

# The Node *... where a leaf arises from a stem*



The Node is a bilingual publication dedicated to global HIV/AIDS issues by Red Ribbon Centre, the UNAIDS Collaborating Centre for Technical Support

## PRESS RELEASE

# A decade of progress and sustained funding for HIV prevention research provides a pathway for ending AIDS

*Report released at AIDS 2012 calls for sustained funding of HIV prevention research to achieve our collective vision of zero new HIV infections*

**Washington DC (23 July 2012)** —A decade of unprecedented investment in HIV prevention research has led to major scientific breakthroughs in vaccines, microbicides, voluntary medical male circumcision, treatment as prevention and pre-exposure prophylaxis, or PrEP, but sustained financing will be needed to capitalize on these breakthroughs to deliver new options that can help end the AIDS pandemic, according to a new report released today at the XIX International AIDS Conference in Washington, DC.

The new report, *Investing to End the AIDS Epidemic: A New Era for HIV Prevention Research & Development*, tracks investment in prevention research in 2011 and looks back at a decade of tremendous growth in funding, despite sometimes uncertain prospects for some HIV prevention options. Yet the authors note that capitalizing on recent breakthroughs in the field and ensuring a pipeline of new next generation products will require sustained and flexible investments from a range of donors in the coming years.

The eighth annual report from the HIV Vaccines and Microbicides Resource Tracking Working Group shows that funders invested a total of US\$1.24 billion in research and development (R&D) for six key prevention options: preventive HIV vaccines, microbicides, PrEP using antiretroviral drugs, treatment as prevention, prevention of vertical transmission and operations research related

to medical male circumcision. This investment is down slightly from the US\$1.27 billion invested in 2010 for these six research areas. Investments in vaccine and microbicide R&D decreased in 2011, though decreases for microbicide R&D were attributed to funding disbursement cycles and did not represent declines as compared with past investments.

“This is a critical time. We now have 8 million people on antiretroviral treatment and we are seeing reductions in new HIV infections, even in the most affected communities. But it is not enough to think that HIV is a disease that can be managed with pills. HIV has to be brought to an end and funding shortfalls must not become the roadblocks that prevent us from achieving our goals,” said Michel Sidibé, Executive Director of the Joint United Nations Programme on HIV/AIDS, (UNAIDS).

“Recent advances toward the development of a preventive HIV vaccine have fueled optimism within the AIDS vaccine field. Researchers around the world are now working to build on this progress to develop next-generation vaccine candidates and advance the most promising of these candidates toward large-scale efficacy trials,” said Margaret McGlynn, IAVI President & CEO. “I am more optimistic now than ever before that the development of a preventive AIDS vaccine is within reach. However, in order to build on this recent progress it is critical that we sustain financial commitment and support

for HIV vaccine R&D.”

In the past two years, beginning with results from the landmark CAPRISA 004 microbicide trial announced at the last International AIDS Conference, we have seen tremendous breakthroughs in antiretroviral-based prevention, including TDF/FTC (Truvada) as daily oral PrEP, which was approved by the US Food and Drug Administration as a new prevention option last week, and the HPTN 052 treatment as prevention study which provided evidence that early treatment of HIV-positive people may also protect their HIV-negative partners.

Analyses completed in the past year have unveiled crucial clues as to how the candidate in the RV144 HIV vaccine trial provided protection against HIV. In addition, recent advances in identifying and characterizing broadly neutralizing antibodies to HIV are informing potentially powerful new vaccine candidates.

For microbicides, Phase III clinical trials are underway that could provide the results needed to license and deliver marketable products, including 1 % tenofovir gel and vaginal rings that could offer women protection for a month, two months or longer—and might eventually combine an antiretroviral drug with a contraceptive hormone to provide dual protection. Additional PrEP trials are looking at different drugs and less-than-daily dosing that might be easier for people to adhere to.

Recent positive results underscore the importance of preparing for success and capitalizing on areas of progress and promise. The prevention field continues to need funding structures that can adapt quickly and are sufficiently generous to allow for rapid expansion in the event of positive outcomes.

Indeed, the HIV prevention research field is facing a new and exciting era with many new HIV prevention options becoming available, including female condoms, voluntary medical male circumcision, antiretroviral treatment as prevention and PrEP. The report notes that additional funding will be needed to effectively roll out all available options, which represents an investment opportunity for countries heavily impacted by HIV, particularly emerging economies.

As the rallying cry to end AIDS is heard this week from policymakers, researchers, funders and advocates gathered in Washington, DC, and as we work together to craft a response to AIDS, the Working Group notes that research to develop and roll out new prevention options is a vital component for success and must be appropriately funded.

“For the first time, the end of the AIDS epidemic is within reach,” said Mitchell Warren, Executive Director of AVAC. “New prevention options – voluntary medical male circumcision, PrEP, treatment as prevention, microbicides and eventually vaccines – will play a critical role in reducing the cycle of new infections. The past decade has been a period of increasing investment in HIV prevention R&D and has yielded unprecedented success. With sustained and flexible funding, the future of HIV prevention research will be even more promising.”

The report is available online at:  
<http://www.hivresourcetracking.org/>.

The HIV Vaccines and Microbicides Resource Tracking Working Group is composed of AVAC, the International AIDS Vaccine Initiative (IAVI), the International Partnership for Microbicides (IPM), and the Joint United Nations Programme on HIV/AIDS (UNAIDS).



# **The XIX International AIDS Conference**

## **Ending the Epidemic: Turning the Tide Together**

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The XIX International AIDS Conference was held from 22 to 27 July 2012 at the Walter E. Washington Convention Center in Washington DC, USA. The International AIDS Conference has its history well back to 1985 which was first started in Atlanta, Georgia of United States and has not been hosted in United States for almost 20 years

since 1990. This year’s conference, back to United States, signified a distinctive significance for the United States.

United States was not able to be a host country cause of the travel restrictions on people living with AIDS. Upon President Obama ended the ban barring HIV infected

people from entering the country on 4 January 2010, the conference was back to United States, giving it such a historic event. Its return marked a truly new phase in the epidemic. The theme of the conference was “Turning the Tide Together”. It declared to end the AIDS Epidemic together with concerted efforts from leadership at all level of government, health systems, academic and non-governmental organizations. More than twenty thousand people attended the conference from 183 countries and more than ten thousand abstracts were received. Famous high level guests included former United States President Bill Clinton, former lady Laura Bush, singer Elton John, actress Sharon Stone and Whoopi Goldberg were being invited. The conference brought treatment and prevention tools to scale necessary to begin to end the AIDS epidemic. Scientists reported promising findings in the search for an HIV vaccine, immune-based therapies and gene therapy with a close watch on the progress of the “Berlin patient”, the only person, out of 60 million believed to have been infected in more than 30 years, who appeared to have been cured of HIV. The talk of scientific challenge on sterilizing cure or functional cure went underway. With sterilizing cure for a complete eradication while functional cure meant improving the body’s immune system to deal with HIV or somehow changing cells to resist the virus. There was also sounding of partially successful trials of microbicides incorporating antiretroviral drugs (tenofovir/dapivirine) in forms of gels, films sponges and vaginal rings. Discussions were also made on Pre-Exposure Prophylaxis (PrEP) which was a new HIV prevention method in which non-infected HIV people take a daily pill to reduce their risk of being infected.



Turning the Tide Together: A Declaration to End the AIDS Epidemic

As in past International AIDS Conferences, alongside the conference sessions, the Global Village was an indispensable feature. It was an indigenous circle opened to the general public and free of admission. It gathered people around the world to share their ideas about the AIDS epidemic through art, performances and debates. It was a place where the public could meet scientists and activists representing North and South America, Europe, Africa and Asia. It was also an interactive place with workshops, video lounge, youth pavilion, meditation room and multiple networking areas. This year, it was the largest in the history of the International AIDS Conferences with more than 120 booths from 90 different countries, taking up 190,000 square feet. A female condom fashion show and the Condom Project “Condomize” highlighted the Global Village with more than 850,000 condoms distributed. Furthermore, a paper dolls campaign took part in this village also added a strong sense of support on female condoms. Each visitor was asked to write their thoughts on female condoms on the paper dolls which would then be chained into long chains. Most amazing was their making use of the inner rings of the female condoms to make earrings and also dresses out of female condoms in a fashion show. It raised the awareness of the growing need of female condoms and women empowerment especially women in low to middle income countries. To add to the glamorous feature of the Village, five marches, having its start point at the place, stirred excitement mixed with hope, shouted their demands as they marched through the convention centre and converged in Lafayette Square in front of the White House.

One more special hallmark was the return of the AIDS Quilt to the National Mall which marked the 25th anniversary of the creation of the AIDS Memorial Quilt and was on display in the US capital since 1996 to coincide with the start of the XIX International AIDS Conference 2012. It was the largest piece of community folk art in the world to remember and celebrate the lives of the people who died of AIDS-related causes. With the scientific advancement, the moment to receive the “Last One” was hoped to be close.





AIDS today as compared with nineteen eighties has changed a lot, from being a fatal disease and what was once being considered as a communicable disease of public health significance in the United States, has now been lifted and with today's treatment and prevention tools, it has become a manageable chronic disease. Then would it be to say there remains the challenge to tackle AIDS as a chronic disease?



## ***Consultation on HIV, STI and other health needs of transgender people in Asia and the Pacific***

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Consultation on HIV, STI and other health needs of transgender people in Asia and the Pacific was convened by World Health Organisation (WHO) Regional Office for the Western Pacific in Manila, Philippines from 11 to 13 September 2012. It was a joint initiative of three WHO regional offices, Regional Offices of the United Nations Development Programme (UNDP), the Joint United Nations Programme on HIV/AIDS (UNAIDS) and Asia Pacific Transgender Network (APTN). The consultation was the first of its kind to address the unmet and emerging health needs for transgender people using HIV/STI as an entry point.

Transgender people appear to have one of the highest HIV prevalence rates in some Asian cities and countries, ranging from 8% to 31% where recent data exists. More often, transgender-specific data is limited and not routinely disaggregated. As a result, the size of both the transgender population and their health burden remains largely undetermined. HIV programming for transgender people, if any, is usually included in those targeting men who have sex with men (MSM). However, transgender women or men usually consider such programmes less relevant to them. In fact, a request was made to the UN agencies to address the needs and concerns of transgender people independently at the Trans People Global Consultation facilitated by UNAIDS in November 2011. These concerns include: HIV, broad health issues (e.g. hormones), sex work, violence, poverty and social-economic status, leadership and empowerment. According to a recent report "Lost in Transition:

Transgender People, Rights and HIV Vulnerability in the Asia-Pacific Region" published jointly by UNDP and APTN, stigma and resulting social, economic and legal marginalization are the root causes of the observed health problems.

During the 3-day consultation, the latest WHO guidance on prevention & treatment of HIV and STI among MSM, transgender people and sex workers, health needs assessment based on literature review and survey of transgender people, services on sexual health, hormones use, sex reassignment surgery and mental health, and testimonies of transgender people were presented. The regional assessment report of this initiative reveals that transgender people throughout the Asia Pacific region are still underserved and have limited access to transgender specific/sensitive HIV, STI and other sexual health services. Moreover, self-perceived needs of transgender people are often different from those identified by public health experts. There was an active exchange among some 30 temporary advisers and resource persons who are clinical practitioners, researchers and epidemiologists and community activists on transgender health. The participants have reached consensus on a working definition of transgender people in the context of Asia and the Pacific, and contributed to recommendations of the regional assessment report and a joint regional technical brief to be issued by WHO to inform relevant policy and programmes. More details can be obtained from the website of the WHO Regional Office for the Western Pacific at <http://www.wpro.who.int/hiv/en/index.html>.