data to inform the CEA, its creative use of ECHO, QI techniques, and P4P, and its focus on processes and outcomes (multi-comorbidity QHIs) of integrated care. Feasibility is based on pilot testing, and extensive co-investigator experience with integrated care, RCTs, implementation science, stigma, ECHO, QI, P4P, and CEA, combined with numerous committed national and international stakeholders and a longstanding experience of conducting research on addiction, HIV, and TB in Ukraine.

**NIDA R01 DA041271 (Altice, Principal Investigator)**

**07/01/16 - 06/30/21**

Title: Addiction, HIV and Tuberculosis in Malaysian Criminal Justice Settings

Description: The aims are to conduct: 1) empiric studies of HIV/TB, including: a) TB diagnostics (symptoms, CXR, TST, AFB smear, Gene Xpert, and sputum culture) to optimize TB screening; b) a RCT of TB prevention strategies among HIV+ and HIV- prisoners comparing a short-course vs a standard 40-week INH course therapy; and c) a RCT of HIV= and HIV- prisoners with TB who have insufficient time to complete treatment within prison and comparing treatment completion rates for those who refuse OAT with those who accept it, but who are randomized to methadone or buprenorphine therapy to facilitate continuity of care post-release; and 2) To use data from aim 1 combined with publically available TB data to conduct agent-based modeling for comparative and cost- effectiveness analyses of TB screening, prevention and treatment strategies among prisoners with and without HIV, incorporating the contribution of latent TB infection and prevalent TB disease on community transmission post-release.

**NIDA R21 DA039842 (Altice, Principal Investigator)**

**08/01/16 - 07/31/18**

Title: Improving Antiretroviral Adherence and Persistence Using mHealth Tools in HIV+ Cocaine Users

Description: The specific aims are: (1) to conduct qualitative assessments using focus groups of PLH who use cocaine and healthcare providers that will assess the acceptability, feasibility, facilitators and barriers of implementing mHealth interventions; and will aid in developing the final design and content of both automated and clinician feedback in preparation for designing a pilot feasibility study; and (2) to conduct a 12-week pilot feasibility RCT among PLH with co-occurring CUDs that will examine the impact of mHealth tools (cellular-enabled smart pill boxes and cell phones) and feedback (no feedback vs. automated feedback vs. automated + clinician feedback) on primary (ART adherence and persistence) and secondary outcomes on the HIV continuum of care (HIV viral suppression, cocaine use, retention in HIV care).

**NIDA R01 DA029910 (Altice, Principal Investigator)**

**09/01/10 - 06/30/20**

Title: Prison Interventions and HIV Prevention Collaboration in Ukraine

Description: **PRIDE:** To develop and test HIV prevention and treatment interventions using implementation research techniques in the criminal justice system in six countries of the former Soviet Union: Ukraine, Moldova, Azerbaijan, Georgia, Kyrgyzstan and Tajikistan. The study explores a multi-level framework using qualitative research methods and then innovatively uses clinical trial design combined with implementation science frameworks to assess prison-release interventions for HIV+ and opioid-dependent prisoners transitioning to the community.

**NIDA R01 DA033679 (Altice, Principal Investigator)**

**04/01/12 - 03/31/17**

Title: Expanding Medication Assisted Therapies in Ukraine

Description: **ExMAT:** This implementation science study has three phases. Phase 1, using qualitative methods, identifies the multi-level barriers and facilitators to MAT with 199 PWIDs and 59 drug treatment staff and administrators from five regions of Ukraine. Phase II uses data from Phase 1 and uses both quantitative data from a nationwide sample of 1612 PWIDs recruited using RDS and mixed methods quantifies and contextualizes experiences, attitudes, stigma and barriers to MAT. Many surveys proposed in the current study are translated and validated. Phase III uses an evidence-based quality improvement strategy, the NIATx treatment improvement model, to scale-up and MAT throughout 25 regions of Ukraine. Last, the study introduces, for the first time, the integration XR NTX into both HIV treatment and addiction treatment settings.

**HRSA H97HA24963 (Altice, Principal Investigator)**

**09/01/12 - 08/31/17**



Title: Special Project of National Significance: **mHEALTH: Medical Home Engagement and Aligning Lifestyles and Transition from Homelessness**

Description: This is a multisite (N=8) study to create a new innovative model of managing complex HIV+ patients with mental illness and homelessness using peer navigators and mobile texting technology. This study uses an implementation science framework to analyze the multi-level contributions to viral suppression over 18 months in homeless patients living with HIV.

**SAMHSA H79 TI025889 (Altice, Principal Investigator)**

**09/01/14 - 08/31/19**

Title: **mCHARTS: Mobile Co-Location Of HIV Activities With Research & Transitional Services**

Description: To demonstration project create a new innovative model of managing high risk HIV Seronegative homeless patients with co-occurring mental illness and substance use disorders. The model uses network and peer navigators and is supplemented by use of mobile texting technology. This study uses an implementation science framework to analyze the multi-level contributions to treatment engagement, including HIV testing and linkage to addiction and psychiatric services over 12 months.

**NIDA R01 DA032290. (Copenhaver, PI; Altice, Co-Investigator)**

**04/11/12 – 03/31/17**

Title: Secondary HIV Prevention and Adherence Among Drug Users

Description: RCT comparative effectiveness trial to test the efficacy and cost-effectiveness of an adapted, brief, version of an evidence-based intervention (EBI) called Holistic Health for HIV (3H+) vs. the original EBI -- Holistic Health Recovery Program for HIV+ drug users (HHRP+). The primary outcomes of this study is the reduction of HIV risk behaviors and each step in the HIV continuum of care, including retention in care, ART uptake and retention, ART adherence and viral suppression. Secondary outcomes include encouraging sexual and drug using partners to initiate PrEP.

## **KEY LECTURES/PRESENTATIONS**

- 3/2015 *Alcohol Use Disorders and its Association with HIV Infection Adherence to ART, Diagnosis and Management of Substance use Disorders.* International Course HIV: Pathogenesis, Prevention, and Treatment 2015: Toward to HIV Cure. Lima Peru.
- 4/22/15 *HIV, Substance Abuse and Criminal Justice: Lessons Learned from Experiences in Malaysia.* 2015 International Conference on Global Health: Prevention and Treatment of Substance Use Disorders and HIV. Hangzhou, China.
- 4/28/15 *HIV and Addiction in Prisons and Closed Settings and Lessons from Ukraine: Implementation science and the Expansion of MAT.* HIV Research Conference: Implementation Science Approaches to HIV treatment and care in Kazakhstan. Almaty, Kazakhstan.
- 5/2015 *Buprenorphine into HIV Clinical Care Settings.* Infectious Disease Conference. Yale Affiliated Hospital Program. St. Raphael's Campus.

- 6/2015 *Clinical management of the co-infected HIV/Hep C patient.* Infectious Diseases Conference. Yale Affiliated Hospital Program. Bridgeport Hospital.
- 6/2015 *Testing and Implementing Interventions for Patients With HIV and Substance Use in Peru: Prevention Strategies in the Drug-Using MSM Population.* 2015 NIDA International Forum: Building International Collaborative Research on Drug Abuse. Phoenix, AZ
- 8/24/15 *Tuberculosis in Prisons.* Yale University Global Health Tuberculosis Meeting, LEPH.
- 8/25/15 *Project CoRECT.* Epidemic Intelligence Service Lecture. Yale University Haelen Center.
- 9/15/15 *Tackling the Syndemic of HIV, Tb, and Addiction in Criminal Justice Settings.* Center for Drug Use and HIV Research at New York University.
- 10/28/15 *Infectious Diseases in prisons in Kyrgyzstan.* Health & Justice Annual Prison Conference. Bishkek, Kyrgyzstan.
- 11/2015 *Global Research at the Intersection of Addiction and HIV.* Nathan Smith Clinic Pre-clinical Conference Lecture, Yale University.
- 12/2015 *Evidence-Based Addiction Treatment for Criminal Justice Populations.* International Symposium on 10th Anniversary of Probation, Istanbul Turkey.
- 12/2015 *Integration of substance abuse and HIV treatment.* 9th Natl Congress of Alcohol & Drug Addiction, Edirne, Turkey.
- 3/2016 *Review of HIV Continuum of Care and Drug Abuse: Challenges, barriers, and research opportunities.* NIDA HIV Continuum of Care in Drug Abuse Populations, Rockville, MD.
- 4/2016 *Strategies to Promote HIV Treatment in CJ Settings.* T32 Seminar. Columbia University, NY.
- 4/2016 *Evidence-Based HIV Prevention Interventions in PWID.* Gates Foundation Lecture. Washington DC.
- 6/2016 *Strategies to Promote HIV Prevention and Trmt in CJ Settings.* UCSD Summer Symposium Institute Lecture. San Diego, CA.
- 6/2016 *ePROMISE – A peer driven social media intervention to improve outcomes for youth along the HIV Care Continuum.* CIRA Symposium, Mystic, CT.
- 7/2016 *The Perfect Storm: Incarceration and Multi-level Contributors to Perpetuating HIV and TB in Eastern Europe and Central Asia.* Lancet Special Theme Issue: HIV, Viral Hepatitis, and TB among prisoners.
- Policing, Human Rights and the HIV Response – Launch of a Special Issue of the Journal of International AIDS Society “Police, Law Enforcement and HIV.”*
- Optimizing patient engagement through the provision of culturally competent HIV care: PWID in the United States, Eastern Europe, and Asia.*
- AIDS 2016 21<sup>st</sup> International AIDS Conference, Durban South Africa

- 8/2016      *The Perfect Storm: HIV in Eastern Europe and Central Asia*. Nathan Smith Clinic Pre-clinical Conference Lecture, Yale University.
- 10/2016     *Management of opportunistic infections in patients with HIV*. Yale Affiliated Hospital Program, Waterbury Hospital.

## RESEARCH

As a researcher, his interests are focused on the interface between infectious diseases, including HIV, tuberculosis, and viral hepatitis, and substance use disorders. Specifically, he is interested in both prevention and treatment issues and has been at the forefront of both behavioral and biomedical intervention research activities. He is also interested in creation of novel prevention and treatment programs for the treatment of HIV, viral hepatitis, tuberculosis, and substance use disorders in vulnerable populations, including people who inject drugs, criminal justice populations, men who have sex with men and both female and transgender sex workers. Dr. Altice has been at the forefront of integrating medication-assisted therapies such as methadone, buprenorphine, and extended-release naltrexone into managing co-morbid conditions, including people living with or at risk for HIV, HCV, tuberculosis, and mental illness. In more recent years, given the many successful prevention and treatment interventions available, he has increasingly become involved in implementation science to find improved ways to disseminate research and ensure that evidence-based practices are implemented using best-practices. His research involves trials from Phase I to IV and includes new implementation science strategies.

Dr. Altice is currently the principal investigator on numerous clinical investigations funded by the National Institutes of Health and several other federal agencies and served as a leading member of the World Health Organization's Policy Guidelines for Collaborative Tuberculosis and HIV Services for Injecting and Other Drug Users: An Integrated Approach. He is also a member of the International Association of Physicians in AIDS Care's Guidelines Committee for Improving Entry Into and Retention in Care and Antiretroviral Adherence for Persons With HIV. Dr. Altice is currently leading studies in Ukraine, Eastern Europe, Central Asia, Malaysia, Indonesia, Peru, and the United States. In addition to publishing his research in peer-reviewed journals, Dr. Altice has authored several significant books and book chapters. He lectures nationally and internationally on the subjects of infectious diseases, addiction medicine, implementation science and the delivery and organization of healthcare services, including integrated healthcare.

## CLINICAL

Director, Clinical and Community Research

Director, HIV in Prisons Program

Director, Community Health Care Van

## **EDUCATION**

Fellowship (Infectious Diseases): Yale University School of Medicine

Residency (Medicine): Yale University School of Medicine

Medical School: Emory University School of Medicine

## **COMMUNITY / ADMINISTRATIVE**

Director, Clinical and Community Research

Director, HIV in Prisons Program

Director, Community Health Care Van