



HEARTBEAT

The Quarterly Newsletter of the MRC/UVRI Uganda Research Unit on AIDS VOL 3 Issue 1 - April 2016

DAPIVIRINE RING;

Could an HIV prevention solution for women be in sight?



Fast facts

- *Acts against:* HIV-1
- *Formulation:* 56 mm diameter Silicone matrix vaginal ring
- *Active ingredient:* Dapivirine
- *Length of action:* One month, with a three-month ring in development
- *Status:* Two Phase III trials reported

The Vaginal Ring Study



Vincent Basajja
Community Liaison Officer- Masaka

Results from two 'sister' studies, the Ring Study and ASPIRE, have shown that a monthly vaginal ring containing the antiretroviral drug (ARV) dapivirine can safely help prevent HIV-1 infection in women and may be an important HIV prevention option for women at risk of HIV infection.

The IPM 027 phase III trial, also known as the "Ring Study", was a multicentre, randomised, double blind, placebo controlled safety and efficacy trial. A total of 1959 healthy, sexually active, HIV negative women aged 18-45 and

at risk of acquiring HIV volunteered and were enrolled at 7 research centres in South Africa and Uganda. In Uganda, the study was conducted at the MRC/UVRI Masaka clinical trial site where 197 women were enrolled.

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Pamela Wairagala
Communications Officer

Dear Reader,
Welcome to the second edition of the Heartbeat this year; we are glad that you do take off time to read this Newsletter and once in a while send feedback.

This edition of the Heartbeat is the first that will be produced in both electronic and hard copy version to increase the circulation, especially among field based staff. We hope this will enable most if not all staff to get updates on what is happening here at the Unit.

Results of the Ring study were released at the CROI 2016 in Boston in February and provided hope for a female product in the HIV/AIDS prevention. Read about the results here and the various dissemination events that have been held for the different stakeholder audiences.

Mr. Simon Belcher, the former Director of Operations left the Unit at the end of April, after serving a five year tenure. We bring you a glimpse of what transpired at a farewell meeting that was organized by the Entebbe Administration team.

Do not miss an update on some of the new work that has commenced in the last quarter at the different field stations.

Thank you for the continued interest in the Heartbeat. We look forward to getting your feedback.

Happy Reading

Editorial Board

- ◆ Agatha Jagenda
- ◆ Godfrey Kalungi
- ◆ Joan Ikiriza
- ◆ John Kateregga
- ◆ Vincent Basajja
- ◆ Pamela Nabukenya Wairagala

To give feedback or submit an article contact the editorial team on; communication@mrcuganda.org



Prof. Pontiano Kaleebu
Director MRC/UVRI

Dear colleagues,

Welcome to yet another edition of the Heartbeat.

This quarter has been an extremely busy one, as most of the senior team has been engaged in preparing the current quinquennial report (QQR) as well as proposals for the next QQ; implementation of on-going work and new projects. Work on the QQR is still on-going and will only be completed towards the end of this year, following various review meetings.

Congratulations to the IPM team upon the successful completion of the Ring study, whose results were released in February at the 2016 CROI in Boston. The Ring Study and ASPIRE showed that a monthly vaginal ring containing the antiretroviral drug (ARV) dapivirine can safely help prevent HIV-1 infection in women and may be an important HIV prevention option for women at risk of HIV infection.

Congratulations also to Prof. Janet Seeley and the GHFW team upon receipt of a CDC/PEPFAR Award to continue work under the Good Health for Women Project; as well as to Dr. Jesus Salazar, Dr. Robert Downing, Dr. Rob Newton and Prof Pontiano Kaleebu upon receiving funds to conduct research on Uganda's vulnerability to the Zika Virus. The MRC-led Rapid Response received a total of 103 proposals and funding was awarded to 26 high quality projects with a combined value of £3.2m, one of which will be conducted by scientists at MRC/UVRI and the Uganda Virus Research Institute.

Following the successful launch of the MUH Plus and the approval of more funding towards the Thrive project, various study opportunities will be available. I encourage staff who are eligible to look out for the calls and apply for the available study grants.

The Unit received funding from the MRC (UK) towards the Unit's capital bid. Among the items funded are ten vehicles including a 67-seater bus that will serve the Masaka and Kyamulibwa field stations. funds to purchase a new next generation sequencing machine and a documentation management system.

On a low note, the Unit last month bid farewell to Mr. Simon Belcher, who has been the Unit's Operations' Director. During his five-year tenure, Simon contributed towards formulation and implementation of several policies, improvement of infrastructure across the Unit, including ensuring a faster and more reliable IT system. He also helped set up better and more compliant finance systems, including internal controls which have greatly improved our audit reports. We are grateful to his contribution and wish him success in his future assignments.

I would like to take this opportunity to welcome staff that have joined the Unit during the course of the last quarter and also thank those that have worked with the Unit and have moved on during the same period.

Unit receives Zika funds



Uganda has received an award from the MRC Zika Response Initiative to determine if the country is vulnerable to a Zika virus epidemic. The Zika virus was discovered in Uganda in 1947 in an experimental Rhesus monkey caged in the Zika forest. Since then, there has been no evidence of endemic or epidemic outbreaks of Zika infections in Uganda.

The emergence of a Zika virus strain in the Americas in 2015, different from the strain found in Africa, its association with babies born with small heads (microcephaly) and its spread to other countries prompted the World Health Organization to recognize Zika virus as a global health threat.

Investigators at the MRC/UVRI working with colleagues at the Uganda Virus Research Institute (UVRI) will screen for Zika virus in a large collection of mosquitoes known to transmit this virus to man using highly specific and sensitive molecular tests to assess the risk of an epidemic in Uganda.

Because Zika infection in humans is mostly asymptomatic and only a few individuals develop mild symptoms that are unspecific, it is easy for the virus to go unnoticed by the health system. The scientists will therefore, search for the virus or molecules (called antibodies) that indicate previous viral exposure in stored plasma samples collected from individuals with fever and rash of unknown causes.

Molecular analysis of the virus (if present) will allow scientists to determine how diverse and how long the virus has been circulating in Uganda.

Nevertheless, if no evidence of Zika virus is found, measures need to be taken to protect the human population in Uganda from infection from the more pathogenic strain found in other parts of the world.

Unit work listed in 'Ageing in Africa' Directory



Work from the Unit's Social Science programme has been listed in the Directory of Research on Ageing in Africa: 2004-2015.

The Directory demonstrates the growing body of rigorous and in-depth research into ageing across Africa and aims to profile, promote and encourage research into the

health and needs of people aged 50 years or over in Africa, and to enable the use of evidence for policy. Such evidence is essential to enable countries undergoing rapid demographic and epidemiological transitions to develop appropriate policy responses and to monitor the implementation and impact of those policies. Submissions for the directory were summarized according to how the research results addressed the policy directions of the Madrid International Plan of Action on Ageing (MIPAA), and the research methods that were applied.

According to the authors, it is hoped that this Directory will enhance networking and political action and facilitate collaborative research efforts to focus on older persons in Africa.

The directory is available at the UN Population Division website; [http://www.un.org/en/development/desa/population/publications/pdf/ageing/Dir_Research_Ageing_Africa %202004-2015.pdf](http://www.un.org/en/development/desa/population/publications/pdf/ageing/Dir_Research_Ageing_Africa_%202004-2015.pdf)



Admin team bids Mr. Belcher farewell



The painting that was presented to Mr. Belcher by the Admin team

At the end of March, the Administration team in Entebbe said farewell to Mr. Simon Belcher, the Unit's former Director of Operations. At a brief ceremony that was held in the Accounts Office, several staff commended Mr. Belcher for being instrumental in developing the infrastructure at the Unit during his five year tenure.

Mr. Belcher, who seemed surprised at the 'impromptu meeting', applauded the team for their work which did provide a vital input into his own work. He encouraged the team to always strive to be the best that they can be and to never settle for less.



MUK- CHSS Principle visits UVRI



Prof. Ibingira (with neck on front row) with some of the representatives from the different partner institutions at the UVRI after the meeting.

On 21st April, 2016, the Uganda Virus Research Institute and her partners hosted Associate Prof. Charles Ibingira, the new Principle of the Makerere University College of Health Sciences. Prof Ibingira, who was accompanied by other senior staff at the college, met with representatives from all the partner institutions hosted at the UVRI. The aim of the meeting was to among others strengthen the relationship between the College and UVRI and the partner institutions as well as identify and open up areas of further collaboration.

In his remarks, Dr. Mbidde, the Director UVRI, welcomed Prof. Ibingira to the UVRI campus and noted that the relationship between the two institutions goes way back and was concretized by signing of an MoU in 2008 between the University and the Ministry of Health. He noted that the MoU, which birthed the Makerere/UVRI Infection and Immunity Research Training Programme (MUII) has been very fruitful in regard to building capacity for science in the country and the region.

Speaking at the same event, Prof. Pontiano Kaleebu, the MRC/UVRI Director commended the new principle for his interest in strengthening the collaboration between

the College and the different institutions at the UVRI and noted that this was an area of interest for the MRC and was one of the areas under consideration for the next quinquennial period.

On his part, Prof. Ibingira reiterated the importance between the College and UVRI, which has greatly contributed to capacity building at both institutions through honorary appointments of UVRI and her partner institutions' staff to the University, provision of internship opportunities as well as provision of scholarships to students at Masters, PhD and Post Doctoral levels. He specifically highlighted the Immunology Course at the University which is fully supported by UVRI through MUll.



Prof. Alison Elliot, the Head of the Co-Infections and Studies Programme and Programme Director of MUll Plus hands over applications for renewal of honorary staff contracts at the University to Prof. Ibingira at the meeting

Prof. Ibingira noted the need to take advantage of the resources, both human and infrastructural, at both institutions and also noted areas of further potential collaboration including jointly working on grant applications as well as working on a joint advocacy programme that would give the institutions a stronger voice.

CONVERIS 5 to boost grants and funding application



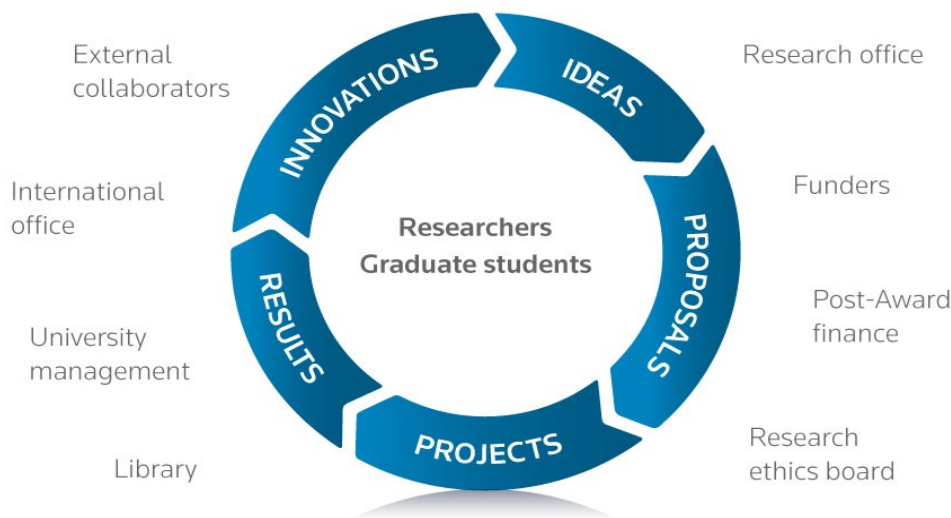
Temera Timothy-
Grants Administrator– Entebbe

Lewis Carroll an English novelist once said “if you don’t know where you are going, any road will get you there.” With MRC’s strategic vision no doubt the future and destination is clearly known. Head office approved the use of Converis 5 for the Uganda and The Gambia Units. Converis 5 is a project management system which will help the MRC Units in the grant application process by scientists.

Converis 5 supports the complete research lifecycle, from an initial idea over project applications and projects to their results and innovations. This provides important benefits to the key stakeholders along the research lifecycle.

The Research Support Office within MRC Administration will provide support to scientist as they submit their proposals through the Converis 5 system. Based on the Units Organizational structure a workflow for the whole process is being developed to suit the unit.

A big advantage of using this system is, work that previously was done on paper, per email or in various legacy systems are managed in a systematic way through structured workflows in Converis 5, either through direct input or through integration with internal and external systems to cost-efficiently reuse information and release the users from administrative work of entering the same information more than once.



The lifecycle of an application and how it will go through the Converis 5 systems

Support along the research life cycle



Additional advantages / modules of Converis 5

Pre- & Post-Award Management

With Converis 5, research organizations can manage the complete process for pre- and post-award. Converis 5 keeps track of audit and reporting deadlines, includes automatic reminders and offers dedicated grant reports comprising success rates, budget monitoring and network graphs.

Publications Management

Converis 5 allows organizations to systematically collect, validate, present and report on research results: tracking bibliographic meta-data as well as full-text while offering full Open Access repository functionality.

To minimize researcher and administrator workload and assure high data quality, Converis 5 retrieves publication data from online sources and supports import from many file formats.

Research Analytics

Converis 5 Research Analytics offers users an interactive web interface specifically designed for reporting, combining data through drag-and-drop into individually designed reports, producing dynamic pivot table-like aggregations of metrics, visualizing data with charts and constructing dynamic dashboards that enable analyses to be conducted throughout the complete Research lifecycle.

Research Portal

The Converis Research Portal is an out-of-the-box solution that makes selected Converis research information available publicly over the web. The Research Portal includes search functionality, filterable overviews, and attractive list pages that link to detailed information pages. The Research Portal provides an accessible public overview of the organization's research resources, activities and results; enabling identification of academic expertise and fostering new research connections.

From page 1

The Ring Study

Developed by the non-profit International Partnership for Microbicides (IPM), the monthly vaginal ring is the first long-acting prevention method designed for women, who bear the greatest burden of the global HIV epidemic.

The Ring study was conducted to answer key questions about the dapivirine ring efficacy, safety, adherence, acceptability and drug resistance in the event that participants got HIV.

Women in the study were randomly assigned to one of two study groups: one used the active dapivirine ring and the other a placebo ring that contained no drug. A 2:1 randomization was used, meaning that for every two women who used the dapivirine ring, one woman used the placebo. The study was blinded, so participants and study staff did not know who of the participants were in the active or placebo arm.

Participant follow-up comprised of monthly visits to the research centre over a two-year period, during which the trial volunteers were assessed for any medical or safety problems and were managed accordingly; received condoms as well as HIV prevention counselling and testing. At each visit, volunteers returned the rings they had received the previous month and received a new ring, which they inserted by themselves. Blood samples were taken at every visit to measure the dapivirine levels in the blood to assess adherence. Adherence was also measured by analysing the amount of dapivirine in the returned rings. Interviewer administered questionnaires, individual interviews and focus group discussions were used to further collect information on adherence and acceptability. Individual interviews with male partners were also done to collect information on acceptability.

While the trial was planned to end in



Dr. Kusemererwa, the IPM Project Leader makes a presentation at a stakeholders' meeting in Masaka

December 2016 /early 2017, in November 2015, the Data Safety Monitoring Board (DSMB), an independent committee, looked at the data collected on the Ring Study and recommended that IPM performs an early data analysis.

The Trial Results

The trial results indicated a 31% decrease in the rate of HIV-1 infection in the active arm, compared to the placebo; approximately one out of every three women who received and used the dapivirine ring was protected against HIV, compared to those who received the placebo ring.

There were clear differences in the levels of HIV-1 protection among different age groups. Women 21 years of age and younger had the lowest levels of protection with a 15% reduction in HIV-1 infection, while women older than 21 years showed a 37% reduction.

The lower level of protection in younger women could be attributed to biological differences in the genital tract of younger women; possible lower ring adherence; more frequent vaginal and/or anal sex; or a combination of factors. IPM is working to increase the ring's potential impact by better understanding why the youngest women in the study had low levels of protection.

Analysis of the dapivirine levels in the returned rings, provided evidence that high levels of adherence offered high levels of HIV-1 protection (up to 65% protection) and the study also showed that the dapivirine ring was safe when used over a 2-year period. The results also showed no significant HIV-1 drug resistance in women who had acquired HIV-1 during the course of the study.

Similar results were seen in ASPIRE, the Ring Study's 'sister' trial. Led by the US National

Institutes of Health-funded Microbicides Trials Network (MTN), the ASPIRE research site in Uganda was based at the Makerere University - Johns Hopkins University Research Collaboration (MU-JHU).

Results from the ASPIRE study where 2629 women from Malawi, Uganda, Zimbabwe and South Africa aged 18-45 were recruited indicated HIV-1 incidence was 27% lower in the active dapivirine ring arm compared to placebo. Like was the case with the Ring study, higher levels of adherence showed higher levels of protection against HIV-1. Women aged above 21 had better protection against HIV-1 than those under 21. ASPIRE also showed the dapivirine vaginal ring to be safe

The fact that results from these two 'sister' phase III clinical trials were similar, the efficacy level demonstrated could not have been by chance. Together these two trials can provide enough information for regulatory authorities to make a decision on whether the ring could be approved for use by women as an important HIV prevention tool.

Trial Results' Dissemination

In keeping with Good Participatory Practices in bio-medical research, results from the Ring study have been shared with a wide range of stakeholders including study volunteers, the Ministry of Health- Uganda, regulatory bodies (Uganda National Council of Science and Technology, the Uganda Virus Research Institute Research Ethics committee (UVRI-REC) and National Drug Authority), media



An official at the Ministry of Health at a dissemination workshop with CSOs in Kampala

fraternity, civil society organisations, Masaka district Directorate of Health Services, religious and political leaders in greater Masaka, HIV/AIDS service providers as well as Community Advisory Board members.

Depending on the target audience, dissemination activities comprised of workshops, a media café, and community events where video clips, formal presentations, and trial results summary sheets were presented. All sessions were interactive and comprised of discussions and question and answer sessions.

Generally, the results were well received and stakeholders applauded the sponsor (IPM) and research teams for conducting this important clinical trial in an ethical manner. They appreciated the level of stakeholder engagement throughout the trial processes.

The low level of efficacy 31% notwithstanding, stakeholders pointed out that, since this could be increased with improved product

adherence, the dapivirine ring provides a potential HIV prevention tool for women.

They were relieved that the vaginal ring was found to be safe to use for women.

For women, being able to use the ring discretely was appealing since they did not have to seek consent from their male sexual partners. One volunteer put it this way;

“I joined the trial because I had witnessed situations where some of my male sexual partners did not want to use male condoms. In such a situation, I knew I was at risk of acquiring HIV.

When I tried the ring and had several sexual encounters without any of the male partners ever getting to know I was wearing it, it gave me a lot of encouragement to give the trial all my devotion. It is a pleasure for me and my fellow women to have contributed towards this important scientific innovation that could have a lot of potential to reduce HIV infections among women like me”.

Considering that the ring is a long-acting intervention, which needs to be replaced only once every 28 days, makes it easier to use, compared to other available options. To most stakeholders, this coupled with the fact that the ring was easy to use (insert and remove), would place the dapivirine ring above other HIV preventive technologies that are coital dependant.

What next?

An open label extension study (DREAM Study-IPM032) is planned for all previous IPM 027 volunteers to access the dapivirine vaginal ring. Once all approvals are in place, ongoing IPM 027 participants will exit IPM 027 and enrol in IPM 032. Participants who have already exited IPM 027 and are HIV negative are eligible for screening.

“If this vaginal ring is finally licenced for wider use, I know many women will like it because it gives one peace of mind. You have it in, go about your business without any interference and when it is time for sex, you don't have to ask the man if he agrees to use it or not. I can tell you; this product will put our lives in our hands” ... (observed one women rights activist).



A participant at the Masaka stakeholders' dissemination workshop tries her hand at a dummy that was used to illustrate insertion and removal of the ring.



Berna Nayiga Kalanzi–
Clinical Research Coordinator

Study registration; why it matters

All studies irrespective of study design (whether observational or Clinical trials) need to be registered. Registration entails provision of the following information to www.clinicaltrials.gov ;

Protocol title, study type (whether interventional or observational); *Study status*- whether recruiting, active, completed, suspended, terminated or withdrawn; *sponsors/ collaborators for the study*; *Information on study description*, giving information on the main purpose for conducting the study, design, outcome measures, description of the eligibility criteria and contacts; *investigator information* including the research organisation where the study is being conducted.

Following registration, a unique identifier (NCT) is allocated to the protocol.

Principle investigators, working closely with the Clinical Research Coordinator are required to provide information regarding who is providing over site for the respective studies e.g. the DMC as well as list of IRBs with authority over the protocol e.g. UVRI-REC, UNCST and NDA if/where applicable.

Importance

- * It is an ethical obligation for public release of findings in order to advance knowledge.
- * It avoids publication bias
- * Helps to detect deviations from the protocol
- * Other scientists can identify gaps for further research
- * Creates opportunities for collaborators
- * It avoids duplication
- * It becomes a public record where by a clinical trial unique number is allocated which can be used in publications and systematic reviews
- * It improves access to information about published and unpublished research.

For details, please contact the Clinical Research Coordinator

Email; Berna.kalanzi@mrcuganda.org

Non communicable diseases (NCDs) and HIV epidemiology: a population based survey among children and adults in rural Uganda

PI - Dr. Sylvia Kusemereirwa

This is a population based cross sectional study using a two stage cluster sampling. The main objective of this study is to estimate the burden and risk factors for NCDs among children in Kyamulibwa and to describe the heterogeneity of HIV in Kalungu district. About 3,810 children aged 0-12 are targeted for this survey and may include all the 25 villages of the General Population Cohort (GPC). A pilot HIV survey will also be conducted in two other sub-counties (Lukaya and Lwabenge) in Kalungu district among adults aged 15 to 49 years.

A cognitive behavioral and structural HIV prevention intervention for young Ugandan women engaging in high risk sexual behavior. ZETRA Study

PI - Dr. Rachel King

Co-investigator- Prof. Janet Seeley

ZETRA study (Zero Transmission) is a randomized controlled Trial (RCT) to test the effectiveness of a combination structural and cognitive-behavioral prevention intervention. 450 HIV uninfected volunteers residing in Kampala District, aged 15-24 years engaging in high risk sexual behavior will be recruited into the study. These will be randomized 1:1 to either combination prevention intervention package or standard of care and followed for 18 months. The primary outcome is unprotected sex. The secondary outcomes include uptake and continued use of family planning, incidence of sexually transmitted infections including HIV, and retention in care. The study is being conducted at the Unit's Mengo field station.

A study to assess risk perception, behavior and structural drivers of HIV among rural and urban adolescents, and to inform the design of adolescent-friendly HIV prevention and vaccine development programmes. (RIBES)

PI: Dr. Rwamahe Rutakumwa
Co-PI: Flavia Zalwango
Co-I: Prof Janet Seeley

This is a qualitative study being conducted in Kalungu and Wakiso districts. Up to 40 adolescents aged 14-17 years are being recruited into the study. Eight carers, 2 ethics committee members, 1 official from UNCST and another from NDA will also be recruited for the study. In-depth interviews will be conducted to explore adolescent HIV risk perceptions and behavior, uptake of HIV prevention messages, mobility patterns and living conditions, and adolescent willingness to participate in clinical trials. The study will also review national and international ethical guidelines with a keen interest in how these might facilitate or undermine adolescent participation in clinical trials. This study is being coordinated from Entebbe.

A prospective study of standard anti-fungal therapy in HIV-associated Cryptococcal Meningitis which describes PK-PD Parameters and examines RNA expression

PI- Freddie Kibengo

This is a prospective study of patients with known HIV positive status with Cryptococcal meningitis that is being conducted at two sites; Hospital for Tropical Diseases, Ho chi Minh City, Viet Nam and the Medical Research council - Masaka. A total of 50 patients will participate into the study; including 20 HIV positives with Cryptococcal meningitis who will be recruited from Uganda. The main purpose of this study is to: describe the pharmacokinetics (PK) and pharmacodynamics (PD) of Amphotericin and fluconazole in blood and cerebrospinal fluid (CSF) of patients with Cryptococcal meningitis and improve understanding of the pathogenesis of Cryptococcal Meningitis through describing the transcription of fungal and human genes in the cerebrospinal fluid of patients with Cryptococcal meningitis. We shall also describe the inter-ethnic PK variability between African and Asian patients with respect to fluconazole and



ARRIVALS

The following staff joined the unit in the last quarter;

Name	Title	Station	Reporting date
Margaret Kabagenyi	Head Nurse	Mengo	01 st Jan 2016 (temp)
Margaret Musoke	Field Worker	Mengo	01 st Jan 2016 (temp)
Marian Najjuma	Nursing Officer	Kyamulibwa	04 th Jan 2016
Aggrey Muzira	Counselor	Kyamulibwa	04 th Jan 2016
Joel Serubanja	Medical Officer	Entebbe	04 th Jan 2016
Miriam Nakitto	Scientist (study Coordinator)	Mengo	04 th Jan 2016
Miriam Mirembe	Counselor	Kyamulibwa	04 th Jan 2016
Chadress kabagenyi	Nursing Officer	Kyamulibwa	04 th Jan 2016
Clare Musiime	Nursing Officer	Kyamulibwa	07 th Jan 2016
Eric Ssebagala	Lab Tech	Entebbe	01 st Feb 2016
Lucy Nakayiza	Field worker interviewer	Kyamulibwa	1 st Feb 2016
Samuel Bengo	Clinical Officer	Mengo	15 th Feb 2016 (temp)
Kenny Roger Katumba	Health Economist	Entebbe	10 th Feb 2016
Aisha Kigongo	Nursing Officer	Mengo	15 th Feb 2016 (temp)
David Mubiru	Field Worker	Masaka	22 nd Feb 2016
Hassan Ssenyonga	Driver	Mengo	01 st Mar 2016 (temp)
Christine Debuni	Procurement Officer	Entebbe	14 th Mar2016
Phoebe Abuzze	Procurement Assistant	Entebbe	01 st April 2016 (temp)
Josephine Badaru	Nursing Officer	Entebbe	01 st April 2016 (temp)
Rose Naluyima	Nursing Officer	Entebbe	01 st April 2016 (temp)
Martha Nantongo	Clinical Officer	Mengo	01 st April 2016 (temp)
Esther Nkiinzi	Field Worker	Entebbe	01 st April 2016 (temp)
Hope Mbabazi	Field Worker	Entebbe	01 st April 2016 (temp)
Geraldine Agirembabazi	Senior Data Manager	Entebbe	4 th April 2016
Ritah Namugumya	Field Worker	Mengo	11 th April 2016 (temp)
Remy Hoek Spans	Scientist B	Entebbe	14 th April 2016 (temp)
Rachel Abuine	Lab Tech	Entebbe	29 th April 2016



The following staff left the unit in the last quarter;

Name	Position
Simon Belcher	Director Operations
Trevor Biransesha	Field Station Administrator- Kyamulibwa
Daniel William Magomu	Laboratory Technologist
Gershim Asiiki	Senior Scientist
Dorothy Ai-	Senior Medical Officer
Andrew Walungama Kiyingi	Pharmacist
Susan Nakubulwa	Data Manager
Isaac Ssonko	Senior Data Management Assistant
Moses Ssekabira	Driver
Stephen Tumwesigye	Driver