

**CAB Conference Call
March 23, 2017
12:00 EST
Meeting Minutes**

Participants:

Alexandria	FSTRF
Andrea	Jacobi Medical Center
Brandon	University of Florida, Jacksonville
Claire	Harvard University
Delia	University of Miami
Ellen	Ann & Robert Lurie Children's Hospital of Chicago
Exzavia	Children's Diagnostic and Treatment Center
Gena	University of Miami
Jeanie	University of Southern California
Jennifer	University of Colorado, Denver
Joel	University of Puerto Rico
Juanita	Tulane University
Julie	University of Alabama, Birmingham
Kimberly	Rutgers New Jersey Medical School
Kimbrae	Texas Children's Hospital
Kylie	Texas Children's Hospital
Latrina	University of Alabama, Birmingham
Lesley	Texas Children's Hospital
Lourdes	San Juan Hospital
Marilyn	Bronx-Lebanon Hospital Center
Megan	Westat
Raiko	University of Colorado, Denver
Stephanie	University of California, San Diego
Theresa	Texas Children's Hospital
Trinise	Tulane University
Veronica	University of California, San Diego

• **APPROVAL OF MINUTES**

The minutes from the February 23, 2017 call were approved with no changes.

• **PHACS CAB EVALUATION SURVEY RESULTS**

Megan talked about the survey. There were 8 responses. Topics suggested through the survey included:

- Meditation and relaxation;
- How to understand study laboratory results;
- Recruiting CAB members; and
- HIV/AIDS disclosure laws.

• **2017 CAB CHAIR AND VICE CHAIR ELECTIONS**

Megan talked about the CAB Chair and Vice Chair Elections. CAB members can nominate themselves or others for the CAB Chair or Vice Chair positions. CAB members can submit nominations after the CAB call. The CAB will review nominations during the April CAB call. New CAB Chairs will be elected in May.

Megan reviewed the CAB Chair and Vice Chair Roles and Responsibilities list. **Megan** reminded the CAB that CAB Chairs may add responsibilities to the list. **Theresa** talked about the responsibility of giving the CAB update to the entire PHACS team during the Fall Network Meetings. **Theresa** suggested that the Fall Network Meeting CAB update be added to the list. **Lesley** talked about the Fall Network Meeting CAB update. CAB Chairs give monthly updates to the PHACS Leadership on the Executive Committee calls. The Fall Network Meeting CAB update is an annual update about the CAB's activities over the past year. It also includes information about the CAB Retreat and goals for the next year.

Delia talked about the CAB Chair and Vice Chair responsibilities. **Delia** suggested that the notes for the Executive Committee conference call be reviewed with both the Chair and Vice Chair. The Vice Chair should be prepared to give the update if the Chair is not able to attend.

Megan talked about the nominations process. CAB members can nominate themselves or other CAB members. Nominations may be submitted through the PHACS CAB Evaluation Survey or by email. **Megan** reminded the CAB to include the CAB member's name and a few sentences about why the nominee would be a good candidate. A week before the April CAB call, **Megan** will contact all nominees. CAB members may turn down a nomination if they do not want to run for the positions. Nominations will be reviewed with the CAB during the April CAB call.

Megan talked about the CAB Chair terms. CAB Chairs serve terms of two years. Past CAB Chairs can run for positions again after their terms are over.

- **SPRING 2017 LEADERSHIP RETREAT REVIEW – WOMEN'S COHORT RESEARCH PRIORITIES**

Dr. Ellen Chadwick talked about the Spring 2017 Leadership Retreat. Attendees were put in three breakout groups to brainstorm studies for the Women's Cohort. The breakout groups talked about studies using data that has already been collected and studies that would require collection of new data. The groups also talked about combining or comparing data between PHACS and the Women's Interagency Health Study (WIHS). After the brainstorm, the team met to vote on the top research priorities for the Women's Cohort.

Dr. Chadwick reviewed the Women's Cohort top research priorities. The first priority will use data that has already been collected. This priority would involve looking at mental health problems in women living with HIV. The team will look specifically at the post-partum period (right after they have a baby). Researchers will compare mental health problems in women who were born with HIV and women who were not born with HIV. The team wants to look at mental and substance use disorders in women living with HIV. Researchers will study the relationship of the mothers' disorders to their children's mental and behavioral outcomes. This will be studied for women of children in the SMARTT study.

The second priority using data that has already been collected is to study mothers who had more than one baby in PHACS. The team will look at mothers' antiretroviral medication and CD4 counts. Researchers will also look at changes in viral load.

The third priority will also use data that has already been collected. This priority would involve looking at the relationship between pregnancy conditions in women living with HIV. The conditions are gestational diabetes, preeclampsia, and high blood pressure. Gestational diabetes happens when pregnant women who don't have diabetes have high blood sugar during pregnancy. Preeclampsia is a pregnancy condition that is defined by high blood pressure. It may also include swelling in the hands and feet, and protein in urine. The team is interested in looking at post-pregnancy long-term heart disease risk factors in women living with HIV. Researchers will compare the data with data from the general population of women of the same age. This priority may also require consent to look at women's medical records.

The fourth priority would require collection of new data. This priority would involve looking at the effects of HIV and antiretroviral medications on women's long-term bone health. The team would also look at

the effects of HIV and antiretroviral medications on women's long-term hormonal health and menopause.

The fifth priority would require collection of new data. This priority would involve looking at maternal mental health and substance abuse disorders during pregnancy. The team is interested in focusing on history of childhood traumas.

The sixth priority would also require collection of new data. This priority would involve looking at the commonness and predictors of viral load rebound. Viral load rebound happens when someone who was previously undetectable later has detectable HIV in their blood. The team will also look at lost-to-follow up. The team would look at these outcomes during the first 1-2 years after having a baby.

The last priority would require data from WIHS. This priority would involve assessing the impact of HIV and antiretroviral medications on long-term problems. Problems may include age and symptoms of women living with HIV on brain function and memory, heart disease, and bone problems.

NOTE: The next CAB call will be on Thursday, April 27, 2017 at 12:00 pm EST.