

My Life My Health My CHOICE

年報 2017 Annual Report

15th Anniversary



再思社區健康組織

Community Health Organisation for
Intervention, Care and Empowerment

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主席獻辭 Message from Chairperson

再逐夢榮處
不忘來時路



尹慧兒醫生
Dr. Wan Wai Yee

走過了 2017，CHOICE 便進入十六周年了。

CHOICE 多年一直致力於愛滋病預防，項目對象包括性工作者及其顧客、男男性接觸者、以致濫藥及其他高危社群，近年我們因應香港流行病學的走勢，陸續發展了不少的年青人項目，既強化了以中心為本的活動（Centre-based activities），亦以社區及網上外展，配合手機應用程式和社交媒體，接觸更廣泛的年青人群。此外，我們也為同行者作出專業培訓，當中包括老師、家長、大學院校學生、義工及導師等，都得到全面均衡的發展。

2017 年是忙碌而豐盛的一年。我們今年在各項活動中，提供了近 1700 個愛滋病毒及梅毒抗體測試，在超過 750 多次的社區及網上外展中，接觸人次多達 23 萬。

在 2017 年，我們繼續舉辦以愛滋病為主題的學術研討會。很榮幸邀請了衛生署衛生防護中心總監黃加慶醫生作為研討會的主禮嘉賓；還有聯合國愛滋病規劃署的中國總監 Ms Amakobe SANDE 分享全球愛滋病控制的進展；有世界衛生組織的 Dr Naoko ISHIKAWA 分享了 HIV、STI 及病毒性肝炎在 MSM 中的流行病學研究，並有 Treat Asia 的研究總監 Dr Jeremy ROSS 分享了愛滋病預防及治療的最新研究發展。至於本地的專家講者包括：衛生署特別預防計劃顧問陳志偉醫生、伊利沙伯醫院特別內科顧問李文寶醫生，及瑪嘉烈醫院特別內科顧問曾德賢醫生；會議中的參加者也對專業議題有熱烈的討論。會議的成功是令我們感到十分欣慰和鼓舞的。

就如我們的主禮嘉賓 Ms SANDE 在會上所強調的，聯合國愛滋病規劃署在 2014 年為全球的「愛滋病治療和護理流程」（HIV treatment and care cascade）訂下了 2020 年的目標，就是「90-90-90」：「第一個 90」是 90% 的感染者了解自己的感染狀況，「第二個 90」是 90% 了解自己狀況的人得到適切治療，而「第三個 90」是 90% 得到治療的人能有效抑制體內的病毒。

世界各國要達到「90-90-90」這個宏大的目標都有一定差距，根據 2015 年香港衛生署特別預防計劃的估計，香港的情況是「76-84-92」，即每 100 個受感染人士，只有 76 個了解自己感染愛滋病狀況，當中有 65 個在醫療體系接受適切治療。

香港政府對愛滋病的投入是有目共睹的，甚至在全世界的層面，也算是成績斐然。但是我們與「第一個 90」的差距，也是不容忽視的。環顧香港非政府組織的情況，仍然是資金缺拙、山頭各異。若在「愛滋病治療和護理流程」中失落了一個感染者，就是錯失一個可以治療的寶貴機會了。若要改善現況，我們便要重新檢視從愛滋病患者出發的經驗旅程，重新把各服務機構的割裂彌補過來。

CHOICE 在 2017 年開展了「連扣工程」：就是嘗試以跨界別的服務，致力接觸社會中沉潛的愛滋病患者，接受測試並聯繫到醫療體系中。因為這個社群特別難捉摸，所以我們倚仗媒體的力量，在 2017 年我們推出了一系列強而有力的社交媒體宣傳，其中很感謝著名的藝人鼎力相助：一貫「招積」的張建聲飾演馮素波的感染愛滋病病毒的兒子，令我們的宣傳短片叫好叫座。項目有不錯的開局，希望可以轉化為更深更長遠的動力，把更多的感染者聯繫到醫療體系中。

CHOICE 雖然是小小的非政府組織，但是我們有高瞻遠矚的氣魄，也是不少全港項目的先行者。我們多年誠懇實務的事奉，也能做到生命影響生命，這是令我們足以自豪的。

就每年秋風送爽的時節，我都習慣了要為 CHOICE 年報寫「主席獻辭」。回顧一年的項目，新的舊的、好的不夠好的，機構有什麼改善空間、下一步的發展等等。今天，心中飄過這一句：「但屈指西風幾時來，又不道，流年暗中偷換。」轉眼間，我在 CHOICE 的董事局，已經第十年了。而主席獻辭，已經寫了九篇了。

回想過去十年，心裏特別感謝 CHOICE 的董事們：何文勝博士是 CHOICE 的創會主席，退任主席之後仍然在董事局裏繼續積極參與。此外，吳錦祥醫生、甘啟文醫生及湯德輝先生都在公共衛生的領域各有所長。去年，很高興得到香世傑先生加入董事局，他在大專院校服務多年，也是金融界資深的領袖，給了 CHOICE 很多實質的建議。此外，何景文醫生及劉德輝教授是創會至今的顧問，蔡元雲醫生是我們的贊助人，還有機構的靈魂人物何碧玉女士，由她一手創立 CHOICE 至今，一直對這個社群不離不棄。能與這樣一個專業的團隊不分彼此的共事，實在是我的榮幸。

我在 CHOICE 的十年，經歷了美好的人和事，都會成為我生命中美好的風景。我見青山多嫵媚，料青山見我應如是！今年是我作 CHOICE 主席的最後一年任期，下一屆的主席，將會是香世傑先生。我將仿效何文勝博士的好榜樣，落任後繼續留在 CHOICE 的董事局。想到《世說新語》裏面有一句「今之視古，亦猶後之視今」，深信香先生，必然也會像我一樣享受在 CHOICE 的服侍，在繁忙中找到滿足；也深信 CHOICE 在香先生的領導之下，必再創一番新天地。感謝大家繼續支持！

尹慧兒醫生

組織架構 Organisational Structure

董事局 Board of Directors



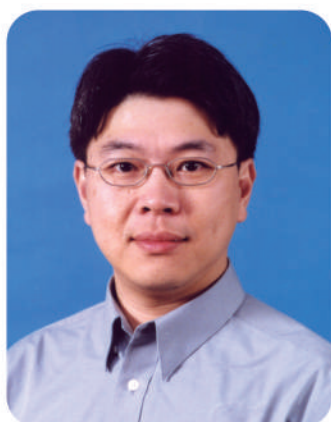
秘書 Secretary
何文勝博士
Dr. HO Man Sing



主席 Chairperson
尹慧兒醫生
Dr. WAN Wai Yee



財務 Treasurer
甘啟文教授
Prof. KAM Kai Man Joseph

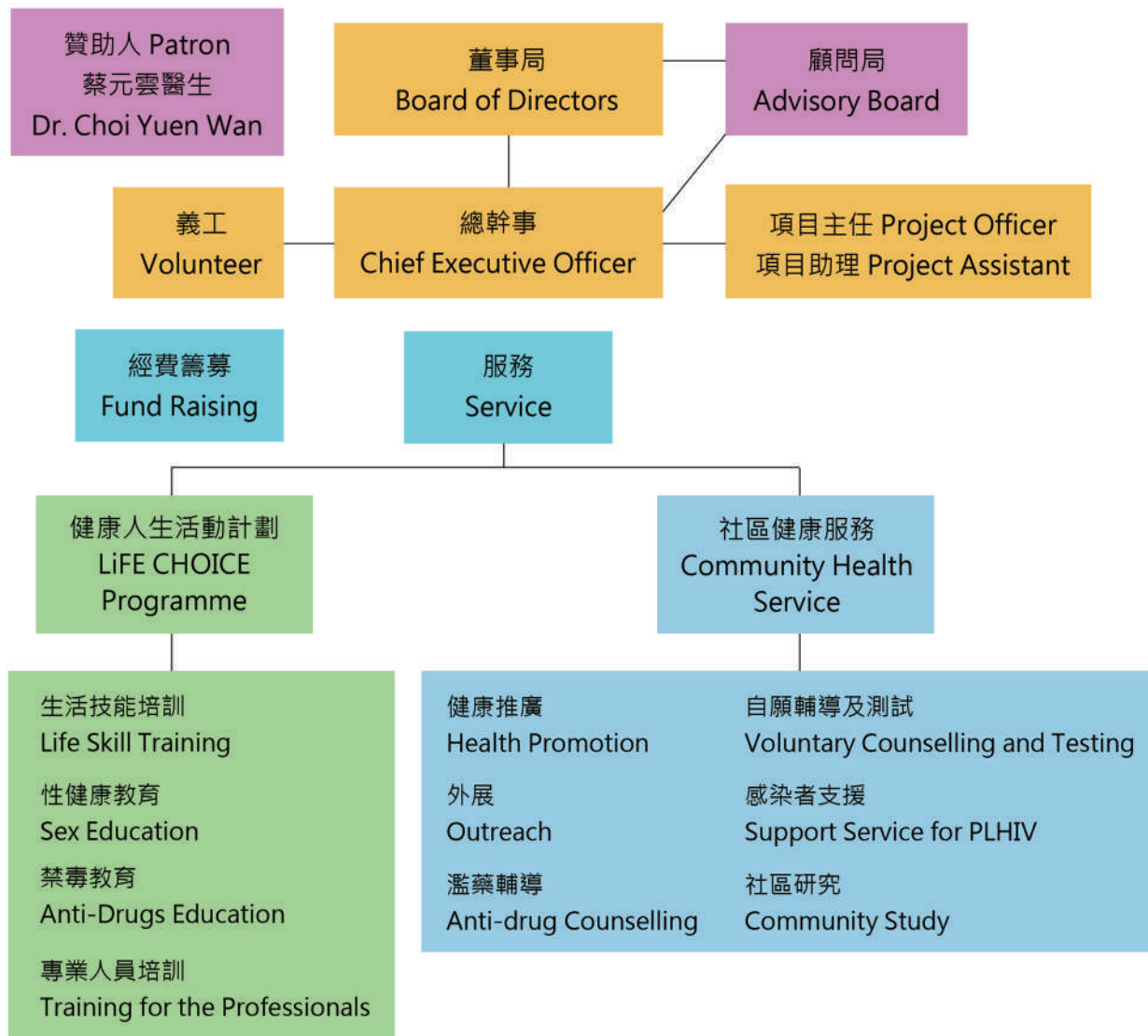


湯德輝先生
Mr. TONG Tak Fai



吳錦祥醫生
Dr. NG Kam-cheung Stephen

組織圖 Organisational Chart



創辦人 何碧玉女士
譚美儀女士

贊助人 蔡元雲醫生

董事局 尹慧兒醫生 (主席)
何文勝博士 (秘書)
甘啟文教授 (財務)
湯德輝先生
吳錦祥醫生

顧問局 何景文醫生
劉德輝教授

義務核數師 廖建平會計師事務所

義務律師 馬致聰先生

其他 職員及義工

Cofounders

Patron

Board of Directors

Advisory Board

Hon. Auditor

Hon. Lawyer

Others

Ms. Ho Pik Yuk, Shara

Ms. Tammy Gautier

Dr. Choi Yuen Wan

Dr. Wan Wai Yee (Chairperson)

Dr. Ho Man Sing (Secretary)

Prof. Kam Kai Man Joseph (Treasurer)

Mr. Tong Tak Fai

Dr. Ng Kam-cheung Stephen

Dr. Ho King Man

Prof. Lau Tak Fai Joseph

Alcott Liu CPA Limited

Mr. Ma Chi Chung Ronald

Staff and Volunteers

再思背景 Background

再思社區健康組織（簡稱「再思」）成立於2002年8月，是專注推廣疾病預防的非政府社會服務機構。本會堅信任何的人生階段，都可以有選擇，生命也可改變，故機構的英文定名為「C.H.O.I.C.E.」，中文名為「再思」。我們一直致力推廣「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。成立至今，我們因應社會的需要，不斷改進服務的內涵和對象，由初期主要為高危社群提供服務，擴展到青年群組及公眾。

現時本會為香港愛滋病服務機構聯盟的會員。另外，董事湯德輝先生及總幹事何碧玉女士獲香港愛滋病顧問局委任為委員之一，就有關香港預防、治理及控制愛滋病病毒感染及愛滋病的政策，向政府和愛滋病病毒感染/患愛滋病的人士提供意見。

The Community Health Organisation for Intervention, Care and Empowerment (C.H.O.I.C.E.) was established in August 2002. It is a non-governmental social service organisation which focuses on promoting disease prevention and health promotion. 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. 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. Since the establishment of C.H.O.I.C.E., we have been improving our services in response to the changing social needs. We have extended our services from vulnerable groups identified as high-risk communities to teenage groups and the public.

Currently, C.H.O.I.C.E. is a member of the Hong Kong Coalition of AIDS Service Organizations (HKCASO). Our Director, Mr. Tong Tak Fai Edmond and our Chief Executive Officer, Ms. Shara Ho, have been appointed as the committee members for the Hong Kong Advisory Council on AIDS (ACA) and offer advice to the Hong Kong Government and HIV-infected people in relation to the prevention, care and control of HIV and AIDS policy formulation.

使命 Mission

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。

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

再思之旅 Milestones

年度 Year	
2002	<p>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。</p> <p>C.H.O.I.C.E. 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.</p>
2003	<p>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。</p> <p>C.H.O.I.C.E. became the FIRST Hong Kong-based organisation to provide RAPID Syphilis and HIV antibody test for sex workers and their clients.</p>
2004	<p>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」。</p> <p>與衛生署紅絲帶中心合辦外展活動 - 「驕陽計劃」。</p> <p>Conducted a community study on female sex workers and their clients' physical health and behaviors in collaboration with the Chinese University of Hong Kong.</p> <p>Launched an outreach project "Project Sunny" with Red Ribbon Centre, Department of Health.</p>
2005	<p>關注青少年跨境濫用藥物問題，開展邊境外展服務。</p> <p>C.H.O.I.C.E. showed concern about the problem of cross-boundary substance abuse for youth, and started offshore outreach.</p>
2006	<p>開展首個為年青男男性接觸人士社群而設的策略性網上干預服務。</p> <p>在香港愛滋病顧問局推動下，成為「性工作者及其顧客群組」的評估及政策策劃召集人。</p> <p>Launched the FIRST strategic internet intervention programme for the young men who have sex with men (MSM) community.</p> <p>C.H.O.I.C.E. became the convener to plan and evaluate the policies catering for sex workers and their clients propelled by Hong Kong Advisory Council on AIDS.</p>
2007	<p>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干預計劃。</p> <p>Launched a counselling programme with the Chinese University of Hong Kong for females who were (or suspected to be) infected with STIs.</p>
2008	<p>擴展性病及愛滋病毒抗體測試服務予男男性接觸人士。</p> <p>Started providing voluntary STI/ HIV testing and counselling service for the MSM community.</p>
2009	<p>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。</p> <p>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 knowledge of drug abuse.</p>

年度 Year	
2010	<p>開展為青少年、家長及教師而設的「健康人生活動」計劃。</p> <p>Introduced the "LiFE CHOICE programme" which is offered for the well being of youth, their parents and teachers.</p>
2011	<p>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。</p> <p>Conducted a Cantonese Opera on the World AIDS Day to deliver HIV prevention information to elderly.</p>
2012	<p>「姊妹關懷行動」榮獲蘋果日報慈善基金頒發「出色服務獎」。</p> <p>"SHE Project" was awarded "The Outstanding Service" by the Apple Daily Charitable Foundation.</p>
2013	<p>開設「DIY夢工場」，鼓勵婦女可有新的工作技能。</p> <p>Established the "DIY Handicrafts Workshop" to equip women with new life skills.</p>
2014	<p>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。</p> <p>與香港中文大學合作，進行針對男男性接觸者的自我檢測(家居)測試及網上輔導的研究。</p> <p>Launched an "Integrated Anti-drug Service Scheme for Gay population" to provide a series of coherent anti-drug services.</p> <p>In collaboration with the Chinese University of Hong Kong, we initiated a randomized controlled trial to evaluate the efficacy of promoting home-based HIV testing with online counselling on increasing HIV testing among men who have sex with men.</p>
2015	<p>創立名為「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。</p> <p>Launched a social enterprise, the "Pearl Project", to engage service users in making different handicrafts and accessories.</p>
2016	<p>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。</p> <p>C.H.O.I.C.E. organized "HIV/AIDS Cconference : 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.</p>
2017	<p>開展新的愛滋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。</p> <p>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.</p>

再思服務 Community Service



再思社區健康組織一直致力於推行愛滋病及性病的預防工作、推廣性健康及支援弱勢社群，並以「促進健康，全人發展」為主題，培育年青新一代。在2017年，我們實行了多項公共健康計劃，服務對象涵蓋不同社群，包括「愛之平台—高危行為干預、測試及跟進」、「綜合預防及治療服務計劃」、「健康人生活動計劃」等，同時我們新設了專為愛滋病病毒感染者而設的「連扣工程」。



C.H.O.I.C.E. not only aims at providing a spectrum of Sexually Transmitted Infections (STIs) and Human Immunodeficiency Virus (HIV) prevention services, sexual health promotion and supporting services catered for different vulnerable groups, but also aims at rendering life skill training to children and youth in accordance with the main theme of "health promotion and holistic development". Various public health projects have been implemented in 2017 for different members in the community, including "A Platform for HIV/AIDS Prevention, Test and Support", "Integrated Anti-Drug Service" and "LiFE CHOICE Programme", alongside other projects and initiatives. We have launched the "LiNKage of PLHIV to Care" Programme which is specifically catered for people living with HIV.



「愛」之平台 - 高危行為干預、測試及跟進服務

A Platform for HIV/AIDS Prevention, Test and Support

由愛滋病信託基金贊助，本會為高危社群提供不同的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，提高社區預防疾病的意識。

This programme is sponsored by the AIDS Trust Fund. C.H.O.I.C.E. provides HIV and STIs prevention and follow-up services for the high-risk communities. Services include outreach sessions, voluntary testing, counselling...etc. In addition, we also launch publicity campaigns to raise the public's awareness towards disease prevention.

快速測試及輔導

自2003年起，本會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：愛滋病毒和梅毒的快速檢測，讓接受測試者了解自己的身體狀況，並得到相關的健康資訊，及早預防或接受治療。在2017年，我們為超過1700人次提供愛滋病毒和梅毒抗體快速測試。

Rapid Testing and Counselling

Since 2003, C.H.O.I.C.E. has been providing free and anonymous testing and counselling services, which include HIV antibody test and Syphilis antibody test. We aim to allow members of high-risk communities to be aware of their health status, provide them with healthcare information, and prepare them for prevention and/or early follow-up treatment. In 2017, we conducted HIV and Syphilis antibody tests for more than 1700 people.

外展服務

自2002年起，本會已提供逾十五年的外展服務，包括專為高危社群而設的社區外展及網上外展。

目標為：

- 1) 增加社群對愛滋病和性病的正確知識
- 2) 糾正社群對愛滋病毒和性病感染的錯誤認知
- 3) 鼓勵定期接受愛滋病毒和性病檢查和避免自行用藥

Outreach Service

Since its establishment in 2002, C.H.O.I.C.E. has been providing outreach services for more than 15 years, including Community Outreach and Internet Outreach for the high-risk communities.

Objectives:

1. Educate them with the knowledge of HIV/AIDS and STIs prevention
2. Correct their misunderstandings on HIV/AIDS and STIs infection
3. Encourage them to undergo HIV and STIs screening test regularly and avoid self-medication



社區外展

本會定期到訪服務使用者聚集的地方，主動向他們宣傳預防疾病的健康訊息、免費派發安全套及潤滑劑，並提供性病快速測試及輔導。

在2017年，我們展開了300多次外展服務，接觸超過9萬人次，並派發了近11萬個安全套、8萬個潤滑劑及7萬份宣傳品。

網上外展

本會在不同的網絡社交平台及手機交友應用程式開設專頁和官方帳號，不時張貼與愛滋病、性病及其他健康議題的相關文章，為網絡使用者提供多元化的健康資訊。

另外，我們提供網上支援服務，為網絡使用者解答對性健康的疑問，並提供輔導或支援，以紓緩他們的不安和焦慮情緒。

在2017年，我們展開了超過450節的網上外展服務，接觸人次近14萬。

公眾宣傳活動

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。我們在公眾場所、大專院校等設置街站，派發安全套和教育單張，並向公眾人士及年輕群組宣傳與愛滋病和性病相關的資訊，例如：傳播途徑、預防及香港的感染情況等。



Community Outreach

C.H.O.I.C.E. makes regular visits to identified assembling places of our target service users to promote disease prevention, deliver healthcare information, distribute free condoms and lubricants and provide on-site HIV, Syphilis and other STIs testing and counseling.

In 2017, we conducted more than 300 outreach sessions, engaging more than 90,000 individuals and distributed around 110,000 condoms, 80,000 packs of lubricants and 70,000 sets of promotional collaterals.

Internet Outreach

C.H.O.I.C.E. has set up accounts and official pages in different social media platforms and mobile applications, where we will post information relating to HIV, STIs and other health issues so as to provide internet users with diverse healthcare information.

In addition, C.H.O.I.C.E. provides online support service by answering enquires about HIV and STIs, and providing them with counselling service to alleviate their stress and anxiety.

In 2017, we conducted more than 450 Internet outreach sessions, reaching around 140,000 people.

Publicity Campaigns

To enhance the public's awareness towards HIV/AIDS and STIs, we have launched a series of publicity programmes. We set up a stall in public areas and tertiary institutions to distribute condoms and educational collaterals to the public and youngsters, educating them about HIV and STIs related information, including but not limited to routes of transmission, prevention and infection rate in Hong Kong.

彩虹日

每個星期六為本會的「彩虹日」。當天會開放予男同志使用，為他們提供一個交流平台。另外，我們亦會定期舉行不同類型的活動，如桌上遊戲、戶外活動、節日慶祝派對、安全套工作坊等。除了推廣健康生活訊息外，我們希望透過一系列的活動及經歷分享，加強男同志之間的交流，並協助他們提升自我形象。



Rainbow Day Activities

Every Saturday is designated as the "Rainbow Day", on which C.H.O.I.C.E. center is open to the gay population. It provides a platform for them to interact with each other. We organize different activities regularly, for example, board game contests, outdoor activities, festival celebrations, and condom workshops. Through a series of games and experience sharing, we aim to enhance the interactions between them, promote healthy living and help them build up confidence and self-esteem.

宣傳刊物

本會定期製作及派發不同的宣傳刊物，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。在2017年，我們派發了近7萬份宣傳刊物。

Promotional Collaterals

C.H.O.I.C.E. promotes sexual health and offers information on HIV/AIDS and STIs through distributing various promotional collaterals. We hope to enhance the public's awareness of infection prevention. In 2017, we distributed around 70,000 sets of promotional materials.

淋病、衣原體及丙型肝炎感染檢測

Gonorrhea, Chlamydia and Hepatitis C (HCV) Infection Tests

自2016年起，本會與香港中文大學醫學院及衛生署社會衛生科合作，為男男性接觸者及女性性工作者提供免費的淋病、衣原體或丙型肝炎的檢測服務，讓他們了解自己的健康狀況，並增加對淋病、衣原體及丙型肝炎的認識。如有發現受感染，本會會轉介感染者到相關的診所作進一步的跟進及治療，以及提供相關的健康諮詢服務。

在是次檢測計劃下，本會為超過550人提供了淋病、衣原體及丙型肝炎感染檢測。

Since 2016, C.H.O.I.C.E. has collaborating with the Faculty of Medicine of the Chinese University of Hong Kong and the Social Hygiene Clinic of the Department of Health to provide free gonorrhea, chlamydia and HCV infection tests for MSM and female sex workers. It allows them to understand their health status, and enhance their awareness towards the infection of gonorrhea, chlamydia and HCV. If the client is found to be infected, we will provide them with referral service to the relevant clinics for follow-up treatment, and continue to provide consultation service.

Under this scheme, we have conducted gonorrhea, chlamydia and HCV infection tests for more than 550 individuals.

連扣工程 LINKage of PLHIV to Care

愛滋病病毒感染者在患病後，身體及心理上難免會出現不同的變化，有些甚至影響到他們的日常生活及治療情況。本會十分關注他們的身體及心理健康，在2017年，我們獲葛蘭素史克支持，開展了新的感染者關懷計劃 - 「連扣工程」，為他們提供多元化的身心健康支援服務。

After HIV infection, infected persons will invariably experience physical and mental challenges, some of which may even affect their daily lives and treatment. We are very concerned with their physical health and mental well-being. In 2017, sponsored by GlaxoSmithKline(GSK), C.H.O.I.C.E. launched the care programme "LINKage of PLHIV to Care" to provide people living with HIV (PLHIV) with diverse physical and mental health support service.

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。另外，我們定期舉行感染者互助小組活動，讓他們於朋輩間互相支持，實踐健康生活。

Counselling and Poz Group

C.H.O.I.C.E. provides counselling services to assist the newly diagnosed, the emotionally troubled and the ones who experience difficulties with medication with emotional and stress management, and help them adapt to medication and the associated side-effects. We would also provide counselling services for their partners whenever necessary. In addition, we will have Poz Group gatherings regularly to allow mutual support between peers and encourage them to put healthy living into practice.

多元化資訊平台

針對懷疑受感染人士及感染者的群組，本會全新設立了一系列的多元化資訊平台，包括：資訊性網站、網上風險評估及問答區、社交平台專頁、短片、正向生活公眾宣傳活動等。服務使用者可以透過這些平台，得到更多相關的資訊，從而積極面對治療及重返健康人生。

Diverse Information Portals

To cater for the infected and those who suspect infection, we have set up a series of information portals, including informational websites, online risk assessment and Q&A forum, social media page, videos and positive living public promotion campaigns. Service users can access relevant information through these information portals so as to gain confidence on treatment and to pick up their healthy life.

綜合健康檢查

本會提供綜合健康檢查服務，除了愛滋病病毒及梅毒快速測試外，也為愛滋病病毒感染者提供CD4淋巴細胞、結核測試及其他性病篩查，讓他們更進一步了解自己的身體狀況，從而安排更適切的支援服務。

Consolidated Health Check

C.H.O.I.C.E. provides consolidated health checks. In addition to HIV and Syphilis rapid tests, we also provide infected persons with CD4 lymphocyte test, Tuberculosis (TB) test and other STI screening tests for them to further understand their health status and for more appropriate support services to them.



綜合預防及治療服務計劃 Integrated Anti-Drug Service

本會再獲禁毒基金撥款，延續為期三年的「綜合預防及治療服務計劃」，為男同志社群提供預防濫藥工作及戒毒輔導服務，當中服務範圍甚廣。本會採用「外展」形式的服務，包括社區外展和網上外展，透過各類型的社交平台，主動接觸男同志社群及濫藥人士。同時，本會透過個案輔導和不同的預防性及治療小組，增加男同志的預防意識及提升處理濫藥問題的動機，發揮正面的影響。如有需要，我們可為濫藥人士提供精神科轉介及治療。至於「朋輩輔導員」培訓活動，透過建立朋輩支援網絡，宣傳正向健康人生。

此外，為配合資訊科技發展，本計劃會定期更新手機應用程式「CJUB」和製作抗毒短片，宣揚有關資訊，希望能夠增加社群的共鳴，一同抗毒。

We were again awarded funding from the Beat Drugs Fund for a 3-year furtherance of the "Integrated Anti-Drug Service". The scheme provides the gay population with drug prevention and drug-quitting counselling services. This scheme envisages a wide scope of service.

We adopt "outreach" as our mode of service. We conduct both community outreach and online outreach. Through different social platforms, we actively get in touch with the gay population and individuals who abuse drugs.

In the meantime, through case counselling and different preventive and therapy groups, we try to enhance the awareness of the gay population towards drug abuse, and to elevate their motivation in dealing with the problem of drug abuse. If required, we could provide mental health consultation referral and intervention. Peer counsellors also serve to expand the service users' peer network, within with healthy living is promoted.

In addition, to cope with information technology development, we would update the mobile app "CJUB" on a regular basis and produce anti-drug videos. They serve to promote the relevant anti-drug information, and call for a consensus within the community to beat drugs together.

手機應用程式
Mobile Application
CJUB



姊妹關懷行動 SHE Project

再思通訊

本會定期每季出版「再思通訊」，為女性性工作者提供多元化的健康資訊，內容包括：性病和愛滋病、精神健康、婦女健康、親子關係管理等。

情緒支援服務

部分女性性工作者表示因照顧家庭、管教子女、親子關係等各種問題而產生不少壓力及情緒困擾，難以紓緩。因此，本會為有家庭及親子壓力的性工作者提供支援，協助她們紓緩情緒壓力，並尋找解決方法。

藝術治療工作坊 – 畫出有話兒

本會為女性性工作者舉辦了名為「畫出有話兒」的心理健康工作坊，透過藝術治療及正向心理學，提高女性性工作者的自我認識，學習如何有效地表達內心想法，並培養她們的正向思維以應付生活中的逆境。

「創不同」活動

再思定期為女性性工作者舉辦不同類型的健康及社交活動，如：化妝、護膚班、安全套工作坊等，讓她們紓緩壓力，鼓勵她們多點關注身心健康。

C.H.O.I.C.E. Newsletter

C.H.O.I.C.E. publishes the quarterly "C.H.O.I.C.E. Newsletter" to provide female sex workers with more diverse healthcare information, which includes STIs and HIV/AIDS, mental health, women's health and parent-child relationship management.

Emotional Support Service

Some of the female sex workers suffer from tremendous pressure and emotional distress arising from their families and children. In view of it, C.H.O.I.C.E. provides support for those who have family and children by assisting them to relieve their pressure and helping them search for solutions.

Art Therapy Workshop

C.H.O.I.C.E. holds the Art Therapy Workshop for female sex workers. Through art therapies and positive psychology, they could understand themselves better, be able to express themselves more effectively and cultivate their positive thinking as so to overcome adversities.

"Make a Difference" Activities

C.H.O.I.C.E. organizes healthcare and social activities for female sex workers on a regular basis, such as "Make up and skincare tutorial" and "Condom workshop", aiming at alleviating their stress and encourage them to be more concerned with their health.



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、教師和健康工作者而設，透過各種在社群推廣健康的活動，宣揚及培養正向生活。

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

性健康教育工作坊

本會舉辦「性健康教育工作坊」，為高小至中學生提供性健康的預防教育，以提升學生的性健康知識及自我保護意識。工作坊除了講解有關愛滋病知識外，也包括性病知識、預防方法，以及毒品禍害等。

Sex Education Workshops

C.H.O.I.C.E. organizes sex education workshops for senior primary to secondary school students to provide them with preventative education and raise their sex knowledge and awareness for self-protection. The workshops also talk about STIs/HIV knowledge, ways of prevention and the adverse consequences of drug abuse.

服務研習計劃

本會與多間本地大專院校合作，推行「服務研習」計劃，為大專學生提供前線的實習體驗，讓他們走出校園，活用所學，親身了解社會現象，並以行動回應社會弱勢社群的需要。

Service Learning Programme

In collaboration with a number of local tertiary institutions, C.H.O.I.C.E. has launched the "Service Learning Programme" to provide tertiary students frontline experiential learning, which allows them to explore social phenomena outside school, to apply what they have learnt in class and to respond to the needs of the socially disadvantaged.

專業人員培訓

本會重視與其他健康工作者的交流及經驗分享，曾多次獲邀在不同的講座或分享會中擔任講者，主要醫護人員及其他社會服務工作者講解性病、愛滋病和毒品的知識、相關個案的輔導技巧和理論，並分享前線服務的經驗。

Training for the Professionals

C.H.O.I.C.E. values exchange and experience sharing with other health professionals. We were invited to a number of seminars and sharing sessions to be guest speakers and share with other health professionals and social service workers about STIs, HIV and drug knowledge, case counselling skills and theories and frontline service experience.



其他服務 Other Services

珍珠社企

本會於2015年創立了一個讓服務使用者展現自我的平台—「珍珠社企」。「珍珠社企」邀請不同的服務使用者參與及製作不同的手工藝品及珍珠首飾，讓他們有機會發展新的工藝技能及發掘她們的興趣。



Pearl Project

C.H.O.I.C.E created a platform for its service users to showcase their talents. In 2015, we launched the "Pearl Project", a social enterprise that engages the service users to make different handicrafts and pearl accessories. Engaged in the Pearl Project, they also had the opportunity to develop their craft skills and to explore their interests.

義工訓練計劃

本會定期舉辦義工訓練工作坊，招募及培訓新義工，為他們提供不同的社區體驗，豐富他們的生活經驗，並培養正向的人生價值觀。

Volunteer Training Workshops

C.H.O.I.C.E. organizes "Volunteer Training Workshops" regularly to recruit and train new volunteers, provides them with different community experiences, enriches their lives and cultivates their positive life attitudes.

與本地及外地機構分享交流

本會一直與本港及外地的服務組織有緊密的聯繫及交流，除了參與香港愛滋病服務機構聯盟的定期交流會議外，也透過「獅子會紅絲帶學人計劃」，與內地的愛滋病預防工作者進行交流。

Local and Overseas Exchange

C.H.O.I.C.E. has been maintaining close relationships with local and overseas organisations in HIV prevention. We are one of the members of the Hong Kong Coalition of AIDS Service Organizations. Through the "Lions Red Ribbon Fellowship Scheme", we exchanged knowledge with HIV prevention specialists in mainland China.

此外，我們也積極參與本港少數族裔機構舉行的節日聚會，如泰國新年慶祝活動等，讓本港的非華裔人士進一步了解愛滋病及性病，同時宣傳安全性行為等健康訊息，提高他們的預防意識。

We also participated in ethnic minorities' activities which organised by other social service agencies serving non-Chinese community, such as the Thai New Year celebration. We hope to equip South Asian with HIV and STIs prevention knowledge, enhancing their awareness towards HIV and STIs and to promote the importance of safe sex practices.



DIY夢工場

本會舉辦「DIY夢工場」，透過與本地及少數族裔的婦女進行手工藝、飾物製作，鼓勵她們將作品送給子女、家人以表達愛意，從而促進親子及家庭關係。

DIY Handicrafts Workshop

A series of "DIY Handicrafts Workshops" aims to encourage local and ethnic minority women to make accessories by themselves and give these DIY accessories to their beloved children or family, so as to improve their relationship.

愛滋病研討會2017 – 愛滋病預防及治療的新領域

HIV/AIDS Conference 2017 – Frontiers in HIV/AIDS Prevention and Treatment

本會於2017年11月10日舉辦了第二屆的愛滋病學術研討會，邀請了9名本地及國際的愛滋病專家及前線醫學顧問作為是次研討會的嘉賓，分享現今不同國家和地區在愛滋病預防及治療上的新發展。

是次研討會近200名人士參加，當中包括關注愛滋病的人士、非政府組織代表、醫護人員、公共衛生的前線工作人士及學生等。

On 10 November 2017, C.H.O.I.C.E. organized our second academic conference on HIV/AIDS. We have assembled a panel of 9 local and international HIV/AIDS experts and medical consultants to be our guest speakers and to share the latest developments of HIV/AIDS prevention and care in different countries and regions.

We registered about 200 attendees for the conference, including individuals who are concerned about HIV, representatives from non-governmental organisations, health care professional, frontline practitioners from other public health institutions and students.



15 Years of C.H.O.I.C.E

再思15年

2003



2003

免費愛滋病毒抗



RAPID HIV & SYPHILIS TEST



2003

WORLD AIDS DAY



1ST DECEMBER

HEALTH PROMOTION



2004

C.H.O.I.C.E



ESTABLISHED IN 2002

“家。小。家”



DRAMA 2006



15 Years of C.H.O.I.C.E

再思15年

1ST DECEMBER 2011



“美麗一刻” PHOTO COMPETITION



THAI WOMEN FESTIVAL



FIGHTING ZERO SEMINAR



2012

健康生活由你創
再思社區健康組織



PUBLICITY CAMPAIGN

2013



2015



活動花絮 Activities Tidbits

性健康教育工作坊
Sex Education Workshop



「彩虹日」活動
"Rainbow Day" Activities



愛滋病教育講座
HIV/AIDS Education Seminar



公眾宣傳活動
Publicity Campaigns



「服務研習」計劃
Service Learning Programme



少數族裔的節日聚會
Ethnic Minorities' Gathering



《二月生日之星》劇照



「連扣工程」公眾宣傳短片
“LINKage of PLHIV to Care” Video Filming



《你以前》劇照



《我的HIV軼事》



《對話》劇照



服務使用者留言 Messages from Service Users

學生義工 Lily

再思的義工服務令我對於香港社會中的性別/性服務議題加深了認識。在沒有參加義工服務之前，其實很少有機會去了解性服務業的情況以及性工作者現今所遇到的問題。作為女性在面對性議題及理解時好像比男生更多一份羞怯，但在再思的活動中，我可以親身上到她們工作的大廈內去派發安全套，向她們宣傳性知識，當中更見到再思的同事會關心性工作者的現況以及內心的感受。在外展中，看見再思的同事一定是花了很多心思去和性工作者建立關係，因為大廈內的性工作者全部都很歡迎我們的到來，並感謝再思替她們所做的檢查和關懷。

作為一個社工學生，在學校內所接觸到關於性的課程並不多，但是他們的確是被社會上的市民披上一個負面的形象，因為普遍大眾對於性所產生的話題都採取逃避的態度，扯上與性有關的東西一定是負面的。透過再思的宣傳以及檢查的工作除了可以令到更加多人對於性小眾及性工作者有更深入的認識外，更能幫助到性工作者在工作上所遇到的問題，因為她們和其他人一樣都是工作並沒有分別。也令到性工作者對於自己的權利有更深認識。我很幸運能夠參與再思成為義工，發現到一班很需要社會大眾去了解及幫助的人，也令我更明白其需要。

“Poz Group” 組員 A君

恐懼，源於無知。這是我們經常對恐同者說的話，其實我們對愛滋病病毒 (HIV) 也是一樣，對它的恐懼，也是源於無知。

有得醫嗎？有即時生命危險嗎？要怎樣面對這個疾病？這是也許是旁人因無知而對這個疾病的恐懼。感謝 C.H.O.I.C.E. 的姑娘、組長們和戰友們在我由快速測試、陽性反應、確診、到排期看醫生，甚至到現在生活工作感情等都給予無限的支援，悉心解釋這個疾病和應對方法，對我們關心得無微不至。

因為 C.H.O.I.C.E.，讓我對這個疾病不再無知，不再恐懼。感染也許不是選擇，但如何應對則是選擇。我很感恩，我選擇了 C.H.O.I.C.E.，C.H.O.I.C.E. 亦選擇了我。

服務使用者 黃生

曾經有次發生了高風險性行為，我看了很多網站及網上資料，令我懷疑身體出現了很多愛滋病病毒的徵狀，心裏真的非常害怕，但又不能跟朋友家人講我的擔心，有段時間我都覺得很快就「痴線」。在網上搜尋到再思有諮詢服務，職員很好地又不厭其煩地每天解答我很多的問題，又幫我一起找方法放鬆心情和減壓。之後做了快速測試，終於沒事可以讓我放心，但也令我日後會更加小心及注重健康。



**Summary
Financial Report**



財務撮要

**COMMUNITY HEALTH ORGANISATION FOR INTERVENTION, CARE
AND EMPOWERMENT LIMITED**

再思社區健康組織有限公司

(Incorporated in Hong Kong and limited by guarantee)

**STATEMENT OF INCOME AND EXPENDITURE AND OTHER COMPREHENSIVE INCOME
YEAR ENDED 31 DECEMBER 2017**

	2017 HK\$	2016 HK\$
INCOME		
Donation income	771,175	723,116
Charity sales	20,700	21,900
Bank interest income	78	240
Sundry income	120,739	84,992
Exchange gain	5	917
	912,697	831,165
PROJECT GRANTS	5,687,890	2,723,497
PROJECT EXPENDITURES	(4,298,800)	(2,994,315)
	1,389,090	(270,818)
	2,301,787	560,347
ADMINISTRATIVE EXPENDITURES		
Activity service fee	92,283	100,214
Bank charges	1,500	1,600
Bank overdraft interest	-	1
Building management fee	3,375	2,500
Center activities	171	81
Computer and accessory expenses	53,790	-
Electricity	9,779	9,341
Insurance	8,480	18,052
Operating lease rental on land and buildings	224,800	150,000
Less: rental classified under project expenditures	(134,375)	(137,500)
Printing, postage and stationery	12,256	5,927
Repairs and maintenance	16,000	-
Sundry expenses	18,663	754
Traveling	193	-
Volunteer allowance	-	320
	(306,915)	(151,290)
SURPLUS FOR THE YEAR	1,994,872	409,057
OTHER COMPREHENSIVE INCOME	-	-
TOTAL COMPREHENSIVE INCOME FOR THE YEAR	1,994,872	409,057

**COMMUNITY HEALTH ORGANISATION FOR INTERVENTION, CARE
AND EMPOWERMENT LIMITED**

再思社區健康組織有限公司

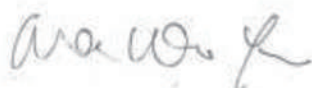
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STATEMENT OF FINANCIAL POSITION

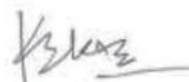
AS AT 31 DECEMBER 2017

	2017 HK\$	2016 HK\$
CURRENTS ASSETS		
Rental and other deposits	49,400	31,900
Prepayment	6,800	-
Cash and bank balances	5,726,484	3,726,505
	5,782,684	3,758,405
CURRENT LIABILITIES		
Accruals and other payables	(127,017)	(97,610)
NET ASSETS	5,655,667	3,660,795
RESERVES		
Accumulated funds	5,655,667	3,660,795

Approved and authorized for issue by the Council on 18 August 2018
On behalf of the Council



WAN WAI YEE
CHAIRMAN



KAM KAI MAN, JOSEPH
TREASURER

**COMMUNITY HEALTH ORGANISATION FOR INTERVENTION, CARE
AND EMPOWERMENT LIMITED**

再思社區健康組織有限公司

(Incorporated in Hong Kong and limited by guarantee)

STATEMENT OF CASH FLOWS

YEAR ENDED 31 DECEMBER 2017

	2017 HK\$	2016 HK\$
CASH FLOWS FROM OPERATING ACTIVITIES		
Surplus from operations	1,994,872	409,057
Increase in rental and other deposits	(17,500)	-
Increase in prepayment	(6,800)	-
Increase in accruals and other payables	29,407	53,275
Net cash generated from operating activities	1,999,979	462,332
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR	3,726,505	3,264,173
CASH AND CASH EQUIVALENTS AT END OF YEAR	5,726,484	3,726,505
Analysis of cash and cash equivalents:		
Cash and bank balances	5,726,484	3,726,505

In the management of HIV,

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Now is the time



WORKING ON BEHALF OF
ViiV HEALTHCARE IN HIV



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HKRX/DTG3TC /0012/18 (09/2020)
Date of preparation: 13/10/2018

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GIVE YOUR PATIENTS THE STRENGTH TO POWER THEIR TOMORROW

A single-tablet regimen that contains
DESCOVY® (FTC/TAF) to form a complete
antiretroviral therapy¹

Genvoya®
elvitegravir 150mg/cobicistat 150mg/emtricitabine
200mg/tenofovir alafenamide 10mg tablets

THE POWER FOR WHAT'S AHEAD™

Genvoya® showed statistically superior efficacy vs.
EVG/COBI/FTC/TDF at Week 144 and non-inferior efficacy
at Week 48 and 96 in treatment-naïve patients*

**BUILT ON
DESCOVY®**
emtricitabine
tenofovir alafenamide

COBI, cobicistat; CI, confidence interval; EVG, elvitegravir; FTC, emtricitabine; HIV, human immunodeficiency virus; RNA, ribonucleic acid; TDF, tenofovir disoproxil fumarate.

* GENVOYA® had statistically superior efficacy (HIV-1 RNA < 50 copies/mL) vs. EVG/COBI/FTC/TDF at Week 144: 84% vs. 80% (treatment difference 4.2%; 95% CI 0.6 to 7.8). GENVOYA® had non-inferior efficacy vs. EVG/COBI/FTC/TDF at Week 48: 92% vs. 90% (treatment difference 2.0%; 95% CI -0.7 to 4.7) and at Week 96: 87% vs. 85% (treatment difference 1.5%; 95% CI -1.8 to 4.8).

Genvoya® Abbreviated Prescribing Information (Version: HK-OCT15-EU-OCT15+CCDSV5)

Presentation: Green, capsule-shaped, film-coated tablet, debossed with "GSI" on one side and "510" on the other side of tablet. **Indications:** Treatment of adults and adolescents (aged 12 years and older with body weight at least 35 kg) infected with human immunodeficiency virus-1 (HIV-1) without any known mutations associated with resistance to the integrase inhibitor class, emtricitabine or tenofovir. **Dosage:** Adults and adolescents aged 12 years and older, weighing at least 35 kg: One tablet to be taken once daily with food. **Elderly:** No dose adjustment is required. **Renal impairment:** No dose adjustment is required in adults or adolescents (aged at least 12 years and of at least 35 kg body weight) with estimated creatinine clearance (CrCl) ≥ 30 mL/min. Genvoya should not be initiated in patients with estimated CrCl < 30 mL/min. Genvoya should be discontinued in patients with estimated CrCl that declines below 30 mL/min during treatment. **Hepatic impairment:** No dose adjustment is required in patients with mild (Child Pugh Class A) or moderate (Child Pugh Class B) hepatic impairment. Genvoya has not been studied in patients with severe hepatic impairment (Child Pugh Class C); therefore, Genvoya is not recommended for use in patients with severe hepatic impairment. **Paediatric population:** The safety and efficacy of Genvoya in children younger than 12 years of age, or weighing < 35 kg, have not yet been established. No data are available. **Women of childbearing potential/contraception in males and females:** Use of Genvoya should be accompanied by use of effective contraception. **Pregnancy:** Genvoya should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus. **Breast-feeding:** Genvoya should not be used during breast-feeding. **Fertility:** There are no data on fertility from the use of Genvoya in humans. **Contraindications:** Hypersensitivity to the active substances or to any of the excipients; Co-administration with the following medicinal products due to the potential for serious or life-threatening adverse reactions or loss of virologic response and possible resistance to Genvoya: alpha-1-adrenoreceptor antagonists: alfuzosin; antiarrhythmics: amiodarone, quinidine, anticonvulsants: carbamazepine, phenobarbital, phenytoin; antimycobacterials: rifampicin; ergot derivatives: dihydroergotamine, ergometrine, ergotamine; gastrointestinal motility agents: cisapride; herbal products: St. John's wort (*Hypericum perforatum*); HMG Co-A reductase inhibitors: lovastatin, simvastatin; neuroleptics: pimozide; PDE-5 inhibitors: sildenafil for the treatment of pulmonary arterial hypertension; sedatives/hypnotics: orally administered midazolam, triazolam. **Warnings and Precautions:** While effective viral suppression with antiretroviral therapy has been proven to substantially reduce risk of sexual transmission, a residual risk cannot be excluded. **Precautions to prevent transmission** should be taken in accordance with national guidelines. **Patients co-infected with HIV and hepatitis B or C virus:** Safety and efficacy of Genvoya in patients co-infected with HIV-1 and hepatitis C virus (HCV) have not been established. **Discontinuation of Genvoya therapy in patients co-infected with HIV and HBV** may be associated with severe acute exacerbations of hepatitis. **Close monitoring with both clinical and laboratory follow-up for at least several months after stopping treatment** should be conducted. **Liver disease:** Safety and efficacy of Genvoya in patients with significant underlying liver disorders have not been established. **Patients with pre-existing liver dysfunction** have an increased frequency of liver function abnormalities during combination antiretroviral therapy (CART) and should be monitored according to standard practice. **Blood lipids and glucose:** Levels of blood lipids and glucose may increase during antiretroviral therapy. **Mitochondrial dysfunction:** Nucleoside and nucleotide analogues have been demonstrated in vitro and in vivo to cause a variable degree of mitochondrial damage. **Any child exposed in utero to nucleoside and nucleotide analogues, even HIV negative children,** should have clinical and laboratory follow up and should be fully investigated for possible mitochondrial dysfunction in case of relevant signs or symptoms. **Immune Reactivation Syndrome:** In HIV infected patients treated with CART, immune reactivation syndrome has been reported. **Any inflammatory symptoms** should be evaluated and treatment instituted when necessary. **Autoimmune disorders (such as Graves' disease)** have also been reported to occur in the setting of immune reactivation. **Opportunistic infections:** Patients receiving Genvoya may continue to develop opportunistic infections and other complications of HIV infection, and therefore should remain under close clinical observation by physicians experienced in the treatment of patients with HIV associated diseases. **Osteonecrosis:** Cases of osteonecrosis have been reported particularly in patients with advanced HIV disease and/or long-term exposure to CART. **Patients should be advised to seek medical advice if they experience joint aches and pain, joint stiffness or difficulty in movement.** **Nephrotoxicity:** A potential risk of nephrotoxicity resulting from chronic exposure to low levels of tenofovir due to dosing with tenofovir alafenamide cannot be excluded. **Co-administration of other medicinal products:** See Contraindications and Drug interactions section in full prescribing information. **Genvoya should not be co-administered with other antiretroviral medicinal products:** Female patients of childbearing potential should use either a hormonal contraceptive containing at least 30 Qg ethinylestradiol and containing norgestimate as the progestagen or should use an alternative reliable method of contraception. **The effect of co-administration with oral contraceptives containing progestagens other than norgestimate is not known and, therefore, should be avoided;** Genvoya contains lactose monohydrate, patients with rare hereditary problems of galactose intolerance, the Lapp lactase deficiency, or glucose-galactose malabsorption should not take Genvoya. **Adverse reactions:** Dizziness has been reported during treatment with Genvoya. The most frequently reported adverse reactions in clinical studies were nausea, diarrhoea and headache. **Autoimmune disorders (such as Graves' disease)** have been reported. **Drug interactions:** Genvoya should not be co-administered with other antiretroviral medicinal products. Genvoya should not be administered concomitantly with medicinal products containing tenofovir disoproxil (as fumarate), lamivudine or abacavir dipivoxil used for the treatment of HBV infection. Genvoya should not be co-administered with medicinal products that are primarily metabolised by CYP3A. **Potential interactions between the components of Genvoya and the following co-administered medicinal products:** Antifungals (ketconazole/elvitegravir, itraconazole, voriconazole, posaconazole, fluconazole); Antimycobacterials (rifabutin/ elvitegravir/cobicistat); Anti-hepatitis C virus medicinal products (telaprevir/elvitegravir/cobicistat, bocoprevir); Macrolide antibiotics (clarithromycin, telithromycin); Anticonvulsants (carbamazepine/elvitegravir/cobicistat); Glucocorticoids: All corticosteroids excluding cutaneous products (betamethasone, budesonide, fluticasone, mometasone, prednisone, triamcinolone); Antacids (magnesium/aluminum-containing antacid suspension/elvitegravir/ritonavir); Food supplements (multivitamin supplements); Oral anti-diabetics (metformin); Oral contraceptives (norgestimate/ethinylestradiol/elvitegravir/cobicistat); Antiarrhythmics (digoxin, disopyramide, flecainide, systemic lidocaine, mexiletine, propafenone); Anti-hypertensives (metoprolol, timolol, amlodipine, diltiazem, felodipine, nicardipine, nifedipine, verapamil); Endothelin receptor antagonists (bosentan); Anticoagulants (warfarin, dabigatran); Inhaled beta agonist (salmeterol); HMG Co-A reductase inhibitors (atorvastatin, pitavastatin, lovastatin, simvastatin); Phosphodiesterase type 5 (PDE-5) inhibitors (sildenafil, tadalafil, vardenafil); Antidepressants (tricyclic antidepressants, trazodone, selective serotonin reuptake inhibitors, escitalopram); Immunosuppressants (ciclosporin, sirolimus, tacrolimus); Sedatives/hypnotics (buspiron, clorazepate, diazepam, estazolam, flurazepam, lorazepam, triazolam, zolpidem, orally administered midazolam/tenofovir alafenamide, intravenously administered midazolam/tenofovir alafenamide); Anti-gout (colchicine).

Before prescribing, please consult full prescribing information which is available upon request.

Genvoya, Descovy, BUILT ON DESCOVY and the respective logos are registered trademarks of Gilead Sciences, Inc., or its related companies.

References: 1. Genvoya Prescribing Information (Version: HK-OCT15-EU-OCT15+CCDSV5) 2. Arraras JR, et al. J Acquir Immune Defic Syndr 2017; 75(2): 211-218
Further information can be provided upon request.

HKGEN050 v1.0 12/13/2017

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INTRODUCING ODEFSEY®-
AN STR BUILT ON THE NEWEST BACKBONE
IN ARV THERAPY

THE SOLUTION TO A PEACEFUL TOMORROW

Odefsey® 
emtricitabine 200mg/rilpivirine 25mg/
tenofovir alafenamide 25mg tablets

ODEFSEY® is indicated for the treatment of adults and adolescents (aged 12 years and older with body weight at least 35 kg) infected with human immunodeficiency virus-1 (HIV-1) without known mutations associated with resistance to the non-nucleoside reverse transcriptase inhibitor (NNRTI) class, tenofovir or emtricitabine and with a viral load $\leq 100,000$ HIV-1 RNA copies/mL.

ARV=antiretroviral; STR=single tablet regimen; RNA=ribonucleic acid.
Reference: Odefsey® Hong Kong prescribing information.

Odefsey® Tablets

ABBREVIATED PRESCRIBING INFORMATION

ACTIVE INGREDIENT(S): Emtricitabine 200mg/ rilpivirine 25mg/ tenofovir alafenamide 25mg **INDICATION(S):** Treatment of adults and adolescents (aged ≥ 12 years with body weight ≥ 35 kg) infected with HIV-1 without known mutations associated with resistance to the non-nucleoside reverse transcriptase inhibitor (NNRTI) class, tenofovir or emtricitabine and with a viral load $\leq 100,000$ HIV-1 RNA copies/mL. **DOSAGE & ADMINISTRATION:** One tablet once daily with food. Do not initiate Odefsey in patients with estimated $\text{CrCl} < 30 \text{ mL/min}$. Discontinue Odefsey in patients with estimated $\text{CrCl} < 30 \text{ mL/min}$ during treatment. Odefsey should be used with caution in patients with moderate hepatic impairment. Odefsey is not recommended for use in patients with severe hepatic impairment. **CONTRAINDICATIONS:** Hypersensitivity to the active substances or to any of the excipients. Other medicinal products containing tenofovir alafenamide, rilpivirine, tenofovir disoproxil or abacavir diphosphate. **SPECIAL WARNINGS & PRECAUTIONS:** Viral load failure and development of resistance. Insufficient data to justify use in patients with prior NNRTI failure. Resistance testing and/or historical resistance data should guide the use of Odefsey. **Cardiovascular:** Odefsey should be used with caution when co-administered with medicinal products with a known risk of Torsade de Pointes. Patients co-infected with HIV and hepatitis B or C virus. Patients with chronic hepatitis B or C treated with antiretroviral therapy are at an increased risk for severe and potentially fatal hepatic adverse reactions. Patients co-infected with HIV and HBV who discontinue Odefsey should be closely monitored with both clinical and laboratory follow-up for at least several months after stopping treatment. **Liver disease:** Patients with pre-existing liver dysfunction, including chronic active hepatitis, have an increased frequency of liver function abnormalities during combination antiretroviral therapy (CART) and should be monitored according to standard practice. If there is evidence of worsening liver disease in such patients, interruption or discontinuation of treatment must be considered. **Immune Reactivation Syndrome:** In HIV infected patients with severe immune deficiency at the time of institution of CART, an inflammatory reaction to asymptomatic or residual opportunistic pathogens may arise and cause serious clinical conditions, or aggravation of symptoms. Any inflammatory symptoms should be evaluated and treatment instituted when necessary. **Opportunistic infections:** Patients receiving Odefsey may continue to develop opportunistic infections and other complications of HIV infection, and therefore should remain under close clinical observation by physicians experienced in the treatment of patients with HIV associated diseases. **Osteonecrosis:** Cases of osteonecrosis have been reported particularly in patients with advanced HIV disease and/or long-term exposure to CART. Advise patients to seek medical advice if experience joint aches and pain, joint stiffness or difficulty in movement. **Excipients:** Odefsey contains lactose monohydrate. Patients with rare hereditary problems of galactose intolerance, the Lapp lactase deficiency, or glucose-galactose malabsorption should not take Odefsey. **SIDE EFFECTS:** Nausea, diarrhea, headache, dizziness, abnormal dreams, insomnia. Refer to the full prescribing information for other side effects. **PREGNANCY & LACTATION:** It is preferable to avoid the use of Odefsey during pregnancy. It is recommended that HIV infected women do not breast feed their infants under any circumstance. **INTERACTIONS:** CYP enzyme inhibitors. QT prolonging medicinal products. **PLEASE REFER TO FULL PRESCRIBING INFORMATION BEFORE PRESCRIBING.** Odefsey aPr ver 1.0

Odefsey 
emtricitabine 200mg/rilpivirine 25mg/
tenofovir alafenamide 25mg tablets

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鳴謝 Acknowledgement

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捐助金額 Donation Amount

- ☐ HK\$100
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☐ HK\$1,000
☐ 其他 Other HK\$ _____

付款方式 Payment method

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 Cheque – payable to “Community Health Organisation for Intervention, Care and Empowerment Limited”
☐ 直接存入「再思社區健康組織有限公司」戶口, 匯豐銀行戶口號碼 039-5-074925
 Direct Pay-in to “Community Health Organisation for Intervention, Care and Empowerment Limited” at HSBC account no: 039-5-074925

請將支票 / 存款收據連同此表格寄回: 香港九龍旺角通菜街 1A-1L 威達商業大廈 1001A 室
「再思社區健康組織有限公司」收, 以便發出收據。

Please send your cheque / pay-in slip together with this form to **Community Health Organisation for Intervention, Care and Empowerment Limited**, Rm1001A, Witty Commercial Building, 1A-1L Tung Choi Street, Mongkok, Kowloon, Hong Kong.

個人 / 機構資料 Personal / Organisation Details

- ☐ 個人 Personal ☐ 機構 Organisation (Organisation Name : _____)

聯絡人 Contact Person: _____

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Community Health Organisation for
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