

Grant application form - Project v2016

Submission Date	2016-12-29 16:11:47
Name of applicant	A. A. Matser
Job title	Senior epidemiologist/team leader
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A short CV of the applicant (or the principal investigator) should be provided here.

Work experience

2016–PP: Senior epidemiologist/team leader. Public Health Service of Amsterdam, Amsterdam, the Netherlands

2015–6: Postdoctoral Fellow. Public Health Service of Amsterdam, Amsterdam, the Netherlands

2009–15: Researcher/PhD student. Public Health Service of Amsterdam, Amsterdam.

2011–3: Junior researcher (zero appointment). Julius Centre for Primary Health Care, University Medical Centre Utrecht, Utrecht, the Netherlands

2009: Intern. Epidemiology of microbial diseases, Yale School of Public Health, New Haven, MA, USA.

2008–9: Intern. Department of Farm Animal Health, University of Utrecht, Utrecht, The Netherlands

Education

2009–15: Graduate School, PhD program. Thesis: Sexually transmitted infections: unravelling transmission and impact. University of Amsterdam, Amsterdam, the Netherlands

2007–9: MSc Epidemiology (GPA 4 out of 4). Specialisation: Epidemiology of Infectious Diseases. University of Utrecht, Utrecht, the Netherlands

Grants

2016: Changes over time in sex-related drug use among men who have sex with men and the association with HIV and STI. STI Research and Development grant, Public Health Service of Amsterdam. [Main applicant] (€ 47K)

2016: Changes in sexual risk behavior among men who have sex with in the era before and after the introduction of pre-exposure prophylaxis for HIV. STI Research and Development grant, Public Health Service of Amsterdam. [Main applicant] (€ 47K)

2015: Making it count: timing of STI and HIV prevention intervention throughout sexual careers of men who have sex with men. Grant from The Netherlands Organisation for Health Research and Development. [Project Leader] (€ 150K)

2014: Explaining the difference in Chlamydia trachomatis prevalence between ethnic groups. Research and Development grant, Public Health Service of Amsterdam. [Main Applicant] (€ 35K)

2012: The contribution of pharyngeal Neisseria gonorrhoeae infections to the spread of N. gonorrhoeae in men who have sex with men. Research and Development grant, Public Health Service of Amsterdam. (€ 30K) [Main applicant]

2012: Estimating the R0 of hepatitis C among men who have sex with men. Research and Development grant, Public Health Service of Amsterdam. (€ 30K) [Main applicant]

4 most relevant publications

A. Matser, M. Heiligenberg, R. Geskus, T. Heijman, N. Low, M. Kretzschmar, M. Schim van der Loeff. The importance of partnership factors and individual factors associated with absent or inconsistent condom use in heterosexuals: a cross-sectional study. *Sex Trans Inf* 2014; 90(4):325-331

A. Matser, P. Prince, C. van Tienen, H. Whittle, M. Schim van der Loeff. Mortality rates in HIV-1/2 dual- and HIV-1 or HIV-2 mono-infected individuals: a systematic review and meta-analysis. *AIDS* 2014; 28(4):549-558

A. Urbanus, M van Keep, A. Matser, M. Rozenbaum, C. Weegink, A. van den Hoek, M. Prins, M. Postma. Is hepatitis C screening among pregnant women in Amsterdam, the Netherlands, cost effective? *Plos One*. 2013; 8: e70319

A. Matser, N. Luu, R. Geskus, T. Heijman, M. Heiligenberg, M. van Veen, M. Schim van der Loeff. Higher Chlamydia trachomatis prevalence in ethnic minorities does not always reflect higher sexual risk behaviour. *Plos One*. 2013; 8:e67287

Submission date of this form	29-12-2016
Is the person responsible for the project different to the person named in box A	No
Title of the project	The relationship between the use of hormonal contraceptives, the composition of the vaginal microbiota, and the risk to acquire Chlamydia infection among women.
Comprehensive description of the project (max 200 words)	<p>Worldwide, approximately 50% of women use hormonal contraceptives (HC) and annually 131 million individuals acquire Chlamydia infection. The vaginal microbiota (VM) is one of the natural barriers for STI entry. HC use might affect VM composition, and thus, HC might also affect the protective function of the VM.</p> <p>We will explore how HC use relates to VM composition and CT risk, using data from 610 female participants of the Healthy Life in an Urban Setting (HELIUS) Study, using (multinomial) logistic regression analyses. We will account for sexual behavior and demographics (including ethnicity). HELIUS is a prospective cohort study among an urban multi-ethnic population that aims to unravel the impact of ethnicity on health, initiated in 2011 [Stronks K BMC Public Health 2013].</p> <p>A better understanding of the interaction between HC use, VM composition and STI risk is needed, because the possible population impact of an association between HC and STI like Chlamydia may be substantial.</p> <p>The results of this analysis will be used to inform a newly initiated cohort study among women to investigate the causal effects of HC use and VM composition on the risk to acquire sexually transmitted infections.</p>
When would it start / finish? (Max 20 words)	The project start in June 2017
Where will it take place – country / town, establishment? (Max 20 words)	Public Health Service of Amsterdam, Amsterdam, the Netherlands
Objectives and needs identified. (Max 20 words)	<ul style="list-style-type: none"> -Obtain data from HELIUS -Analyze the data -Write and publish a scientific article
Sector in the area of contraception, sexual and reproductive health:	Prevention of sexually transmitted infections
Is it a 'new' project?	Yes
What outcomes will be measured? List. (Max 20 words)	The scientific article describes odds ratios for different women using different HC methods and ORs of Chlamydia infection for various HC methods
Do you foresee any reasons (political, climatic, etc) why this project may be adversely affected? (Max 20 words)	No, as data are already collected and the research department of the Public Health Service performs independent research.

The ESC may not be in a position to fully fund all applications; you must indicate whether / how part funding may impact your project. (Max 100 words)

When funding to obtain HELIUS data is not fully covered we will search for alternative funding opportunities, including internal funding and funding by HELIUS in exchange for man hours. The salary costs are the absolute minimum to perform the proposed study.

Are there other partners or organisations supporting this same project?

Yes

If yes, list

The Public Health Service of Amsterdam:
Prof. dr. H.J.C. de Vries
Prof. dr. M. Prins
Dr. S.B. Bruisten
Dr. M.F. Schim van der Loeff

STI AIDS Netherlands:
Prof. dr. J.E.A.M. van Bergen

VU University Medical Center Amsterdam, Medical Microbiology and Infection Prevention:
Dr. R. van Houdt

University of Liverpool, Institute of Infection and Global Health:
Prof. dr. J. van de Wijgert

Have you already obtained any funding or still awaiting a response towards this project?

Yes

If yes or still awaiting a response, please give details (Max 20 words)

A proposal was submitted to The Netherlands Organisation for Health Research and Development. Initial decision is expected in February 2017.

How much money are you requesting? Up to 10,000 euro per project application can be requested. Provide an overview of the budget here (max 50 words)

Requested budget: € 9420,-

Overview of costs:
€ 5000,- to obtain HELIUS data
€ 4420,- salary costs

Please provide a detailed budget here.

€ 5000,- to obtain HELIUS data
€ 4420,- for the salary of a PhD student to analyze the data (6 months, 4 hours a week)

Will this be part of a larger fund or stand alone? (Max 20 words)

The proposed research is the exploratory phase of a larger project and fund.

Who will oversee the budget & keep accounts?

The head of our business office, A. Pan

We, as responsible agents for this project, agree to the following 8 points:

	yes
We agree that all monies will be spent appropriately	✓
We agree to work with the nominated Mentor	✓
We agree to advise you at the earliest time if this project is delayed or cannot be completed	✓
We agree to provide an interim report(s) part way through the project and a final report to the ESC within 6 months of the end of the project.	✓
We agree to provide the ESC with an interim budget(s) and a detailed budget at the end of the project. NOTE funding will be awarded in stages and will be dependent on appropriate reporting.	✓
We agree to provide receipts for monies spent if requested.	✓
We agree that if we need to make any significant changes to the duration, contents or funding of the project after it has been awarded, I/we will advise the nominated mentor.	✓
We agree to acknowledge the ESC as a donor in any publications and oral communications resulting from this project. Ideally any manuscript should be sent to the ESC journal in the first instance.	✓

Full Name

Antoinette Amy Matser

Date

29-12-2016