

GVN in India Hepatitis B Virus

The proposed grant is a pilot study to develop an integrated clinical database to support an ongoing project in Arunachal Pradesh, India. GVN will assist in developing, maintaining and facilitating collection of data, assimilation and provide expertise in evaluating outcomes. Briefly, Dr. Abhijit Chowdhury, the principal investigator of the parent project will screen 30,000 marginalized population for hepatitis B serologies and:

1. Provide Hepatitis B Virus ([HBV](#)) vaccinations for those who are not exposed to HBV.
2. Develop a longitudinal cohort of patients with chronic HBV for linkage evaluation and care.



Investigators who will be assisting with the study at the GVN are faculty within the Division of Clinical Care and Research at the [Institute of Human Virology](#) (IHV), Baltimore, MD. The program implementing this grant is unique in that it combines community-based clinical care and academic research. Since 1996, the IHV in Baltimore has had a long-standing history of pioneering research in human virology.

The HCV Clinical Research Program has conducted several landmark clinical trials using novel therapeutics. The Program is based out of three campuses:

1. the DC Partnership for HIV/AIDS Progress ([DC PFAP](#)), which includes our clinical partners in Washington, DC;
2. The National Institutes of Health, Bethesda, MD; and
3. the University of Maryland Institute of Human Virology (IHV), Baltimore, MD.

The DC-PFAP is a partnership for community-based clinical care and research whose aim is to reduce the incidence and prevalence of HIV/AIDS in the District of Columbia. In conjunction with the other partners, DC-PFAP seeks to improve access to HIV and Hepatitis C Virus (HCV)-related research for residents of Washington, DC. Since its inception, this program has established itself as a global leader in novel therapeutics for HCV. The investigations within this program were the first in the world to utilize Interferon (IFN)-free HCV regimens, demonstrate efficacy of 6-week combination direct acting antiviral (DAA) therapy, and use IFN- and ribavirin-free regimens in a HIV/HCV co-infected population. To date, over 2000 patients have been cured of HCV through treatment within these subspecialty clinics, which serve as a global training resource for escalation of HCV linkage and care.

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