



BHP Chief Executive Officer, Dr Joseph Makhema updating the Media on BHP Achievements

BHP Celebrates Milestones

The Botswana Harvard AIDS Institute Partnership (BHP) on the 2nd June 2022 hosted a Press Conference to celebrate its milestone achievements realized over the years since the establishment of the research institute in 1996. Twenty-six years later, BHP has grown to become a world-renowned public health institute that has contributed significantly to knowledge generation through clinical and laboratory research whose outcomes have influenced public health policies in Botswana

and globally.

Briefing the media on the BHP landmark achievements, BHP Chief Executive Officer (CEO), Dr Joseph Makhema applauded BHP Scientists and staff, BHP partners and collaborators for these achievements and their commitment towards the mandate of the institution.

He commended them on the excellent attainments and recognition of the BHP as a key player in HIV/AIDS research especially on the prevention of

HIV vertical transmission, HIV/AIDS treatment, care and prevention, both locally and globally.

“These successes have been further highlighted by the discovery of the Omicron variant of SARS-CoV-2 by Dr Sikhulile Moyo and his team at the BHP,” said Dr Makhema who attributed BHP’s success to collaborations with various stakeholders across the world, leveraging on each other’s capabilities and specialties to deliver the BHP research mandate.



BHP Laboratory Director, Dr Sikhulile Moyo

The partnerships include research institutions and Universities both locally and abroad. “Partnership and networking is one of our key strategic themes and is at the core of our mandate” Dr Makhema continued. BHP was established through a partnership between the Botswana Ministry of Health and the Harvard T.H. Chan School of Public Health (HSPH) Harvard University in the United States of America.

The global recognition of the discovery of the Omicron variant by Laboratory Director, Dr Sikhulile Moyo and promptly alerting the world of this highly mutating variant has resulted in Dr Moyo jointly with Prof Tulio D’Oliviera from RSA(who independently also discovered the Omicron) being recognized by the TIME Magazine by listing them individually amongst TIME 100 list of 100 most influential people around the world in the year 2022.

BHP took a leading role in COVID-19 testing and SARS-CoV-2 surveillance to study the SARS-COV-2 virus and advise on appropriate strategies to contain the spread. “The discovery of the Omicron was a result of our robust COVID-19 genomic surveillance which we leveraged on our rich experience in HIV surveillance that we have been conducting over the years,” said Dr Makhema.

BHP also led the identification of the HIV subtype circulating in Botswana in 1996 and has been instrumental in influencing and contributing to development of appropriate policies for HIV/AIDS treatment, care and management over the years in Botswana. Through a series of studies including “The

Mashi and Mmabana Studies.” BHP influenced the global health policy on vertical HIV transmission as well as infant breastfeeding which has helped in significant reduction of vertical HIV transmission from 40% in the year 2001 to less than 1% by 2020 resulting in Botswana receiving the WHO award for near elimination of vertical HIV transmission on the 2nd December 2021.

BHP also contributed immensely on capacity building for health workers on HIV /AIDS knowledge through the KITSO and the Master Trainer programmes which trained different health care cadres including; Medical Practitioners, Nurses, Pharmacists, and Laboratory scientists. The latter group facilitating ultimate decentralization of laboratory HIV testing capacity from the Botswana Harvard HIV Reference Laboratory to District Hospital Laboratories.

Further capacity building and training, has been facilitated through BHP solicited Capacity building initiatives and grants from the Wellcome Trust, European Development Capacity Training Programme, The United States National Institute of Health Fogarty Training programme and through collaboration with partner Universities to train Master of Science, Doctor of Philosophy ,Post Doctorate Fellowships and next generation research scientists and investigators. BHP has trained at least 10 Masters and 10 PhDs over the last ten years. BHP staff is also involved in different Ministry of Health Technical Committees where they give expert advise on different technical and policy issues.

Selected BHP Milestones

Year	Milestone Achieved
2000	The KITSO AIDS Training Program (“KITSO” means “knowledge” in Setswana) was founded to provide the continuing medical education for health professionals needed to address the HIV epidemic. By November 2003 the KITSO AIDS Training Program had trained 1,000 Health Care Workers in AIDS Clinical Care Fundamentals, a course developed to support the National ART Program (Masa) rollout to 32 ARV sites and over 100 satellite clinics throughout Botswana. Local researchers successfully isolated HIV from patient specimens for the first time in Botswana at the BHHRL.
2001	The Mashi Study: Prevention of Mother-to Child-Transmission (PMTCT) as BHP’s first clinical trial to be conducted in Botswana was officially opened in March at three research sites (Molepolole, Mochudi and Ramotswa) led by Drs Essex, Thior, Lockman, and Shapiro.
2002	The first large-scale clinical trial to investigate antiretroviral (ARV) therapy in adults, known as the Tshepo Study, opened, and BHP assisted with initiation of the national ARV therapy (ART) program, the first free, public ART program on the continent.
2003	The Ministry of Health and the Maiteko a Tshireletso HIV Vaccine Initiative officially launched the first Phase I HIV vaccine trial in Botswana in June, with the injection of the first volunteer. The trial was the first of its kind in southern Africa. The Dikotlana Micronutrient Therapy Study opened for enrolment.
2005	The first results from the Mashi Study were presented at the 12th Conference on Retroviruses and Opportunistic Infections (CROI). The Botswana Harvard PEPFAR Program was fully established to provide training, mentoring and technical support for Botswana’s national ARV treatment and HIV testing and monitoring programs. Enrolment opened for the “Netefatso” HIV Discordant Couples Study, the “Botsogo” Study of the natural history of HIV-1C disease progression, the “Basadi” Study of HIV genital shedding, and the “Thari” (OCTANE) Study on optimal combination therapy following use of nevirapine
2006	Mma Bana Study, A Randomized Trial of Lopinavir/Ritonavir/Combivir vs. Abacavir/Zidovudine/Lamivudine for Virologic Efficacy and the Prevention of Mother-to-Child HIV Transmission among Breastfeeding Women in Botswana was initiated.
2007	Thibelo Study HPTN 052, A Randomized Trial to Evaluate the Effectiveness of Antiretroviral Therapy plus HIV Primary Care versus HIV Primary Care Alone to Prevent the Sexual Transmission of HIV-1 In Serodiscordant Couples, Final outcomes informed anti retroviral treatment as prevention(TasP)
2013	The Ya Tsie Study (Botswana Combination Prevention Project, BCPP) was launched to evaluate whether it is feasible and acceptable to scale up a combination of prevention interventions and whether the interventions would lower the rate of new HIV infections in adults within a community. This was the largest community-based HIV/AIDS prevention study ever conducted in Botswana, conducted in 30 communities over a period of five years.
2014	The Tsepamo Study launched, establishing nationwide birth outcomes surveillance in Botswana.
2015	The EIT Study was initiated, marking the beginning of the pediatric HIV cure initiatives at BHP.
2020	To respond to the global pandemic of COVID-19, BHP rapidly began conducting COVID-19 research, and supported SARS-CoV-2 testing and genomic surveillance to augment government efforts to fight the disease. BHP also began conducting COVID-19 clinical studies and vaccine trials.
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2022	BHP Laboratory Director, Dr Sikhulile Moyo named by TIME Magazine to its annual TIME100 list of the 100 most influential people in the world for his role in the discovery of the Omicron.

Dr Sikhulile Moyo named to TIME's annual TIME100 list of the 100 most influential people in the world



BHP Laboratory Director, Dr Sikhulile Moyo

TIME Magazine has named Dr Sikhulile Moyo to the 2022 TIME 100, its annual list of the 100 most influential people in the world. Dr Moyo is the Research Laboratory Director at the Botswana Harvard AIDS Institute Partnership (BHP), a health research and training collaboration established in 1996 between the Government of Botswana and the Harvard T.H. Chan School of Public Health.

"The TIME 100 list, now in its nineteenth year, recognizes the impact, innovation, and achievement of the world's most influential individuals," stated the Times citation and associated Press release.

Dr. Moyo (at BHP) and Professor Tulio de Oliveira (at the Stellenbosch University and the University of KwaZulu-Natal) and their colleagues are jointly credited with the discovery of the B.1.1.529 SARS-CoV-2 variant, subsequently named Omicron by the World Health Organization. Omicron and its sub variants have become the dominant SARS-CoV-2 variants causing

COVID-19 globally.

"This discovery demonstrates the potential to leverage existing local human and infrastructural capacity to participate in cutting-edge scientific pursuits for the benefit of local, regional, and global scientific public health advances," said Dr Joseph Makhema, Chief Executive Officer of the BHP.

"We regard this recognition of one of our own, as a vote of confidence in the quality of scientific expertise that reside in our country. It is a true demonstration that Botswana can be counted amongst a league of countries that have developed the requisite scientific knowledge and infrastructure that can help us and the world to respond to current and future health challenges," said Ms Grace Muzila, Permanent Secretary in the Ministry of Health.

Dr. Moyo has served as Co-Scientific Scientist to the Botswana Presidential COVID-19 Task Force, working closely with the National Public Health Laboratory and Ministry of Health and Wellness (MOHW) on the COVID-19 response.

"It is gratifying to see the scientific contribution made by Dr. Moyo recognized in this manner," said Dr. Roger Shapiro, Associate Professor of Immunology and Infectious Diseases at HSPH and Chair of the Board of Directors of BHP.

"He provided an early warning to the world about Omicron, and we all owe a debt to him and to his team of dedicated scientists in Botswana."

Dr. Shahin Lockman (at HSPH, BHP and Brigham and Women's Hospital) adds, "the early discovery of the Omicron variant by Dr. Moyo and colleagues is one example of the critical importance of sustained support of African scientists".



Dr Sikhulile Moyo at the TIME 100 Recognition Dinner at The Jazz, Lincoln Center, New York



Dr Sikhulile Moyo with Bill Gates at the TIME 100 Recognition Dinner at The Jazz, Lincoln Center, New York



Dr Sikhulile Moyo being interviewed by Japan Media House, MAINICHI at the lab about the discovery of Omicron.



BHP Laboratory Director, Dr Sikhulile Moyo explaining how Omicron was discovered at the BHP Laboratory

BHP improves conditions of service



Human Resources and Operations Manager, Beauty Malumbela

In an effort to improve conditions of service and benefits for staff, Botswana Harvard AIDS Institute Partnership (BHP) has implemented changes to the Maternity Policy and medical aid insurance cover.

Section 29 of Maternity Policy of on BHP Conditions of service has been amended effective July 01, 2022. The amended clause now states that “employees on maternity leave will be paid 100% of their monthly salary. The employees must provide a certificate from a registered doctor or midwife stating the expected date of confinement and within 21 days of confinement, a certificate stating the actual date of confinement. BHP will grant female employee a paid daily period of absence not exceeding one hour in total to nurse the child up to 12 months of age.”

The maternity clause in the prior section allowed payment of only 60% of monthly salary for people on maternity leave.

BHP also made changes in medical aid insurance cover by transitioning low cadre staff to Botsogo Medical Aid which pays 100% of medical fees without

employees paying the 10% co-payment requirement. Speaking at the Study Coordinators meeting on July 07, 2022, Human Resources and Operations Manager, Beauty Malumbela revealed that the changeover was necessitated by hesitancy to seek medical assistance by some low cadre staff who found the 10% co-payment requirement prohibitive and expensive.

“The cover will give the affected employees assurance to freely seek medical assistance without undue constraints as their medical bills will be 100% covered by the medical insurance within stipulated appropriations for specific medical conditions” Malumbela said.

The rest of the BHP staff shall however remain on BOMAid insurance cover. Malumbela also stated that BHP is at an advanced stage of a review of staff remuneration and benefits with a view of harmonizing staff packages across different cadres and projects. She said that while the review project shall include grading of jobs this was NOT a salary review. This project would lay the foundation for future review of salary scales and development of a BHP pay philosophy.

On July 25, 2022, the BHP Director of Finance and Grants, Cornelius Gaetsaloe announced adjustments to mileage claim paid to staff members using their own vehicles on official duties. The claim shall be P3.50 per kilometer effective August 01, 2022.

To claim this benefit, employees using own vehicles for BHP official business shall request prior authorization from their line managers or supervisors and sign the BHP Travel Authorization Form. The claim shall be executed upon submission of detailed mileage claim indicating distance traveled, places visited and times, duly authorized and signed by supervisors.

Gaetsaloe noted that there will be no reimbursement for travel within the immediate Gaborone area and that no claim will be accepted for any journey less than 25km for senior staff members.

“In the event the employee does not use their personal vehicle and does not receive a car/travel/site coverage allowance as compensation, the employees will be reimbursed at standard public transport fare,” Gaetsaloe further explained.

BHP Amplifies Stakeholder Engagement



CoVPN 3008 Team engaging with visitors at the BHP Stall

Community Engagement is critical for building relationships between the researchers and various stakeholders involved in medical research. This entails community involvement in the research process from early stages of protocol development, to implementation, and dissemination of study results and their impact on public health.

This has been facilitated through establishment of the Community Advisory Boards (CAB's) for various research studies and ultimate direct engagement with communities at open fora such as Kgotla meetings to further explain the study. In order to facilitate recruitment and retention in studies, BHP has heightened its community and stakeholder engagement to enlighten them on BHP's mandate, ongoing research and the outcomes of research studies.

In response to the COVID-19 pandemic, BHP instituted and participated in multiple COVID-19 clinical and vaccine research. In relation to the COVID-19 vaccine research portfolio, BHP implemented the following community engagement activities; engaged the community at their workplaces for COVID-19 vaccine

education, recruitment, arranging for consenting and COVID-19 vaccination at work places as allowable by study regulatory processes. This made it convenient for workers to be vaccinated, participate in the study while not severely disrupting work activities and schedules. A specific focus of COVID-19 vaccine Education was aimed at addressing vaccine hesitancy, myths and misconceptions.

Community engagement allows BHP to have a deep appreciation of various community stakeholders' perspectives, including what their health needs are and their research priorities. This has helped to build trust as it assists in addressing challenges faced by potential study participants.

The BHP Community Engagement Coordinator, Ernest Moseki in spearheading community engagements also arranged meetings with individual study participants to discuss their journey as they participated in the various studies conducted by BHP in order to understand participants experiences with study procedures and challenges.

This was undertaken in order to enhance understanding of potential benefits and risks of research participation. BHP also takes advantage of events that attract large number of people to market the organization and its research mandate.

On May 28 to 29, 2022, BHP participated at the Tlokweng Health Expo to recruit participants for the CoVPN 3008 “A Multi-Center, Randomized, Efficacy Study of an Early vs Deferred Moderna COVID-19 Vaccine in Regions with SARS-CoV-2 Virus Variants”

The CoVPN 3008 study team educated, empowered and motivated the public to participate in the vaccine study and to be vaccinated against COVID-19.

The institute also took part at the My STEM Expo hosted in Mochudi on the 3rd of June 2022 where it educated students on the role played by BHP and its contribution to science as well as Science related career choices available at BHP. BHP also shared with students the importance of participating in research and the process involved in study participation.



CoVPN 3008 Study Coordinator, Dr Alice Serututshi (left) explaining what the study is all about.



CoVPN 3008 Pharcy Technician Batho Kenosi handing over a token of appreciation to the Minister of Communications, Knowledge and Technology, Mr Thulaganyo Segokgo.



BHP Community Engagement Coordinator, Ernest Moseki interacting with students at My STEM Expo in Mochudi

BOTSOGO celebrates 10th Anniversary



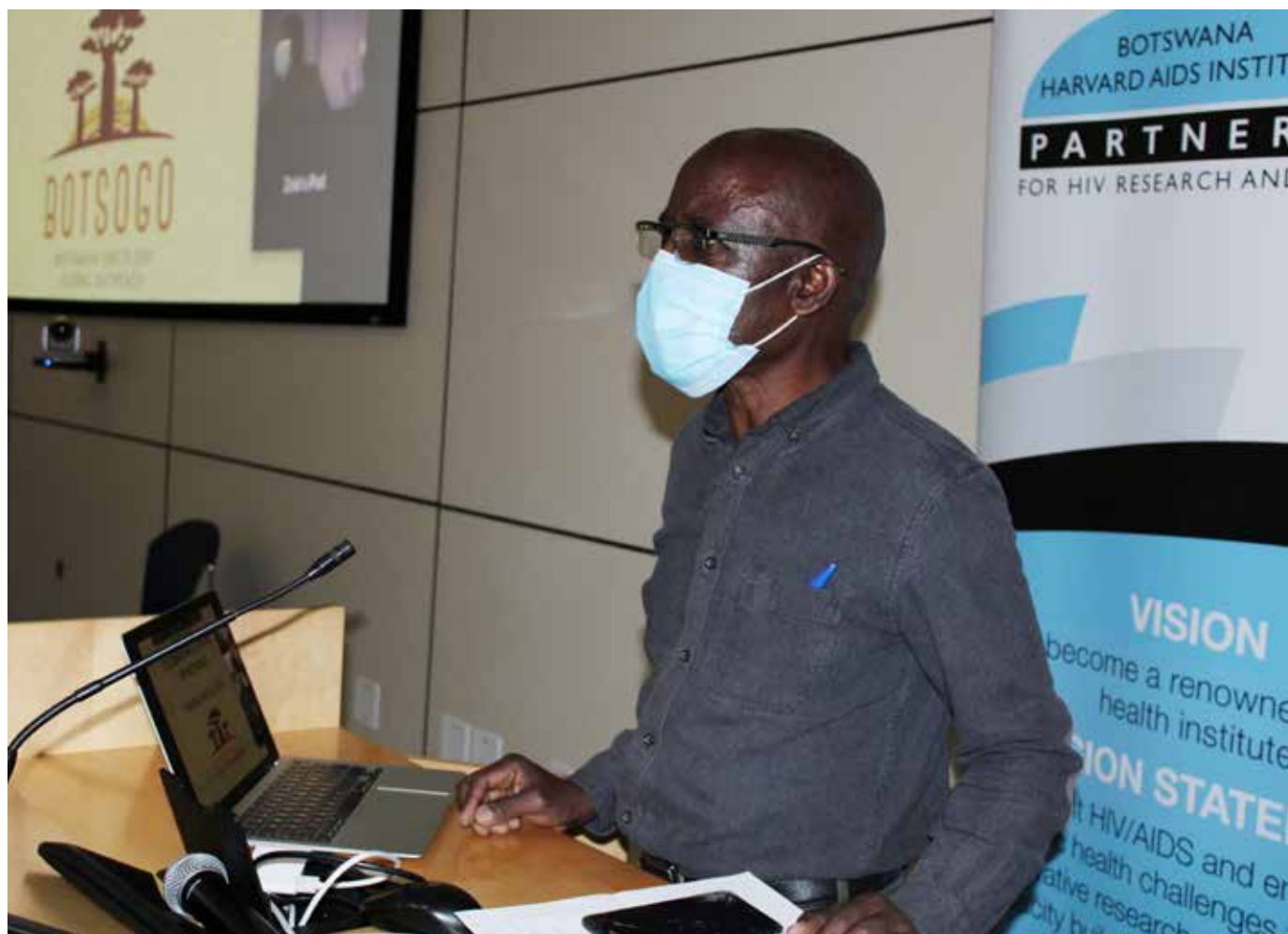
Radiation Oncologist at Gaborone Private Hospital (GPH) Dr Memory Bvochora-Nsingo, one of key BOTSOGO clinicians in Botswana presenting at the event.

The Botswana Oncology Global Outreach (BOTSOGO) program celebrated its 10 years anniversary on Tuesday July 12, 2022 at a Tumor Board held at the University of Botswana Library Auditorium. The Tumor Board reflected on the impact of BOTSOGO on cancer management in Botswana in the past 10 years since inception in 2012.

BOTSOGO hosts monthly Tumor Board to discuss various cancer cases among oncology experts attending. Participating institutions include Botswana Harvard AIDS Institute Partnership, Princess Marina Hospital, Gaborone Private Hospital, Sir Ketumile Masire Teaching Hospital, Nyangabwe Referral Hospital, Scottish Livingstone Hospital and the United States; Harvard T. H. Chan School of Public Health, Massachusetts General

Hospital, Brigham and Women's Hospital, Harvard Medical School and BIDMC. The Tumor Board seeks to devise the best cancer treatment and care. The first cancer case presented at the first Tumor Board in 2012 was that of cervical cancer, hence the highlight of the 10th year anniversary of the BOTSOGO.

BOTSOGO was established through a partnership with Ministry of Health (MOH), Botswana Harvard AIDS Institute Partnership (BHP) and Massachusetts General Hospital (MGH) in US to facilitate bilateral exchanges in cancer care and treatment, support tumor board and facilitate training and availability of medical equipment needed in cancer care for Botswana.



BHP Deputy Chief Executive Officer, Dr Mompoti Mmalane giving Welcome Remarks

Giving the welcome remarks at the event, BHP Deputy Chief Executive Officer, Dr Mompoti Mmalane hailed the strong collaboration and partnership between BHP and MGH that has led to the formation of BOTSOGO. He noted that cancer of the cervix is the most diagnosed cancer in Botswana and is the leading cause of cancer deaths.

Dr Mmalane highlighted that 80% of cervical cancer deaths occur in low resource settings. He acknowledged BOTSOGO for prioritizing cancer care, stating that with proper resources, cervical cancer is both preventable and treatable.

Radiation Oncologist at Gaborone Private Hospital (GPH) Dr Memory Bvochora-Nsingo one of key

BOTSOGO clinicians in Botswana presented two cases of cervical cancer survivors as success highlights of the anniversary. This included the first case presented at the first Tumor Board, underlining the treatment and management of these cases 10 years later. The two cancer survivors gave their testimonies, relaying their treatment journey to recovery. Both patients are now cured of cancer and are living their best life, disease free.

Presenting on survival issues, Dr Bvochora-Nsingo emphasized the importance of following up patient's post-treatment to monitor progress and emergent issues that would need to be speedily attended to in order to manage the disease. The second testimony highlighted

the importance of patient follow up and how this had saved her life after presenting with a neck mass in 2016 post brachytherapy treatment in 2012. The follow-up prompted a speedy second treatment with chemotherapy and she is disease free to date.

Dr Memory revealed that whilst they have managed to save many lives threatened by cancer, there has been a challenge of lack of much needed resources and equipment critical for cancer care and treatment.

She noted that there was no in-country brachytherapy until 2012 and patients had to travel to South Africa for completion of therapy.

“Brachytherapy is an essential component for curative treatment of cancer of the cervix and is also useful for palliation,” said Dr Memory, adding that GPH in partnership with the Government of Botswana introduced brachytherapy in Botswana in 2012, coinciding with the BOTSOGO inception visit.

BOTSOGO facilitated donations of critical equipment through international partners and philanthropy. It has also facilitated the donation of much needed in care resources including brachytherapy garments, vaginal dilators, endometrial cancer applicator sets and other equipment and needed accessories.

BOTSGO also facilitated training on the use of the equipment by experienced clinicians. In recognition of its role in the fight against cancer, BOTSOGO was in 2013 honored by the Mass General Cancer Centre at “the one hundred” gala in Boston. The 100 honours 100 individuals and organizations leading the fight against cancer.

Dr Memory also highlighted some of the BOTSOGO supported journal publications over the ten years.

The tumor board ended with a remembrance of two departed colleagues who have been instrumental in the fight against cancer. The late Dr Herman D Suit was remembered for his contribution and invention of the Fletcher-Suit applicator used in intracavity brachytherapy. Dr Herman Suit died this year.

The emotional moments came during the remembrance of Remigio Makufa, a Senior Medical Physicist at GPH who succumbed to COVID-19 on June 28, 2021. Remi as he was affectionately known, was said to have been instrumental in radiation therapy planning, mapping, delivery and quality assurance of radiation treatment at the GPH .

Remi was part of the team involved in brachytherapy implementation. Remi’s wife struggled to hold back her tears when she was presented with a framed painted plaque in memory of her husband and his great work in medical physics. The emotional wife commended BOTSOGO for the kind gesture and said she was humbled that there are still people who remember the good work that her husband had been doing to save lives.



Remigio’s wife received a bouquet of flowers and a painted plaque in memory of her husband.



Isaac Nkele giving a speech on how wonderful it was working with Remigio Makufa.

Selected BHP Associated Research and Associated Investigators Publications

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3. Patient perspectives on delays in cervical cancer screening and follow-up care in Botswana: a mixed methods study. Rendle KA, Ramogola-Masire D, Monare B, Ogden SN, Toneff HK, Saia CA, Wainwright JV, Friebel-Klingner TM, Bazzett-Matabele L, Bhatia R, Bonner N, Ralefala TB, Vuylsteke P, Lockett R, Grover S. *BMC Womens Health*. 2022 May 28;22(1):195. doi: 10.1186/s12905-022-01777-z. PMID: 35643491
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7. An early warning system for emerging SARS-CoV-2 variants. Subissi L, von Gottberg A, Thukral L, Worp N, Oude Munnink BB, Rathore S, Abu-Raddad LJ, Aguilera X, Alm E, Archer BN, Attar Cohen H, Barakat A, Barclay WS, Bhiman JN, Caly L, Chand M, Chen M, Cullinane A, de Oliveira T, Drosten C, Druce J, Effler P, El Masry I, Faye A, Gaseitsiwe S, Ghedin E, Grant R, Haagmans BL, Herring BL, Iyer SS, Kassamali Z, Kakkar M, Kondor RJ, Leite JA, Leo YS, Leung GM, Marklewitz M, Moyo S, Mendez-Rico J, Melhem NM, Munster V, Nahapetyan K, Oh DY, Pavlin BI, Peacock TP, Peiris M, Peng Z, Poon LLM, Rambaut A, Sacks J, Shen Y, Siqueira MM, Tessema SK, Volz EM, Thiel V, van der Werf S, Briand S, Perkins MD, Van Kerkhove MD, Koopmans MPG, Agrawal A. *Nat Med*. 2022 Jun;28(6):1110-1115. doi: 10.1038/s41591-022-01836-w. PMID: 35637337.
8. Feasibility and lessons learned on remote trial implementation from TestBoston, a fully remote, longitudinal, large-scale COVID-19 surveillance study. Naz-McLean S, Kim A, Zimmer A, Laibinis H, Lapan J, Tyman P, Hung J, Kelly C, Nagireddy H, Narayanan-Pandit S, McCarthy M, Ratnaparkhi S, Rutherford H, Patel R, Dryden-Peterson S, Hung DT, Woolley AE, Cosimi LA. *PLoS One*. 2022 Jun 3;17(6):e0269127. doi: 10.1371/journal.pone.0269127. eCollection 2022. PMID:

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For Correspondence, contact the BHP Communications Office

Tapela Morapedi
 Communications Coordinator
 Botswana Harvard AIDS Institute Partnership
 Private Bag BO320, Gaborone
 Tel: 3903552, Ext: 105, Mobile: 76184239, Fax: 3903553
 Email: tmorapedi@bhp.org.bw

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Botswana Harvard AIDS Institute Partnership
Private Bag BO320 Gaborone
Plot No. 1836, Northring Road, Princess
Marina Hospital, Gaborone
Tel: +267 3902671, Fax: +267 3901284
Web: www.bhp.org.bw

