

## OFFICIAL PRESS RELEASE – DAY 4 EMBARGOED UNTIL 11.00 (CET), WEDNESDAY JULY 20

Researchers present new trends in HIV cure research, call for proactive outreach programmes to prevent HIV transmission in injecting drug users, and demand increased commitments to improving maternal and child health

**Wednesday, 20 July, 2011 (Rome, Italy) -** Researchers speaking on the final day of the 6<sup>th</sup> IAS Conference on HIV Pathogenesis, Treatment and Prevention (IAS 2011) have focused on the growing interest in the scientific path to an HIV Cure. Discussions around an HIV cure have been growing over the past 12 months and are now gaining momentum with the establishment of an International AIDS Society (IAS) convened working group concentrating its initial efforts on establishing a global scientific strategy. A number of abstracts have featured research on a cure at the conference in Rome, which has been attended by over 5,000 researchers, clinicians and community leaders since Sunday.

"Fifteen years ago, even the most optimistic members of the scientific community were silent about the prospect of an HIV cure or vaccine," said IAS 2011 International Chair and IAS President, Elly Katabira. "Today, there is a reemergence of hope that the long-term remission of an infected individual is a realistic objective. The IAS is proud to be leading the coordination of the research effort and we look forward to the unveiling of the global scientific strategy at the XIX International AIDS Conference (AIDS 2012) in Washington next year."

Researchers also highlighted the need to scale up programmes that could more effectively address both the issues of injecting drug use linked HIV transmission and the still unacceptably high mortality rates amongst pregnant women and young children in sub-Saharan Africa and Southeast Asia.

"While these may be scientifically exciting times we just cannot afford to take our eyes off the huge gaps that still remain in the roll-out of effective prevention and treatment programmes in many countries," said Stefano Vella, IAS 2011 Local Co-Chair and Research Director at the Istituto Superiore di Sanità (ISS). "There needs to be more solid and courageous leadership in the efforts to reduce HIV infection amongst injecting drug users. For too long this vulnerable group has been left at the margins of HIV prevention programmes, and that approach is simply no longer sustainable.

"Similarly, we are never going to reach the Millennium Development Goals on maternal and child health as long as nations, international donors and agencies do not step up to the mark. Yes, there have been marked improvements over the past decade but there are still too any women and children needlessly dying. Care, prevention and treatment need to be scaled up in many developing countries and it needs to start happening now."

The final Plenary Session united three fields of research that are each calling for a scale up of commitment and resources to more effectively drive policy implementation:

### **Ending HIV Transmission in Drug Users by 2015:**

Nora Volkow (United States), Director, National Institute on Drug Abuse (NIDA), remarked in her plenary speech that although injecting drug use is the most commonly recognized drug use related vector for transmission of HIV, non-injecting drug use can also increase the likelihood of HIV transmission through intoxication that alters judgment and prompts greater risk taking. Drug use also affects the course of the infection by damaging the immune system (e.g., opiates, alcohol), through drug interactions with HAART (e.g., alcohol), or through compromised compliance with HIV treatment regimes, all of which can worsen clinical outcomes.

Access to comprehensive interventions including drug abuse treatment, needle exchange programmes (NEP), and community outreach are effective HIV prevention strategies for drug users. Research shows that proactively seeking out drug users to test them for HIV and engaging them in both drug use and HAART treatment (for those who test positive) can improve patient outcomes and prevent HIV transmission and incidence at population level.

## **Caring for Mothers and Children: Towards the Millennium Development Goals**

In her plenary remarks, Philippa Musoke (Uganda), of the Department of Pediatrics and Child Health, Makerere University, argued that although progress had been made in reducing maternal and child mortality in most regions of the world, in most countries this improvement remains inadequate to meet the Millennium Development Goals (MDGs) 4 and 5 by 2015.

In sub-Saharan Africa, HIV infection contributes significantly to the morbidity and mortality of women and children. Without antiretroviral therapy, HIV-infected children have a very high mortality with 50 per cent dying by two years of age. Over the last decade the reductions in maternal and child mortality in sub-Saharan Africa and Southeast Asia have been related to implementation of prevention of mother-to-child HIV transmission (PMTCT) programmes.

Further scale-up of PMTCT programmes and coverage is critical to improving the lives of infected women and children. In addition, education of the girl child, empowering women to be economically independent and the provision of family planning services are critical to improving maternal health and survival. Strengthening national Maternal, Newborn and Child Health (MNCH) programmes for the provision of antenatal and postnatal care for all pregnant women, increased immunization coverage rates, exclusive breastfeeding and nutritional support for all infants remains a priority.

#### **Towards an HIV Cure**

Eric Verdin (Belgium), Professor of Medicine, University of California, concluded the morning plenary by stating that the eradication of HIV would require the elimination of persistent HIV during suppressive therapy.

The source of persistent HIV in patients on HAART suppressive therapy is a current topic of debate. Recent studies of treatment intensification have showed persistent viremia may arise from several different sources, including latent HIV in resting CD4 T cells.

HIV eradication strategies currently focus on small molecules that activate viral transcription in CD4+ T cells. These include inhibitors of histone deacetylases and nuclear factor kappa B activators.

#### **ENDS**

#### **IAS 2011 Conference Summary**

- Almost 6,000 delegates from 129 countries attend IAS 2011
- nearly 3300 abstracts were submitted a record for the conference
- 1100 abstracts were presented
- 55 percent of the presented abstracts were by women
- more than over 25 per cent of the accepted abstracts were from Africa

#### IAS 2013 www.ias2013.org

The 7<sup>th</sup> IAS Conference on HIV Pathogenesis, Treatment and Prevention (IAS 2013) will be held in Kuala Lumpur, Malaysia, 30 June-3 July, 2013.

#### Online Coverage of IAS 2011 at www.ias2011.org

The online Programme-at-a-Glance, available through the website, includes links to abstracts, as well as session slides with audio and speeches (all abstract findings are embargoed until date and time of delivery at the conference). Additional online programming is provided by IAS 2011's two official online partners: Clinical Care Options and NAM. Reporters and others can also follow key developments on the IAS 2011 blog at <a href="http://blog.ias2011.org">http://blog.ias2011.org</a> or on Twitter at <a href="http://www.twitter.com/ias2011">www.twitter.com/ias2011</a>.

#### **About the IAS 2011 Organizers**

**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 is currently being held in Rome, Italy.

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**ISS:** The <u>Istituto Superiore di Sanità</u> (ISS) is the leading technical and scientific body of the Italian National Health Service. Its activities include research, clinical trials, and control and training in public health. It also serves as a major national clearing-house for technical and scientific information on public health issues. Among other things, the Institute conducts scientific research in a wide variety of fields, from cutting-edge molecular and genetic research, to population-based studies of risk factors for disease and disability, to Global Health research.

## **Further information:**

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