

## Our Fall Newsletter

We at the national team publish this newsletter to keep our participants, referring providers and the general public informed about the latest ANCHOR updates.

Our fall issue shares news about two upcoming supplemental studies for ANCHOR participants and introduces some new CAB members at our study sites. We also pay tribute to Timothy Ray Brown, the first person to be cured of HIV.



## ANCHOR News: Supplemental Studies

**A-HRSI.** Researchers would like to understand how being treated or followed for anal HSIL affects participants' quality of life, so we developed a survey specifically for this. The survey, the ANCHOR Health-Related Symptom Index or A-HRSI, covers 25 items and takes 5-10 minutes to complete. ANCHOR participants will be asked to complete the A-HRSI survey on their own cell phone or with the help of staff during their clinic visit. The A-HRSI survey will be given before randomization, 2-10 days after randomization, one month after randomization, and then yearly until the ANCHOR trial is finished. Information from this substudy will be used to better understand the experiences of persons being treated or followed for anal HSIL.

**COVID.** The COVID pandemic has raised important new questions for ANCHOR participants. Early reports suggest the virus can infect the bowels and be shed into the stool. ANCHOR was awarded funds from the National Cancer Institute to learn more about SARS-CoV-2 infection (the virus that causes COVID) in the anus in people living with HIV.

The study is being offered to people screening for ANCHOR at 5 study sites: Atlanta, Chicago, Miami, New York (Laser Surgery Care) and San Francisco.

Our questions are:

- Whether people screening for ANCHOR have SARS-CoV-2 in their anal swabs;
- Whether there is any relationship between having SARS-CoV-2 in an anal swab and in a mouth swab at the same visit; and
- Whether there is a relationship between SARS-CoV-2 in an anal swab, having high-grade squamous intraepithelial lesions (HSIL), and having anal human papillomavirus (HPV).

To participate, people screening for ANCHOR will have an additional oral swab to test for SARS-CoV-2 infection. The other samples are already being collected as part of the ANCHOR study. For those who are enrolled, we will collect one more set of samples 6 months later. This will tell us how often we are finding new infection with SARS-CoV-2.

If you are being screened at one of these 5 sites, we hope that you will participate in this pioneering study!



## In Memoriam

*J Johnson Peretz, National Recruitment Coordinator*

Timothy Ray Brown, the first person to be cured of HIV, passed away from leukemia in Palm Springs, surrounded by family and friends this past September. He was 54 years old. Known as the 'Berlin patient,' because of where he received the bone marrow transplants in 2007 and 2008 which led to his cure, Brown gave researchers and people with HIV new hope that curing HIV may be possible in our lifetimes. Since Brown's successful cure, one other person, Adam Castillejo (the 'London patient'), has been definitively cured of HIV, and possibly a third person in Germany, through risky bone marrow or stem cell transplants.

Brown is survived by his partner, Tim. To read more about Brown's personal reflections on his cure see <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4287108/>

## CAB News

*Michael Dorosh, CAB Chair*

The CAB voted in three new members from our sites in Miami, San Francisco, and Seattle! We continue to expand our CAB to ensure representation from all communities participating in the ANCHOR study. If you are interested in joining, get in touch with your local site coordinator and let them know!

**Learn more about the ANCHOR CAB at** <https://anchorstudy.org/cab/membership>

**Miami: John McFeely.** John has lived in South Florida for 25 years and called the Little Haiti neighborhood home for the past 17 years. John became an HIV/AIDS advocate in law school in the early 1990s after being diagnosed with AIDS. Currently he is a member of the Miami-Dade HIV Partnership, involved with the Planning Council's activities on medical services and housing. Previously, he was a member of the ACTG-CCG, the Complications of HIV R.A.C. and the Executive Committee. He also served on the CAB for the National Eye Institute's studies on AIDS-related complications. In his free time, John sings with several choirs, teaches bible study classes, and enjoys daily morning walks and bike rides.

**San Francisco: Jeffrey Senna.** Jeffrey has been active in gay mental and sexual health issues since college, where he was part of two organizations, GLOW and a Gay Men's CAP support group, doing student outreach one on one and in larger settings. His HIV volunteer work continued with active participation at the SF AIDS Foundation, 50 Plus, and Bridgemen programs. He feels by just raising the topic of anal cancer among his friends, he brings awareness to his community's quality of health in a grassroots way. As a gourmet chef, he's developed a rare super taster ability as one of his super-powers.

**Seattle: Peter Bryant.** As a community activist and participant in a number of clinical trials, including ANCHOR, Peter has worked to promote the wellbeing of people living with HIV (PLWH) in the greater Seattle area for several years. Outside of community activism and clinical research, Peter enjoys spending time with his friends and riding his motorcycle. He also enjoys staying active in the great outdoors by camping and hiking. He sees his work with ANCHOR as another great way to support his community.