



**OFFICIAL PRESS RELEASE: DAY 3**

**FOR IMMEDIATE RELEASE**

**Experts ask: The Treatment as Prevention Revolution – Can we make it real? Is the search for an HIV cure becoming more feasible?**

**Howard K. Koh, Assistant Secretary for Health, U.S. Department of Health and Human Services, to address the Tuesday Plenary**

**Tuesday, 24 July 2012 (Washington, D.C., United States)** -- Implementing treatment as prevention in those settings most affected by HIV/AIDS is one of the biggest challenges facing the epidemic, delegates heard today at the XIX International AIDS Conference (AIDS 2012) taking place in Washington, D.C. this week. In 2011 the Treatment as Prevention HPTN 052 study demonstrated that a 96 per cent reduction in transmission occurred when an HIV-positive partner began treatment early (a CD4 count between 350 and 550 cells/mm<sup>3</sup>).

“Treatment as Prevention is the biggest scientific revolution in HIV/AIDS since the first antiretrovirals became available in 1996, and access to antiretrovirals has saved millions of lives,” said Dr. Elly Katabira, AIDS 2012 International Chair and President of the International AIDS Society (IAS).

“A coordinated and effective roll out of programmes promoting and implementing early diagnosis followed by early treatment in those countries most affected by the epidemic, also has the potential to be a game changer in the fade out of the epidemic. In some countries more than others it is going to be a huge challenge to implement and it will require committed national political will and action.”

The renewed optimism in HIV cure research over the past few years is strongly reflected in the conference programme with some 40 related abstracts being presented this week at AIDS 2012. The launch of the *Towards an HIV Cure Global Scientific Strategy* last week in Washington, D.C lays out a roadmap for future HIV cure research.

“AIDS 2012 is proving a watershed event – scientists, activists, on the ground health workers and programme designers are all following the HIV cure issue closely,” said Dr. Diane Havlir, AIDS 2012 U.S. Co-Chair and Professor of Medicine at the University of California, San Francisco.

“That the research around HIV cure is so prominent at AIDS 2012 is proof of where the science has come these past few years, we now actively talk of potential scientific solutions in a way perhaps we weren’t some years ago.”

Several recent observations make scientists enthusiastic about pursuing cure research.

For the first time ever there is now a “proof of concept,” as scientists like to call it, for an effective cure. The case of the Timothy Brown, the so-called “Berlin Patient”, who received a stem-cell bone-marrow transplant in 2007 and now considered to be cured of HIV has proved that a cure is at least possible.

Scientists have also been aware of a rare group of HIV infected people who appear to have naturally “cured” their own infection. These “elite controllers” are HIV positive but have no readily apparent virus in the blood. Scientists are gaining a better understanding of this unique group of patients.

There exists a unique cohort of patients in France who became HIV infected, started therapy early, and were able to successfully stop therapy without having a resurgence of their HIV infection (the “Visconti Cohort”). The study confirms the benefits of treating HIV at the very early stages of infection. There is an immensely valuable store of knowledge to be gained from analyzing the immunological characteristics that made therapy redundant for these patients.

## **Tuesday Plenary Session** ***Challenges and Solutions***

Speakers:

**Howard K. Koh**, MD, MPH, Assistant Secretary for Health, U.S. Department of Health and Human Services, ***Building on Success: A National Strategy to Save Lives***

In his plenary address, U.S. Assistant Secretary for Health Dr. Howard K. Koh will discuss development and implementation of the United States’ first-ever comprehensive [National HIV/AIDS Strategy](#). Dr. Koh will provide an overview of the Strategy’s three goals and share brief examples of how the U.S. is working to achieve them. “As we build on the foundation we’ve established, we continue to benefit from the experience and expertise of our many domestic and global partners,” said Dr. Koh. “My hope is that, together, we can seize this moment and channel this momentum toward the vision of an AIDS-free generation,” he added.

**Javier Martinez-Picado**, AIDS Research Institute –IrsiCaixa, ***Viral Eradication: The Cure Agenda***

An overview of the reasons for making HIV cure a research priority, the existing limitations to an HIV cure, the potential strategies to achieve it, current pilot clinical trials aimed at a cure, and current and future challenges in the field. In order to find a safe, affordable and scalable cure strategy for HIV there is a need to coordinate innovative basic, translational and clinical science.

**Nelly Mugo**, Senior Research Scientist, Kenyatta National Hospital Nairobi, Kenya ***Implementation Science: Making the New Prevention Revolution Real***

The use of antiretroviral drugs for HIV-1 prevention of mother to child transmission (both as Treatment for the expectant mother and PrEP for the infant), has led to the virtual elimination of perinatal HIV in Western countries and great strides in reducing incidence globally. Recent scientific data has provided proof, that ARVs are equally efficacious in adult sexual HIV transmission for different sexual orientations. In addition to ARVs for sexual HIV transmission,

we have VMMC, condoms and behavioral interventions which have made a dent to the epidemic over the years.

Though challenging, we should not be shy of the task ahead but take heart from PMTCT, that though the use of ART for prevention does not come without challenges, it does provide a real opportunity to turn the dream of a future for our children without HIV/AIDS into a reality.

Combining behavioral interventions, expanding access to treatment as prevention and initiating PrEP provides both community and individual benefits. It will take a concerted effort and commitment from a wide spectrum of players, but it is possible. As stated previously, any other action would be deemed as an irresponsible generation.

**Bernhard Schwartländer**, Director for Evidence, Strategy and Results UNAIDS, *What Will It Take to Turn the Tide?*

There will be enough funding for a global AIDS response over the coming 10-15 years - but only if we use what we already have more effectively, work in smart ways to reduce prices, and think far beyond the traditional concept of ODA to secure additional funds. In ten years, it will no longer be possible to separate between a rich and a poor world. To find sufficient funding to win the fight, we need to do better with what we have and understand this complex new world order within a framework of shared responsibility.

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## Tuesday Program Highlights

**Special Session, China, India, South Africa, Brazil: How Will They Use Their Leadership to Advance the AIDS Response** (13.00 – 14.00, Session Room 1)

**Symposia Session: *The Lancet* 2012 Special Theme Series: MSM and HIV** (16:30 – 18:00 Session Room 1)

Presentations from *The Lancet's* special themed issue on HIV epidemic among men who have sex with men, among the most heavily burdened groups.

ENDS

**AIDS 2012 Live webcast:** [www.kff.org/aids2012](http://www.kff.org/aids2012)

**Direct link for the Tuesday plenary:** <http://globalhealth.kff.org/AIDS2012/july-24/challenges-and-solutions.aspx>.

### Conference Organization

AIDS 2012 is convened by the International AIDS Society and the conference's international partners: the Global Network of People Living with HIV (GNP+); the International Council of AIDS Service Organizations (ICASO); the International Community of Women with HIV/AIDS (ICW) and the United Nations Joint Programme on HIV/AIDS (UNAIDS); the Caribbean Vulnerable Communities Coalition (CVC); Sidaction.

The U.S.-based Black AIDS Institute; the District of Columbia Department of Health (DOH); the HIV Medicine Association (HIVMA) of the Infectious Diseases Society of America (IDSA); the National Institutes of Health (NIH); the Office of National AIDS Policy (ONAP) at the White House; and the U.S. Positive Women's Network (USPWN) are serving as local partners.

### AIDS 2012: Join the conversation

Get the latest conference updates and share your thoughts and ideas through the Conference Facebook and Twitter. We are tweeting – [@aids2012](https://twitter.com/aids2012) – and hope many of you will tweet along with us, using #AIDS2012 to keep the conversation going. Become a fan of AIDS 2012 on Facebook and stay in touch with the latest conference updates and developments. Please visit

[www.facebook.com/aids2012](http://www.facebook.com/aids2012) to become a fan. If your group or organization is participating in AIDS 2012, we welcome posts of photos and videos of your work on this page. Tell us why you are coming to Washington and what you hope to gain from AIDS 2012.

### **About the IAS**

The International AIDS Society (IAS) is the world's leading independent association of HIV professionals, with over 16,000 members from more than 196 countries working at all levels of the global response to AIDS. Our members include researchers from all disciplines, clinicians, public health and community practitioners on the frontlines of the epidemic, as well as policy and programme planners. The IAS is the custodian of the biennial International AIDS Conference and lead organizer of the IAS Conference on HIV Pathogenesis, Treatment and Prevention, which will be held in Kuala Lumpur, Malaysia, from 30 June– 3 July 2013.

[www.iasociety.org](http://www.iasociety.org) | [www.ias2013.org](http://www.ias2013.org)

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