

My Life My Health My CHOICE

年報 2022 Annual Report



再思社區健康組織
Community Health Organisation for
Intervention, Care and Empowerment

20th
ANNIVERSARY

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主席獻辭 Message from Chairperson



何景文醫生
Dr Ho King Man

本人非常榮幸能獲任命為再思的董事局主席，任期為2022年至2024年。我藉此向副主席尹慧兒醫生、秘書湯德輝先生、財務何文勝博士、成員何家欣博士和林家慧博士表示衷心的感謝。我非常感激大家，在過去一年為再思的發展作出巨大貢獻。

我很高興地向董事局匯報，我們在過去一年成功申請了愛滋病信託基金、禁毒基金和衛生防護中心特別預防計劃的資助，讓我們能重點關注愛滋病預防和支持愛滋病患者的服務。

2022年，我們成功舉辦了以「愛滋病終結 - 愛滋病預防與護理創新」為主題的年度研討會，研討會吸引了八位本地和海外演講嘉賓和超過一百名參與者。我們亦很榮幸能夠得到兩家製藥公司的支持，表明他們認可我們在愛滋病預防和護理方面的工作。

我也很高興地向董事局和各位再思好友們宣布，我們已經向香港社會服務聯會(社聯)提交了成為會員的申請。這是一個機會讓社會認識以及認可我們的工作和服務，也是創造新的機會擴大我們與主流非政府組織的網絡，探索未來專案合作，並開拓更多未來申請撥款的機會，支持拓展更多創新的服務。此外，在提交申請的過程中，我們亦有機會反思本會運作架構，並改良管治模式。我很熱切期待能成功成為社聯的會員機構。

我要感謝董事局的支持、所有合作夥伴和組織的信任，以及在新冠肺炎疫情期間悉心陪伴每一位服務使用者的員工們。



We Believe
CHOICES in LIFE: Chances, Changes and Betterment

It is my honour to have been appointed as the Chairperson of the Board of Directors of C.H.O.I.C.E. for the term 2022-2024. I would like to take this opportunity to express our sincere thanks to Dr WAN Wai Yee (Vice Chairperson), Mr TONG Tak Fai Edmond (Secretary), Dr HO Man Sing (Treasurer), Dr HO Ka Yan Eva (Board Member), and Dr LAM Ka Wai Katherine (Board Member) who dedicated their time, effort, and expertise to serving the Board in the past year. We greatly appreciate their enormous contributions to the development of C.H.O.I.C.E.

I am pleased to inform the Board that C.H.O.I.C.E. has successfully applied for several projects from the AIDS Trust Fund, Beat Drugs Fund, and the Special Preventive Programme of the Centre for Health Protection, focusing on HIV prevention and supporting services for people living with HIV/AIDS in the past year.

In 2022, we successfully organised our Annual Conference with the theme "HIV Endgame - Innovations in HIV Prevention and Care". Eight local and overseas speakers and over a hundred participants joined the Conference. We were fortunate to receive the support of two pharmaceutical companies who recognised our work in HIV prevention and care.

I am particularly excited to inform the Board and friends of C.H.O.I.C.E. that we have submitted an application to become a member of the Hong Kong Council of Social Services (HKCSS). This is not only an opportunity for the community to recognise C.H.O.I.C.E., our work, and our service to society but also a chance to create new opportunities that we are not accustomed to having. I hope that we will be able to expand our network to mainstream NGOs, explore collaborations in future project initiatives, improve our service to our clients, and gain access to more funding sources in the coming years. Additionally, during the process of preparing our application to HKCSS, we have taken the opportunity to reflect on ourselves and enhance the governance framework of our organisation. I eagerly anticipate the acceptance of our application by HKCSS.

I would like to thank the Board of Directors for their support, the trust of all collaborators and organisations, and the dedication of staff who accompany service users during the COVID-19 pandemic.

2002

再思成立，為一所由義工主導的非牟利慈善機構，並展開性服務業的外展服務。
C.H.O.I.C.E. was established as a charitable non-governmental, volunteer-based organisation on 14th Aug 2002, and started reaching out to the local sex industry to provide outreach services.

2003

再思為本港首間為性工作者及其顧客提供梅毒及愛滋病毒抗體快速測試的非牟利機構。
Became the FIRST Hong Kong-based organisation to provide RAPID Syphilis and HIV antibody tests for sex workers and their clients.

2004

與香港中文大學合辦「香港女性性工作者及其顧客生理健康及行為研究」。
Conducted a community study on female sex workers and their clients' physical health and behaviours in collaboration with the Chinese University of Hong Kong.

與衛生署紅絲帶中心合辦外展活動「驕陽計劃」。
Launched an outreach project "Project Sunny" with Red Ribbon Centre, Department of Health.

2005

關注青少年跨境濫用藥物問題，開展邊境外展服務。
Started offshore outreach on the problem of cross-boundary substance abuse for youth.

2006

開展首個為年青男男性接觸人士社群而設的策略性網上服務。在香港愛滋病顧問局推動，成為「性工作者及其顧客群組」評估及召集人。
Launched the FIRST strategic internet intervention programme for the young men who have sex with men (MSM) community. Became the convener to plan and evaluate the policies catering for sex workers and their clients propelled by Hong Kong Advisory Council on AIDS.

2007

與香港中文大學合作，為懷疑感染或已感染性病的婦女開展輔導計劃。
Launched a counselling programme with the Chinese University of Hong Kong for females who were (or suspected to be) infected with STIs.

2008

擴展性病及愛滋病毒抗體測試服務予男男性接觸人士。
Started providing voluntary STI/ HIV testing and counselling service for the MSM community.

2009

擴展健康促進計劃至大眾。與香港大學持續進修學院及香港戒毒會合辦「到校教師培訓課程」，增強教師有關禁毒的知識。
Health promotion and education were further spread among public. C.H.O.I.C.E. launched an anti-drugs training programme for teachers in collaboration with the HKUSPACE and the SARDA to empower teachers on drug abuse issue.

2010

開展為青少年、家長及教師而設的「健康人生活動計劃」。
Introduced the "LiFE CHOICE programme" which is offered for the well being of youth, their parents and teachers.

2011

舉行世界愛滋病日活動「仁心妙韻」粵曲演唱會，向長者傳遞預防訊息。
Conducted a Cantonese Opera on the World AIDS Day to deliver HIV prevention information to the elderly.

「姊妹關懷行動」榮獲蘋果日報慈善基金頒發「出色服務獎」。
"SHE Project" was awarded "The Outstanding Service" by the Apple Daily Charitable Foundation.

2012

開設「DIY夢工場」，鼓勵婦女可有新的工作技能。
Established the "DIY Handicrafts Workshop" to equip women with new life skills.

2013

開展「男同志綜合禁毒服務計劃」，為男同志提供連貫性的預防濫藥服務。
與香港中文大學合作，進行針對男男性接觸者自我檢測(家用)測試及網上輔導研究。
Launched "Integrated Anti-drug Service Scheme for Gay Population"
Collaboration with the Chinese University of Hong Kong, initiated a randomized controlled trial to evaluate the efficacy of promoting home-based HIV testing.

2014

創立「珍珠社企」的社會企業，邀請服務使用者製作不同的手工藝品及首飾。
Launched a social enterprise, the "Pearl Project", to engage service users in making different handicrafts and accessories.

2015

舉辦「愛滋病研討會：愛滋病預防及治療」，邀請了10名本地、內地及國際的愛滋病專家作出分享。
C.H.O.I.C.E. organised "HIV/AIDS Conference : Emerging Issues in HIV/AIDS Prevention and Treatment" and assembled a panel of 10 local, mainland and international experts to share their views on HIV/AIDS issues.

2016

開展新的愛滋病病毒感染者關懷計劃 - 「連扣工程」，為感染者提供多元化的身心健康支援服務。
C.H.O.I.C.E. spearheaded the "LINKage of PLHIV to Care" Programme for people living with HIV (PLHIV), with a view to providing them with diverse and multi-faceted mental and physical health support services.

2017

開展全港首個免費的「快遞自助檢測 - 愛滋病病毒及性傳染病」，鼓勵年輕群組接受性健康檢查。
Launched the first HIV and STI tests by post "eChatiCheck" which provided free and confidential sexual health services to encourage the young generation to receive checks.

2018

2019 開展新的「性在有你 - 非華裔人士的性健康教育諮詢及愛滋病檢查計劃」，鼓勵少數族裔群組接受性健康檢查。
Launched in 2019, the "Know Your Status Programme" provided the ethnic minority communities with safe sex promotion, public campaign, safe sex kits and free rapid tests so as to encourage them to get tested.

2019

新型冠狀病毒疫情嚴峻，再思仍然保持開放及正常運作，並以預約形式繼續為有需要人士及高危社群提供服務。
Despite the severe outbreak of COVID-19, C.H.O.I.C.E. remained fully open and operated normally to provide full services to the high-risk communities and those in need by appointment.

2020

開設「再思音樂台」，透過音樂創作，加深公眾人士對愛滋病及性健康服務的認識，並且以《再思之歌》推廣「再思」的測試服務。
Launched the "C.H.O.I.C.E. Music Channel" to enhance the public awareness of services relating to HIV and sexual health, and used "Everyone Has Choices" to promote our testing service.

2021

為消除對愛滋病感染者的歧視及表達對感染者的支持，我們邀請了林一峰先生為我們創作及獻唱歌曲《誰若有力就抱緊》。
To eliminate discrimination against HIV/AIDS infection and to show support for PLHIV, a song titled 《誰若有力就抱緊》，written and performed by Mr. Chet Lam, was released.

2022

組織架構 Organisation Structure

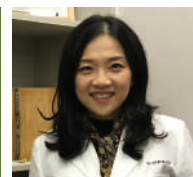


董事局名單
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主席 Chairperson
(由 Since 24/09/2022)



尹慧兒醫生 Dr Wan Wai Yee
副主席 Vice Chairperson



湯德輝先生 Mr Tong Tak Fai
秘書 Secretary



何文勝博士 Dr Ho Man Sing
財務 Treasurer



何家欣博士 Dr Ho Kai Yan
委員 Member
(由 Since 24/09/2022)



林家慧博士 Dr Lam Ka Wai
委員 Member
(由 Since 24/09/2022)



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Chief Executive Officer

何碧玉女士 Ms Ho Pik Yuk Shara

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Hon. Auditor

廖建平會計師事務所 Alcott Liu CPA Limited

義務律師
Hon. Lawyer

馬致聰先生 Mr Ma Chi Chung Ronald

關於再思 About C.H.O.I.C.E.

簡史 Brief history

本會成立於2002年，根據公司條例正式成為獨立法人團體（擔保有限公司），並獲稅務局按稅務條例批准成為豁免繳稅的慈善機構，是專注推廣健康及疾病預防的非政府社會服務機構。

我們致力走進社群，揉合專業服務，提供全人關懷，並努力開拓與時俱進的創新服務。我們因應社會的需要，不斷改進服務的內涵和調整服務對象，由初期主要為高危的弱勢社群提供服務，擴展到青年群組及公眾。

C.H.O.I.C.E. was established in 2002 and has officially been incorporated (limited by guarantee) under the Companies Ordinance and registered as a tax-exempt charitable organisation under the Inland Revenue Ordinance.

C.H.O.I.C.E. is a non-governmental social service organisation which focuses on promoting health and disease prevention. We are committed to reaching out to the community and integrating professional services to provide holistic care, and we strive to develop innovative services that keep pace with the times. In response to the needs of society, we keep improving the content and the target audience of our services. From mainly providing services to high-risk disadvantaged groups in the initial stage, we have expanded our services to youth groups and the general public.

我們的抱負

本會致力推廣社區關懷，將健康訊息遍佈社區及建立正向人生態度。我們鼓勵服務使用者發揮自助互助的精神，透過社群參與及義務工作，從而建立一個關愛包容的社會。

Our Vision

We strive to promote care, healthy lifestyle and positive attitude in the community. Through community engagements and volunteer work, we empower our service users to build a mutually supportive and caring society.

我們的信念

「再思」堅信任何的人生階段，都可以有選擇，生命也可改變，故機構的英文定名「C.H.O.I.C.E.」，中文名為「再思」。

Our Values

The name "C.H.O.I.C.E." comes from our conviction that there are choices in every stage of life, and that life can be changed and made better.

我們的使命

我們致力推動「促進健康、預防疾病」的訊息，鼓勵公眾加強對健康生活的認識，從而養成良好的生活模式，建立健康社區。

Our Mission

We are dedicated to promoting health and disease prevention and enhancing public awareness towards healthy living and lifestyle for the good of the community in Hong Kong.

服務摘要

Service Highlights

綜合社區服務 – 愛滋病/性病預防計劃 Integrated Community-Based Intervention for HIV/AIDS/STI Prevention and Care Programme

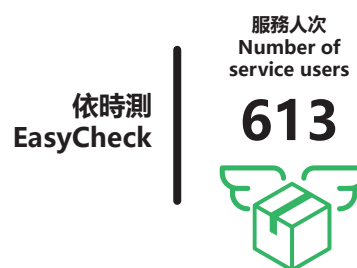
由愛滋病信託基金贊助，本會為高危社群（包括男男性接觸者、女性性工作者及其顧客）提供愛滋病和性病的預防及支援服務，包括外展、快速測試及輔導等。另外，我們亦舉行公眾教育活動，提高社區對愛滋病 / 性病的預防意識。

With sponsorship of the AIDS Trust Fund, we provide HIV/STIs prevention and support services for high risk groups, including MSM, sex workers and their clients, etc. Our work includes outreach, rapid testing and counselling etc. We also conduct public education programmes to enhance the awareness of HIV/STIs prevention in the community.



快速測試服務

以「儘早知，及早醫」理論作框架，為有需要人士提供免費、匿名、保密的快速測試及輔導服務，包括：愛滋病病毒、梅毒等快速檢測，讓服務使用者了解自己的身體狀況，並得到相關的健康資訊，有助預防或及早得到治療。



Rapid Testing Service

“Test Early, Treat Early” strategy is used as the framework to provide free, anonymous, and confidential rapid testing and counselling services for individuals in need. Our services include rapid testing for HIV, syphilis etc., allowing service users to understand their health status and obtain relevant health information, thereby enabling prevention or early treatment if applicable.

快遞自助檢測 — 「依時測」

在新冠疫情下，本會仍然持續不斷地為不同社群提供適切的服務。為了加強推廣愛滋病測試到隱蔽社群，讓更多有需要人士及高危群組能接受服務，本會推行高私隱度的「依時測」愛滋病病毒自助檢測服務。大眾於網上成功登記後，我們會聯絡並免費郵寄愛滋病病毒自助檢測套裝至自選地點，安全又舒適，我們亦會同時提供網上指導及支援。如發現受感染情況或懷疑個案，我們將安排懷疑受感染者安排懷疑受感染者進一步接受核實檢測或跟進治療。

“EasyCheck” HIV Test by Courier Service

To expand HIV testing to hidden communities so as to reach more high risk groups, we launched “EasyCheck”, our HIV Self-testing programme. Upon successful online registration, individuals will receive a free HIV self-testing kit delivered to their preferred address, ensuring privacy. Simultaneous online instruction and support are also available. If an infection is detected, further testing and follow-up treatment will be arranged.

關注愛滋病病毒計劃 HIV Awareness Campaign

衛生防護中心表示，2021年8月至2022年6月期間，女性性工作者感染愛滋病病毒的新增個案異常增加，涉及5名年齡介乎51至63歲的女性，她們大部分曾於油尖旺區和深水埗區提供性服務。故此，我們與青島一同攜手協辦「關注愛滋病病毒計劃」，以應對社會短期內急升的愛滋病病毒感染個案；計劃針對但不限於油尖旺區及深水埗區的女性性工作者，由受訓練的工作員為目標群體提供愛滋病病毒及梅毒測試，並透過各種誘因提升她們接受測試的動機。

According to the Centre for Health Protection, the number of newfound HIV infections among female sex workers increased abnormally from August 2021 to June 2022, involving five women aged between 51 and 63, most of whom had provided sexual services in Yau Tsim Mong and Sham Shui Po Districts. Therefore, we have joined hands with Action for REACH OUT (AFRO) and co-organised the "HIV Awareness Campaign" to cope with the rapid surge of HIV infections in society. The project targeted but not limited to female sex workers in Yau Tsim Mong and Sham Shui Po Districts. Trained staff provided HIV and syphilis testing for the target group and used various incentives to increase their motivation to take the test.



本計劃亦訪問了101名來自油尖旺區和深水埗區的女性性工作者，年齡由25至60歲以上不等。問卷涵蓋數個部分，內容包括其工作模式、接受測試的頻率、對愛滋病病毒和性病的認知等。

年齡在45歲以下的受訪者佔全部受訪者的50%，同時大部分受訪者的入行年資較淺，有50%受訪者的工作年資少於3年，她們大多受著新冠疫情影響，失去原來的工作後，才從事性服務行業，因此對愛滋病的基本認識不足。

此外，結果顯示有30%受訪女性性工作者表示從未接受過愛滋病病毒測試，反映女性性工作者接受測試的頻率和安全意識偏低，或會導致延遲發現感染性病的情況發生。

We invited 101 female sex workers from Yau Tsim Mong and Sham Shui Po Districts, aged from 25 to 60 or above. The questionnaire covered several parts, focusing on work patterns, condom use habits, testing frequency, and knowledge of HIV and STIs.

Around 50% of respondents were aged under 45, and most respondents had limited years of experience such that 50% of respondents had sex work experience under three years. Most of them lost their original job due to the pandemic and only started working in this industry in these few years, hence they lacked the basic understanding of HIV.

Moreover, the result showed that 30% of respondents had never received an HIV/STIs test before, applying that the frequency of testing as well as the awareness of sexual health were inadequate for them, which might lead to late discovery of infection.

外展服務

本會一直致力服務高危弱勢社群，主動接觸男男性接觸者、女性性工作者及其顧客，走進男男性接觸者聚集的場地、女性性工作者的工作場所、及其顧客流連之所，向他們提供關於愛滋病和性病的正確知識。

透過社區外展及網上外展服務，團隊希望提高社群對愛滋病病毒和性病的認知和鼓勵社群定期接受愛滋病病毒和性病檢查，消除社群對愛滋病病毒和性病的誤解，以促進社群的改變。

We have been dedicated to serving the high risk populations, including MSM, sex workers and their clients, etc. We step into venues where our community members often gather or work and provide them with information about HIV and STIs.

Through community and online outreach, we hope to raise people's understanding of HIV/STIs, encourage the habit of regular testing, as well as eliminate the misunderstandings and stigma on HIV and STIs, in order to foster changes in our society.



網上外展

本會因應新冠疫情及政府實施不同健康政策，包括限制社交距離，導致只能提供有限度的外展服務。相反地，本會加強網上外展服務，尋找更多隱藏在網絡的目標對象。團隊在不同的網絡社交平台 and 手機交友應用程式按著不同需要和情況提供網上支援和諮詢。過程中，除了為網絡使用者解答對性健康的疑問外，我們還發現不少服務使用者因缺乏與人溝通而導致情緒困擾，我們會嘗試聯絡或約見他們，以提供輔導及支援，紓緩他們的不安和焦慮情緒。

Online Outreach

Due to the pandemic and the government's anti-epidemic measures, we were forced to limit our provision of community outreach. Therefore, we engaged more in online outreach services instead which helped us spot out the target populations hidden in the virtual world. Our team set up official pages and accounts on different social platforms and dating apps and provided online support for different needs. We found many service users with emotional distress due to issues in interpersonal relationships.

社區外展

疫情緩和後來，本會逐步回復外展服務，繼續在宣傳性健康和預防性病方面扮演著重要的角色，與社區保持緊密聯繫，為大眾提供正確的性病資訊、提供服務支援和資源分享。相信透過這些努力，可以提高大眾對性病的認識，減少性病的傳播，並促進社區的性健康。

Community outreach

As the pandemic receded, we gradually resumed community outreach and played our role in promoting sexual health and HIV/STIs prevention. We maintain close connections with the community to provide accurate information on HIV/STIs and adequate services and resources. With these efforts, we believe we can raise people's understanding of HIV/STIs, reduce the infection rate and enhance the overall sexual health of the community.



彩虹活動

本會舉辦「彩虹活動」予男同志參加，為他們提供一個實體且開放的環境，讓他們可以自由地分享彼此的經歷和挑戰。我們定期在中心舉辦各種不同類型的活動以滿足不同興趣，如桌上遊戲和藝術工作坊等。透過遊戲和活動讓大家在坦誠的關係中聯繫，互動及成長。同時，加強男同志之間的交流，並協助他們提升自我形象和建立朋輩間的支持。

Rainbow Activities

We organise "Rainbow Activities" for the gay and MSM community, providing them with a face-to-face and open environment where they can share their experiences and challenges freely. We regularly organise a variety of activities at our centre to cater for different interests, such as board games and art workshops. Through these activities, participants can connect, interact and have growth together in a sincere relationship. Meanwhile, strengthening communications among community members can help build mutual support and improve self-image.

姊妹支援服務

部分女性性工作者表示在疫情期間在生活上面對種種經濟困難。當面對照顧家庭、管教子女、親子關係等各種問題時，不少壓力會隨之出現，困擾的情緒難以紓緩。有見及此，本會提供熱線服務及線上平台讓她們能有一個安全和開放的空間，與輔導員分享自己的困惑和問題。同時，亦會向她們提供支援及情緒管理和減壓技巧，希望能夠改善她們的生活狀況。

Female Sex Workers Support Service

Some of the female sex workers shared with us that it had been difficult for them to make a living during the pandemic. Different issues like caring for the family, parenting and handling the relationship with their children also added stress for them. Therefore, we provided a hotline and online channels as a safe and open space for them to ventilate their problems and feelings with our counsellors. We would also share some skills on emotion management and stress reduction with them to hopefully improve their quality of life.

宣傳健康資訊活動

為提高公眾對愛滋病及性病的認識，本會舉行一系列的公眾宣傳活動。團隊會在公眾場所、大專院校和大型活動等設置街站或攤位，派發安全套和教育單張，並向公眾人士及年輕群組宣傳愛滋病和性病相關的資訊，以增加各社群對性健康、性傳染疾病的認識，並提高他們預防疾病的意識。

Publicity Campaign

To enhance public awareness of HIV and STIs, we organised various public education programmes. Our team set up booth in public area, tertiary institutions and big events for distributing safer sex kits and leaflets, as well as delivering sexual health information to the young community and general public so as to increase the understanding of HIV/STIs and sexual health in different communities, and raise their awareness of preventing infections.

連扣工程 LINKage to Care – POZ

很多愛滋病感染者仍然對愛滋病感染及治療存有很多誤解，精神健康亦受到困擾。長期的精神困擾增加高危行為以及拒絕接受治療。有見及此，我們提供連扣工程服務。連扣工程計劃是為愛滋病感染者亦及其家人提供支援，包括互助小組、輔導服務、綜合健康檢查及多元化資訊平台。

Many people who are infected with HIV (PLHIV) still have many misunderstandings about HIV infection and treatment, which also affect their mental well-being. Long-term stress increases high-risk behaviours and make them less likely to receive treatment. As such, we provided the LINKage to Care service. The LINKage to Care scheme aims at providing support to PLHIV and their family. Services include POZ Group, counselling service, comprehensive health checks and the provision of diverse information portals.

綜合健康檢查 Comprehensive Health Check

服務人次
Number of
service users

> 100



輔導及 互助小組 Counselling and Poz Group

服務人次
Number of
service users

> 240



綜合健康檢查

本會為服務使用者提供全面的綜合健康檢查，除了提供愛滋病毒和梅毒的快速測試，過去亦曾提供乙型肝炎、丙型肝炎、淋病、衣原體等篩查，還為愛滋病毒感染者及其伴侶提供多項健康檢查，包括：CD4 淋巴細胞檢測、血脂、血壓檢查、脂肪與肌肉分佈評估，以及提供飲食營養資訊。特別是脂肪與肌肉分佈評估，檢測脂肪分佈、肌肉分佈、內臟脂肪含量、水量評估以及體格等，有助服務使用者更全面了解自己的身體狀況並提升自我管理的意識，以便安排更適切的支援服務。

Comprehensive Health Check

We provides comprehensive health checking services. Apart from HIV and Syphilis rapid tests, we have provided Hepatitis B and C rapid tests as well as gonorrhoea and chlamydia testing in the past. For people living with HIV (PLHIV) and their partner, we also provide CD4 lymphocyte test, blood lipid, blood pressure tests, body composition analysis and diet and nutrition information. Body composition analyser is able to measure fat and muscle distribution, visceral fat indicator, total body water, etc. and allows service users to further understand their health status so as to arrange more appropriate support services for them.

Health Screening & Monitoring Equipment
健康檢查儀器



輔導及互助小組

本會為愛滋病病毒感染者提供個案輔導，協助新確診感染、受情緒困擾或用藥出現困難的感染者正面地處理情緒和壓力，並適應定時服藥的習慣及藥物的不良反應，有需要時可提供伴侶輔導服務。在2022年間，本會為愛滋病病毒感染者及其伴侶提供超過240次個案輔導及陪診服務。另外，我們定期舉行感染者互助小組活動，讓他們於朋輩互相支持，實踐健康生活。

多元資訊及支援平台

多元資訊平台以不同方式提供有關愛滋病感染風險及治療等資訊，協助愛滋病病毒感染者積極面對治療和重拾健康人生。

我們製作《愛在你左右》短片，講述一名剛感染愛滋病病毒感染者在面對健康、治療和藥物方面的疑慮，並邀請了林緯遜醫生透過短片回應問題，帶出現時治療的選擇和成效，鼓勵積極治療。

今年，我們邀請了唱作人林一峰先生為我們創作及獻唱歌曲《誰若有力就抱緊》，內容講述感染了HIV的主角在經歷過孤獨感、哀傷和絕望後，找到能一起面對、給予愛和關懷的人，慢慢走出灰暗，迎來盼望。我們希望透過此曲表達再思願意擔當同行者的心，帶出對HIV感染者的支持，並希望消除大眾對感染者的誤解和歧視，創造一個充滿愛的社會。

Counselling and Poz Group

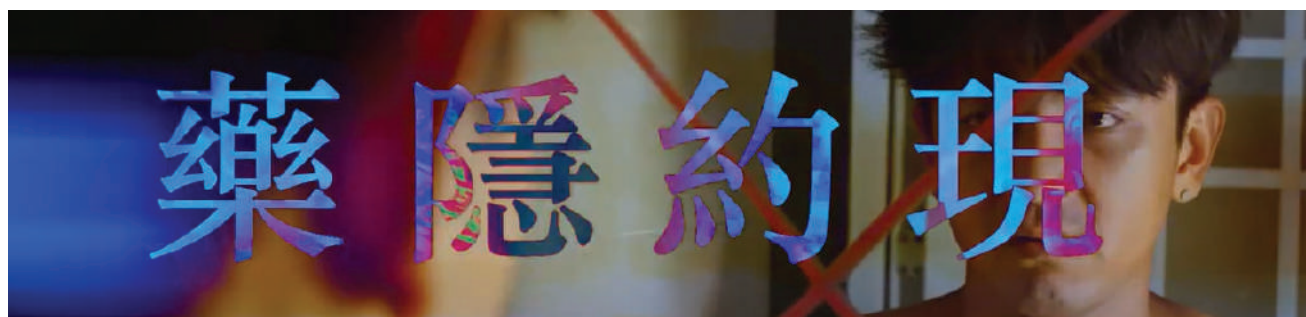
We provides counselling services for PLHIV, assisting those who are newly diagnosed, those who experience difficulties in drug compliance and those with emotional issues to cope with stress, and helping them adapt to the treatment. In 2022, we conducted over 240 times of counselling sessions and escort services for PLHIV and their partners. In addition, we have Poz Group gatherings regularly to allow mutual support between peers and encourage them to put healthy living into practice.

Diverse Information Portals

Through different channels, we provide information about the risks of infection of HIV and the treatment methods, helping PLHIV to face the treatment and their life more positively.

We had produced the video "LOVE Is All Around", talking about the questions and doubts faced by a newly infected PLHIV. In the video, Dr Wilson Lam also responded to these questions and brought out the message of active treatment.

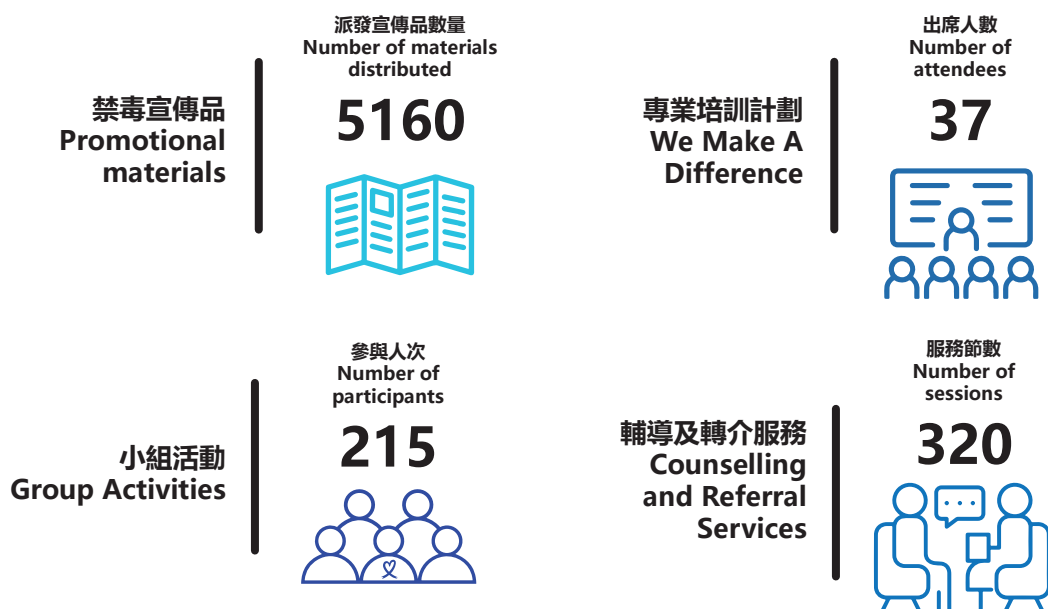
This year, we invited singer-songwriter Mr Chet Lam to write and perform a song titles "誰若有力就抱緊", which described the mental journey of a PLHIV. We hope to present our dedication to be with PLHIV, show our support as well as eliminate the misunderstandings and stigma against PLHIV.



我和Barry有個藥會

「綜合預防及治療服務計劃」獲禁毒基金撥款，由2020至2023年為男同志社群預防濫藥工作及戒毒輔導服務，服務範圍廣泛。本會以外展形式，包括社區外展和網上外展，在各類型的娛樂場所、社交平台和交友軟件，主動接觸男同志社群及濫藥人士。本會透過個案輔導和不同的預防性及治療小組，增加男同志社群對於濫藥預防意識及提升處理濫藥問題的動機，發揮正面的影響。過程中我們亦為有需要的濫藥人士提供精神科轉介服務。同時，本會希望透過「朋輩輔導員」培訓活動，讓服務使用者建立朋輩支援網絡，並向他們宣揚正向健康人生。另外，我們安排專業培訓以增加機構間的互動和交流，共同為男同志社群提供適切的服務

With funding and support from the Beat Drugs Fund, the "Integrated Anti-Drug Service" has been providing a variety of drug prevention and addiction counselling services for the gay community from 2020 to 2023. We conduct community outreach and online outreach, reaching our target populations at different venues, online social platforms and dating apps. Through casework counselling and various preventive and therapeutic groups, we hope to enhance service users' awareness of drug prevention, as well as to strengthen their motivation in handling their situation on substance abuse. We would also make referrals to psychiatry for individuals in need. At the same time, through the 'Peer Counsellor' training programme, service users can build a peer support network in which positive and healthy living is promoted. In addition, we organised professional training to initiate interactions and exchanges with other organisations so as to work together in providing the right services for the community.



專業培訓計劃 We Make A Difference

本會於2022年9月17日舉行了專業培訓計劃“We Make A Difference”，是次計劃在網上舉行，除了邀請到精神科醫生方若君醫生和臨床心理學家譚嘉恒博士分享本地同志社群藥物濫用情況，而再思總幹事何碧玉女士亦介紹了「綜合預防及治療服務計劃」的內容及分享輔導經驗，並且邀請了兩名個案分享他們的故事，由初次接觸毒品到影響生活及健康，及後從失控到遠離毒品的經歷。

公眾教育短片製作 《我和Barry有個藥會》//《藥隱約現》

為了提高公眾對Chem Fun和毒品的認識，本會在獲禁毒基金撥款下製作了兩段關於濫用藥物和成癮的短片，分別是《我和Barry有個藥會》和《藥隱約現》。《我和Barry有個藥會》短片講述同工處理個案時的角色和濫用藥物人士面對誘惑中的抉擇；《藥隱約現》是根據真人真事改編，內容講述一名CF圈中人的心路經歷。

Care小組

Care小組為對外開放的團體活動，活動包括參觀戒毒院舍、團隊建立等。每項活動亦有受訓的義工參與，透過正面的同儕影響以加強並推動禁毒文化。此計劃的目的是識別高風險人士和藥物濫用者，以鼓勵他們盡早尋求幫助，以及將他們的生活重心逐漸轉移到健康的社交活動上，減少對毒品的依賴。

運動「郁一郁」

此活動邀請參加者們一起「郁一郁」，透過伸展、瑜珈、泰拳及核心肌肉訓練等運動，建立常規有序的生活模式，更希望參加者開始培養運動習慣及正向價值觀，逐漸遠離毒品。心理方面，運動能為參加者改善自我形象、舒緩壓力、增強正面情緒及減低心癮；生理方面，運動能促進腦神經元的新連結，有助逐漸修復因藥物濫用而受損的腦部，並維持良好認知健康。

輔導及轉介服務

在識別高風險人士和藥物濫用者後，我們會邀請他們到中心接受輔導服務，透過共同設立輔導目標，以減低或停止對藥物使用的依賴。此外，若發現服務使用者有精神健康上的需要，我們亦會轉介他們到訪公營或私家精神科醫生進行醫療評估及治療，以提供適切的援助。

Professional Training and Sharing “We Make A Difference”

On 17 September 2022, we held the online Professional Training and Sharing “We Make A Difference”. Dr Fong Yeuk Kwan, Psychiatrist, and Dr Barry Tam Ka Hang, Clinical Psychologist, were invited to share about the situation of substance abuse in the local gay community. Moreover, Ms Ho Pik Yuk Shara, Chief Executive Officer introduced the Integrated Anti-Drug Service and shared her experience in counseling. Also, we invited two service users to share their stories about how their experience with drugs affected their life and health and how they dealt with and went through the addiction.

Public Education Videos “WE HAVE A “DRUG DATING” WITH DR BARRY” & “CFrough See Through”

To enhance public awareness of Chem Fun and substance use, we produced two videos about substance abuse and addiction under the sponsorship from Beat Drugs Fund, which are “WE HAVE A [DRUG DATING] WITH DR BARRY” and “CFrough See Through”. The former talks about the struggles of Chem Fun users and how we work with them in coping with this issue, while the latter, based on a true story, is about the experience and real feelings of a Chem Fun user.

Care Group Programme

We held open group activities, including visits to drug treatment and rehabilitation facilities, team building activities, etc, and involved trained volunteers to strengthen the anti-drug message through positive peer influence.

“Make A MOVE”

Through exercises like yoga, Thai boxing and core training, it is hoped that participants can develop exercise habits, cultivate a positive lifestyle, and stay away from drugs. On the mental health side, exercise can help them improve their self-image and reduce drug dependence. On the physical health side, regular exercise can facilitate the recovery of the brain damaged by substance abuse, and help maintain a good cognitive health.

Counselling and Referral Services

Upon identifying high risk individuals and substance users, we would invite them for counselling service to achieve and maintain abstinence or their treatment goals. Furthermore, we refer substance abusers with mental health problems to public and private psychiatrists for medical assessments and treatments.

健康人生活動計劃 LiFE CHOICE Programme

「健康人生活動計劃」主要為青年、家長、教師和社區健康工作者而設，在不同社群內推廣健康的信息，宣揚及推動正向生活態度。

The LiFE CHOICE Programme is mainly designed for teenagers, parents, teachers and community health workers. It aims at promoting and cultivating positive and healthy living through a number of social health promotion campaigns.

專業人員培訓

公共衛生狀況、數據時常有變動和更新，透過與其他社區健康工作者交流及分享經驗，讓不同社群掌握公共衛生的最新資訊。同時，再思亦多次獲邀於實體和網上講座中分享，主要為醫護人員及其他社會服務工作者講解性病、愛滋病和毒品等知識和資訊，並以前線服務的經驗來分享相關個案的輔導理論和技巧。

Training for the Professionals

To enable us to catch up with the latest information on public health, we value exchange and sharing of experience with other community health professionals. Our team is often invited to join seminars, both face-to-face and virtual, as a guest speaker to share with medical practitioners and social service workers about HIV/STIs and drugs, as well as case counselling skills and theories from frontline service experiences.

服務研習計劃

「服務研習計劃」是實踐傳承、教育的重要一環。透過與多間本地大專院校合作，為大專學生提供前線實習體驗，讓他們走出校園，活用所學，親身了解社會現象，並以行動回饋社群的需要，為日後投身相關行業作適切的準備。

Service Learning Programme

Understanding the importance of education and knowledge transfer, in collaboration with a number of local tertiary institutions, We has launched "Service Learning Programme" to provide students with frontline experiential learning, which allows them to explore social phenomena outside school, to apply what they have learnt in class and to take action to respond to the needs in the community, hence to better prepare themselves for working in relevant industries in the future.

義工訓練計劃

除了與大學合作，再思亦定期舉辦義工訓練工作坊，對外招募及培訓新義工，在2022年，中心培訓了近20名義工，除了提高他們對預防愛滋病及性病的意識，還為他們提供不同的外展、小組活動、參觀等體驗，豐富他們的生活經驗，並培養正向的人生價值觀。

Volunteer Training Workshops

We organises "Volunteer Training Workshops" regularly to recruit and train new volunteers. In 2022, around 20 volunteers had completed training with us. We provided them with different community experiences, such as outreach, group activities and visits, to enhance their awareness to prevent HIV/STIs, as well as to enrich their life and cultivate their positive attitudes.

與本地（及外地）機構分享交流

在新冠疫情期間，我們仍然積極地以網上會議與本地和外地機構進行交流和合作，以進一步完善愛滋病防治工作。

Local (and Overseas) Exchange

During COVID-19 pandemic, we still actively participated in exchanges and collaborations on AIDS prevention and treatment with other local and overseas organisations via online meetings.

珍珠社企 Pearl Project

2015年創立的「珍珠社企」是一個讓服務使用者展現自我的平台，當中邀請不同的服務使用者參與及製作不同的手工藝品和珍珠首飾，讓她們有機會建立新的工藝技能，以及發掘更多潛能和優勢。

Pearl Project

In 2015, We launched a platform called "Pearl Project" for our service users to showcase their talents. In this project, we engage service users to make different handicrafts and pearl accessories, providing them with the opportunity to develop craft skills and to explore their interests and potential.

愛滋病研討會 HIV/AIDS Conference

愛滋病研討會2022

本會於2022年11月25日舉辦了第7屆的愛滋病年度研討會。是次會議在線上舉行，旨在提供愛滋病和性病傳播感染的最新治療和預防措施，並增加醫護人員對性弱勢群體的知識和敏感度。我們很榮幸邀請到再思主席何景文醫生和香港特別行政區衛生署衛生防護中心總監徐樂堅醫生作為開幕致辭嘉賓，以及邀請了6名本地及國際的愛滋病專家及前線醫護人員作為是次研討會的嘉賓，分享現今不同國家、地區在愛滋病預防及治療上的新發展。是次研討會有107名人士參加。

HIV/AIDS Conference 2022

On 25 November 2022, we organised the 7th annual conference on the issue of HIV/AIDS prevention and treatment. The annual conference aimed to provide updates on HIV and STI treatment and prevention and to enhance health professionals' knowledge of and sensitivity towards sexual disadvantaged groups. It was our honour to invite Dr Ho King Man, our Chairperson and Dr Tsui Lok Kin, Edwin, the Controller of the Centre for Health Protection, Department of Health, HKSAR, to give welcome speeches. Also, we assembled a panel of 6 local and international HIV/AIDS experts and frontline medical practitioners as guest speakers to share their views on the latest development of HIV prevention and treatment in different countries and regions. 107 attendees registered for the conference.



Introduction and Welcoming Speech

Dr HO King Man, Chairperson of C.H.O.I.C.E.

Opening Speech

Dr TSUI Lok Kin Edwin, Controller, Centre for Health Protection, Department of Health

Status and challenge of internet-based HIV prevention intervention in China and AP Region

Dr GUO Wei, Strategic Information Adviser, UNAIDS China Office

Scale-up, preferences, and future possibilities for HIV pre-exposure prophylaxis (PrEP)

Dr Benjamin R. BAVINTON, HIV Epidemiology and Prevention Program, Kirby Institute, UNSW Sydney

An update on the local HIV epidemiology and an integrated approach for the prevention and control of viral hepatitis among PLHIV

Dr WONG Chun Kwan Bonnie, Special Preventive Programme, Department of Health

Monkeypox and COVID-19: Shall PLHIV be alert?

Dr CHAN Man Chun Jacky, Infectious Disease Centre, Department of Medicine and Geriatrics, Princess Margaret Hospital

Aging well with HIV

Dr LUI Chung Yan Grace, Department of Medicine and Therapeutics, The Chinese University of Hong Kong

STI in Social Hygiene Clinic

Dr CHENG Kim Fung, Social Hygiene Service, Department of Health





誰若有力就抱緊

今年我們與唱作人林一峰先生合作，推出由他創作及獻唱的歌曲《誰若有力就抱緊》。藉著此曲，我們希望推廣「測不到=傳不到」（U=U）的訊息，並消除大眾對HIV感染者的誤解和污名。定期測試，積極治療，我們每一個人都值得被愛和接納。

In collaboration with local singer-songwriter Mr Chet Lam, we published the song "誰若有力就抱緊", written and performed by Lam. The song aims to promote the message of "Undetectable = Untransmittable" (U=U), hence eliminate the misunderstandings and stigma against PLHIV. Get tested regularly, face treatment positively. We all deserve love and acceptance.

再思之歌 Everyone Has CHOICES



本會與本地新晉女歌手黃詩婷合作，推出歌曲《Everyone Has Choices》。本會希望透過歌曲加深公眾人士對愛滋病及性病測試服務的認識，鼓勵有需要人士接受愛滋病及梅毒快速測試，以及宣傳愛滋病毒量為不可檢測水平就不會傳播（測不到=傳不到）的訊息。

We collaborated with local singer Wong Sze Ting on the production of the song "Everyone Has Choices". We hope to enhance public understanding on HIV testing, encourage the high-risk communities to get tested and promote the message of "Undetectable = Untransmittable" (U=U) through this song.

愛在你左右
LOVE Is All Around

藥隱約現
CFrough See Through



本會邀請到林緯遜醫生參與製作本會的微電影《愛在你左右》。故事主人阿Sam感染了愛滋病病毒，作為初感染者的他心裡有很多疑慮，包括對藥效、藥物依從性、本港的治療選項以及病後護理等問題。林醫生聆聽阿Sam的問題並一一解答，亦消除了電影中眾人對感染愛滋病病毒的誤解。

在禁毒基金支持下，本會亦拍攝了另一部微電影《藥隱約現》。是次電影透過Chem Fun玩家的第一身經歷，反映濫藥的後遺症，包括出現幻覺、幻聽及焦慮等等。男主角得到幫助後，逐漸找尋到屬於自己的路。本會希望透過這部電影，剖析濫藥人士濫藥的成因、戒毒的動機、以及致使他們求助的動力。只要尋求適當的協助，所有人都能重新找到健康幸福的人生。

We invited Dr Wilson Lam to participate in our micro-movie "LOVE Is All Around". In the story, Sam is newly infected with HIV and he has many questions and worries, including doubts about the efficacy of HIV treatment, drug compliance, treatment options, follow-up healthcare services in Hong Kong, etc. Dr Lam responds to his questions and clarifies everyone's misunderstandings about HIV.

Sponsored by the Beat Drugs Fund, we produced another micro-movie "CFrough See Through". In this movie, a Chem Fun (CF) player talks about the side effects of substance abuse, such as hallucination, auditory hallucination and anxiety. At the end, he finds his way out by seeking help. The movie discusses the causes of substance abuse, the motivations to quit and the incentives to seek help. With the right support, everyone can have a healthy and happy life by taking the first step to change.

有感而發
Just had a thought

愛到最後
Love till the end



我們與學生陳子銘合作，創作了《有感而發》及《愛到最後》兩條音樂短片。《有感而發》講述一個男孩回憶當初種種片段，在面對過去和期盼將來之間掙扎徘徊；《愛到最後》講述男主角終於開展新的戀情，但被男朋友無意發現他是HIV感染者的身份，面對這種複雜的心情，他們的結局又會如何呢？

We collaborated with artist Slept Kid to produce two music videos "Just had a thought" and "Love till the end". In "Just had a thought", our protagonist is having a stream of flowing memories which triggers him to face his past, while "Love till the end" narrates him beginning a new relationship and being discovered by his partner that he is HIV-positive. With complicated feelings towards each other, how would their ending be?

財務撮要

Financial Report

STATEMENT OF INCOME AND EXPENDITURE AND OTHER COMPREHENSIVE INCOME

收入和支出及其他綜合收入表

FOR THE YEAR ENDED 31 DECEMBER 2022

	2022 HK\$	2021 HK\$
INCOME		
Donation income	52,200	1,200,000
Sponsorship income	600,000	900,000
Charity sales	-	31,500
Bank interest income	6,374	118
Exchange gain	-	16
Sundry income	-	1,129
	658,574	2,132,763
PROJECT GRANTS	4,065,420	4,066,812
PROJECT EXPENDITURES	(4,430,578)	(4,143,830)
	(365,158)	(77,018)
	293,416	2,055,745
ADMINISTRATIVE EXPENDITURES		
Activity service fee	-	3,180
Agency fee	17,500	-
Bank charges	1,955	1,620
Building management fee	49,358	10,500
Center activities	-	6,984
Electricity and water	24,591	8,882
Insurance	37,108	29,201
Office accessories	14,383	6,598
Operating lease rental on land and buildings	368,419	246,000
Less: rental classified under project expenditures	(312,750)	(230,750)
Lab test and accessories	-	106,589
Media and online promotion	450,000	177,269
Repairs and maintenance	105,357	-
Printing	6,965	6,757
Staff allowance	839	1,783
Sundry expenses	7,774	6,541
	(771,499)	(381,154)
(DEFICIT) / SURPLUS AND TOTAL COMPREHENSIVE (LOSS) / INCOME FOR THE YEAR	(478,083)	1,674,591

STATEMENT OF FINANCIAL POSITION

財務狀況表

AS AT 31 DECEMBER 2022

	2022 HK\$	2021 HK\$
CURRENT ASSETS		
Rental and other deposits	133,022	53,800
Sponsorship fee receivable	300,000	-
Prepayments	10,794	257,416
Bank balances	9,644,026	10,924,307
	10,087,842	11,235,523
CURRENT LIABILITIES		
Receipts in advance	(1,940,449)	(3,067,759)
Accruals and other payables	(545,333)	(87,621)
	(2,485,782)	(3,155,380)
NET ASSETS	<u>7,602,060</u>	<u>8,080,143</u>
RESERVES		
Accumulated funds	<u>7,602,060</u>	<u>8,080,143</u>

STATEMENT OF CASH FLOWS

現金流量表

FOR THE YEAR ENDED 31 DECEMBER 2022

	2022 HK\$	2021 HK\$
CASH FLOWS FROM OPERATING ACTIVITIES		
(Deficit) / surplus from operations	(478,083)	1,674,591
Increase in rental and other deposits	(79,222)	-
Increase in sponsorship fee receivable	(300,000)	-
Decrease / (increase) in prepayments	246,622	(247,935)
(Decrease) / increase in receipts in advance	(1,127,310)	1,220,386
Increase / (decrease) in accruals and other payables	457,712	(196,941)
	<hr/>	<hr/>
Net cash (used in) / generated from operating activities	(980,281)	2,450,101
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR		
	<hr/>	<hr/>
	10,924,307	8,474,206
CASH AND CASH EQUIVALENTS AT END OF YEAR		
	<hr/>	<hr/>
	9,644,026	10,924,307
Analysis of cash and cash equivalents:		
Bank balances	<hr/>	<hr/>
	9,644,026	10,924,307

鳴謝

Acknowledgement

鳴謝 Acknowledgement

我們衷心感謝下列機構、團體、部門及個別人士對本會的捐助及支持。倘有錯漏，敬祈見諒。
We would like to express our gratitude to the following companies, organisations, departments and individuals for the generous donation and support to our services. Should there be any missing, please accept our apologies.

AIDS Trust Fund	Lau Tak Fai Joseph
Alcott Liu CPA Limited	Lee Man Po
Beat Drugs Fund	Lee Shui Shan
Benjamin R. Bavinton	Ma Chi Ching Ronald
Chan Man Chun Jacky	Mental Health Foundation
Chan Po Lin	Ng Kam Cheung Stephen
Cheng Kim Fung	Poon Wilson
Fong Yeuk Kwan	Red Ribbon Centre
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Ho King Man	Tsang Wai Kiu Alfert
Ho Man Sing	Tso Wei Kwok Homer
Hong Kong Society for HIV Medicine	Tsui Lok Kin Edwin
Hong Kong Society for Infectious Diseases	UNAIDS China
Hong Kong Society for Nursing Education	Wan Chi Keung Aaron
Hong Kong Society of Behavioral Health	Wan Wai Yee
Hong Kong School Nurses Association	WHOCC
Hong Kong Society for Public Health Nursing	Wong Chun Kwan Bonnie
Kam Kai Man Joseph	Wong Ka Hing
Lam Man Kin Ronald	Wong Nga Sze Candy
Lam Wilson	Yim Edward
Lam Ying Kit David	Zhou Kai
Lui Chung Yan Grace	

(排名不分先後)



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BIKTARVY® is a powerful STR that combines the **DESCOVY® (FTC/TAF)*** backbone with bictegravir, a novel and unboosted INSTI^{1,2}

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AS AN INITIAL REGIMEN FOR MOST PEOPLE WITH HIV^{3,4}

EACS RECOMMENDED

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BIKTARVY® is a small STR with once daily dosing^{1,2}



High genetic barrier
to resistance



No HLA-B 5701
testing required



Active against
HBV[†]



Low potential
for DDIs[‡]



Once-Daily
small STR[§]



Taken Any
Time of Day



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The image is shown for illustration purpose only, it does not represent the actual size of the tablet.

*emtricitabine 200 mg/tenofovir alafenamide 25 mg.¹

[†]BIKTARVY® contains TAF, which is active against HBV. Discontinuation of BIKTARVY® therapy in patients co-infected with HIV and HBV may be associated with severe exacerbations of hepatitis. Patients co-infected with HIV and HBV who discontinue BIKTARVY® should be closely monitored with both clinical and laboratory follow-up for at least several months after stopping treatment.¹

[‡]BIKTARVY® is contraindicated with dofetilide, rifampin and St John's Wort.¹⁶

[§]Each BIKTARVY® tablet is approximately 15 mm x 8 mm.¹

CrCl, creatinine clearance; DDIs, drug-drug interactions; DHHS, Department of Health and Human Services; EACS, European AIDS Clinical Society; FTC, emtricitabine; HBV, hepatitis B virus; HIV, human immunodeficiency virus; IAS, International AIDS Society; INSTI, integrase strand transfer inhibitor; PLHIV, people living with HIV; STR, single-tablet regimen; TAF, tenofovir alafenamide.

References: 1. BIKTARVY® Hong Kong Prescribing Information (HK-JUN19-EU-MAY19). 2. Deeks ED. Bictegravir/emtricitabine/tenofovir alafenamide: A review in HIV-1 infection. *Drugs* 2018; 78(17): 1817-28. 3. Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the use of antiretroviral agents in adults and adolescents with HIV. Department of Health and Human Services. Available at: <http://aidsinfo.nih.gov/contentfiles/lvguidelines/AdultandAdolescentGL.pdf>. (Accessed November 21, 2020). 4. Saag MS, Gandhi RT, Hoy JF, et al. Antiretroviral Drugs for Treatment and Prevention of HIV Infection in Adults: 2020 Recommendations of the International Antiviral Society-USA Panel. *Jama* 2020; 324(16): 1651-69. 5. The EACS treatment guidelines 10.1 October, 2020. Available at: https://www.eacsociety.org/files/guidelines-10.1_5.pdf (accessed November 21, 2020). 6. Di Perri G. Clinical pharmacology of the single tablet regimen bictegravir/emtricitabine/ tenofovir alafenamide (BIC/FTC/TAF). *Infect Med* 2019; 27(4): 365-73.



HIV

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with VOCABRIA + REKAMBYS, the first and only, complete long-acting injectable regimen, dosed once every 2 months, for virologically suppressed* patients^{1,2}



First and only, complete long-acting regimen for HIV-1^{1,2}



The efficacy you have come to expect from daily HIV regimens¹



Preferred by 98% of patients over daily oral therapy in the ATLAS-2M clinical trial³



At Week 48, 98% of 306 patients with no prior exposure to VOCABRIA + REKAMBYS who responded to the questionnaire preferred every 2-month injections vs 1% of 306 patients who preferred the study daily oral lead-in (1% reported no preference).³

*HIV-1 RNA <50 copies/mL in adults who are virologically suppressed (HIV-1 RNA <50 copies/mL) on a stable antiretroviral regimen without present or past evidence of viral resistance to, and no prior failure with agents of NNRTI and INI class.

Vocabria (cabotegravir 30mg film-coated tablets and 600mg prolonged-release suspension for injection in 3mL), and Rekambys (rilpivirine 900mg prolonged-release suspension for injection in 3mL). Important Safety Information

Contraindications: Hypersensitivity to any ingredient • Coadministration with rifampicin, rifapentine, rifabutin, phenytoin, phenobarbital, carbamazepine, oxcarbazepine, systemic dexamethasone (except single dose) • St John's Wort **Warnings and Precautions:** • If discontinued, adopt a fully suppressive antiretroviral regimen no later than when the next injection would have been due • If virologic failure is suspected an alternative regimen should be adopted as soon as possible. Residual concentrations may remain for prolonged periods after discontinuation. • Increased risk of failure associated with 2 or more of: archived rilpivirine resistance mutations BMI 30 kg/m² or HIV-1 A6/A1 subtype • Caution if uncertain treatment history without pre-treatment resistance analyses, if BMI 30 kg/m², or HIV-1 A6/A1 subtype • Hypersensitivity reactions, Rare, serious post-injection reactions from accidental IV administration • Hepatotoxicity (monitor LFTs). Not recommended in hepatitis B • Limited data in hepatitis C, monitor LFTs • Opportunistic infections • Immune reactivation syndrome • QTc prolongation at supratherapeutic doses - caution with medicines associated with Torsade de Pointes • Not to be used with other antiretrovirals for HIV • Caution with narrow therapeutic index OAT1/3 substrates, e.g. methotrexate. If macrolide antibiotics required, consider azithromycin • Caution with oral treatments and H2 antagonists and antacids. • Limited data on the use of Vocabria in patients aged 65 years and over.

The following adverse events have been reported

Injection site reactions (generally mild/moderate) including cellulitis and abscess formation (uncommon), headache, pyrexia (mostly reported within one week of injection), depression, depressed mood, anxiety, abnormal dreams, insomnia/sleep disorder, somnolence, dizziness, dry mouth, decreased appetite, nausea, vomiting, abdominal pain/discomfort, flatulence, diarrhoea, fatigue, asthenia, malaise, rash, myalgia, weight increase, hepatotoxicity, pancreatitis, increased transaminases, increased bilirubin, decreases in white blood cells, haemoglobin and platelet count, increases in cholesterol, triglycerides, pancreatic amylase, and lipase. Please refer to the full prescribing information for further information and prior to administration. Abbreviated Prescribing Information based on PI version: Vocabria 30mg film-coated tab- HK022021 (GD033/EU20210105); Vocabria 400mg, 600mg prolonged-release suspension for injection - version HK022021 (GD033/EU20210105). For adverse events report, please call GlaxoSmithKline Limited at (852)3189 8989 or send an email to us at HKAdverseEvent@gsk.com.

Vocabria (cabotegravir 30mg film-coated tablets and 600mg prolonged-release suspension for injection in 3mL), and Rekambys (rilpivirine 900mg prolonged-release suspension for injection in 3mL).

Indication: Cabotegravir in combination with rilpivirine for treatment of HIV-1 in adults who are virologically suppressed (HIV-1 RNA <50 copies/mL) on a stable antiretroviral regimen without present or past evidence of viral resistance to, and no prior failure with agents of NNRTI and INI class. **Dosing:** Adults (over 18 years) carefully selected who agree to the injection schedule and are counselled about the importance of adherence. An oral lead-in prior to the initiation of injections can be used to assess tolerability. For oral lead-in: Prior to injections, once-daily oral dosing of cabotegravir 30mg tablet and rilpivirine 25mg tablet for approximately 1 month (at least 28 days) with food. Initiation injections following oral lead-in: months 2 (final day of oral lead-in therapy) and 3. Separate intramuscular (gluteal) 3mL initiation injections of Vocabria and Rekambys. Continuation injections: Two months after the final initiation injections and every 2 months thereafter. Separate intramuscular (gluteal) 3mL injections of Vocabria and Rekambys. Injections may be administered up to 7 days before or after the due date. Please refer to the prescribing information for advice outside this window or missed injections. Caution in severe renal impairment or moderate hepatic impairment. Not recommended in severe hepatic impairment. **Contraindications:** Hypersensitivity to any ingredient. Coadministration with rifampicin, rifapentine, rifabutin, phenytoin, phenobarbital, carbamazepine, oxcarbazepine, systemic dexamethasone (except single dose). St John's Wort. **Special warnings/precautions:** If discontinued, adopt a fully suppressive antiretroviral regimen no later than when the next injection would have been due. If virologic failure is suspected an alternative regimen should be adopted as soon as possible. Residual concentrations may remain for prolonged periods after discontinuation. Increased risk of failure associated with 2 or more of: archived rilpivirine resistance mutations BMI ≥30 kg/m² or HIV-1 A6/A1 subtype. Caution if uncertain treatment history without pre-treatment resistance analyses, if BMI ≥30 kg/m², or HIV-1 A6/A1 subtype. Hypersensitivity reactions, Rare, serious post-injection reactions from accidental IV administration, Hepatotoxicity (monitor LFTs). Not recommended in hepatitis B. Limited data in hepatitis C, monitor LFTs. Opportunistic infections. Immune reactivation syndrome. QTc prolongation at supratherapeutic doses - caution with medicines associated with Torsade de Pointes. Not to be used with other antiretrovirals for HIV. Caution with narrow therapeutic index OAT1/3 substrates, e.g. methotrexate. If macrolide antibiotics required, consider azithromycin. Caution with oral treatments and antacids. Please refer to the prescribing information for full list of interactions. **Pregnancy/breast feeding:** Not recommended. **Side effects:** Please refer to prescribing information for full details. Injection site reactions (generally mild/moderate) including cellulitis and abscess formation (uncommon), headache, pyrexia (mostly reported within one week of injection), depression, depressed mood, anxiety, abnormal dreams, insomnia/sleep disorder, somnolence, dizziness, dry mouth, decreased appetite, nausea, vomiting, abdominal pain/discomfort, flatulence, diarrhoea, fatigue, asthenia, malaise, rash, myalgia, weight increase, hepatotoxicity, pancreatitis, increased transaminases, increased bilirubin, decreases in white blood cells, haemoglobin and platelet count, increases in cholesterol, triglycerides, pancreatic amylase, and lipase. Please read the full prescribing information prior to administration. Full prescribing information is available on request from GlaxoSmithKline Ltd, 23/F, Tower 6, The Gateway, 9 Canton Road, Tsim Sha Tsui, Kowloon, Hong Kong. Abbreviated Prescribing Information based on PI version: Vocabria 30mg film-coated tab- HK022021 (GD033/EU20210105); Vocabria 400mg prolonged-release suspension for injection - version HK022021 (GD033/EU20210105); Rekambys 900mg prolonged-release suspension for injection - EU SmPC 28 July 2021; (Hong Kong Approval Date: 16 Dec 2021). For adverse events report, please call GlaxoSmithKline Limited at (852)3189 8989 or send an email to us at HKAdverseEvent@gsk.com.

VOCABRIA injection is indicated, in combination with REKAMBYS injection, for the treatment of HIV-1 infection in adults who are virologically suppressed (HIV-1 RNA <50 copies/mL) on a stable antiretroviral regimen without present or past evidence of viral resistance to, and no prior virological failure with agents of the NNRTI and INI class.¹

HIV-1-human immunodeficiency virus type 1; INI-integrase inhibitor; NNRTI-non-nucleoside reverse transcriptase inhibitor.

References: 1. VOCABRIA Hong Kong Product Characteristics GD033. 2. REKAMBYS Summary of Product Characteristics. Janssen Healthcare, 2021. 3. Overton ET, Richmond G, Rizzardini G, et al. Long-acting cabotegravir and rilpivirine dosed every 2 months in adults with HIV-1 infection (ATLAS-2M): 48-week results: a randomised, multicentre, open-label, phase 3a, non-inferiority study. Lancet. Published online ahead of print: Decem ber 9, 2020. doi: 10.1016/S0140-6736(20)32666-0.



Working together in HIV

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