



**AIDS
2012**

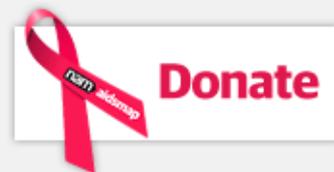
**XIX INTERNATIONAL AIDS
CONFERENCE JULY 22 - 27
WASHINGTON DC USA**



Monday 23rd July 2012

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Ending AIDS: AIDS 2012 opens in Washington



Dr. Diane Havlir, AIDS 2012 US Co-Chair, speaking at the opening session. © IAS/Ryan Rayburn - Commercialimage.net

Recent advances in the prevention and treatment of HIV mean that the world can end the AIDS epidemic, delegates at the opening ceremony of the 19th International AIDS Conference (AIDS 2012) in Washington were told.

However, this goal will only be achieved with the necessary political will and international solidarity.

Delegates at the opening ceremony of AIDS 2012 were reminded of recent research findings about prevention methods, which – if widely implemented – could lead to major reductions in the rates of HIV transmission and AIDS-related deaths.

These include:

- The use of HIV treatment as prevention.
- The rolling out of male circumcision programmes.
- The use of triple-drug HIV therapy during pregnancy and breastfeeding.
- Pre-exposure prophylaxis (PrEP).
- Intensified case finding for TB in patients with HIV, and HIV in patients with TB.
- Earlier HIV therapy.

It was emphasised that these methods provide additional support to well-established methods of prevention, such as condom distribution, voluntary counselling and testing, and harm reduction for injecting drug users. However, all of these initiatives still need scaling-up in many parts of the world.

Delegates and supporters worldwide were encouraged to sign the Washington Declaration, a statement of the steps that need to be taken – based on the latest scientific evidence – to drive down new infections and increase the proportion of people who are receiving life-saving treatment:

- **An increase in targeted investments.**
- **Ensure evidence-based HIV prevention, treatment and care** in accord with the human rights of those at greatest risk and in greatest need.
- **End stigma, discrimination, legal sanctions** against people with and at risk of HIV.
- **Markedly increase HIV testing, counselling and linkages to prevention, care and support services.**
- **Provide treatment for all pregnant and nursing women** living with HIV and end perinatal transmission.
- **Expand access to antiretroviral treatment to all in need.**
- **Identify, diagnose and treat TB.**
- **Accelerate research** on new HIV prevention and treatment tools.
- **Mobilisation and meaningful involvement of affected communities** must be at the core of collective responses.

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The search for a cure



Prof. Françoise Barré-Sinoussi and Anthony S. Fauci, MD at the 'Towards an HIV cure' opening session. Image ©IAS/Steve Shapiro - Commercialimage.net

The search for a cure is one of the **major themes** of this year's event. **Delegates at a symposium heard about the renewed efforts to find a cure and the attitudes of people with HIV to the prospect of a cure.**

Towards an HIV Cure, a declaration setting out a road map of the steps needed to achieve a cure, was launched at the symposium.

Delegates heard about what scientists mean by a cure; how a cure can be achieved; and about the difficulties and challenges that lie ahead.

Renewed interest in a cure was inspired by the case of **the 'Berlin Patient'**. This person was cured of HIV after undergoing a gruelling course of chemotherapy, immunosuppressive treatment, and a bone marrow transplant from a donor with a rare genetic mutation making him naturally resistant to infection with HIV.

This isn't an attractive – or realistic – therapy that can be used to cure other people with HIV. However, it showed that a cure was possible.

There's also interest in a cure because of the ever increasing costs of treating and caring for people with HIV.

But what do scientists mean by a cure?

Delegates were told that a cure would be a therapy that either eradicated HIV from the body, or a treatment that allowed the body's natural defences to keep HIV in check, even after any antiretroviral therapy was stopped.

A lot more research is needed before either kind of cure is achieved.

Promising lines of research include:

- **Use of HIV therapy:** Doctors want to see if a prolonged period of successful **HIV treatment** can reduce so-called 'reservoirs' of cells containing latent HIV infection.
- **Emptying latent reservoirs:** Drugs used to treat other infections and diseases are being used to stimulate latent reservoirs, which would then be 'purged' by the immune system or would self-destruct. Some studies have yielded very promising results.
- **A therapeutic vaccine**, which would stimulate the immune system to kill activated cells.
- **Gene therapy approaches**, where a pool of HIV-resistant CD4 cells would be established.

There's a consensus that these treatments will need to be used in combination.

Researchers were reluctant to commit themselves to the likely cost of finding a cure, or how long it would take. "However, now we are collaborating, it will take a considerably shorter time," said Rowena Johnston of AmFAR.

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The cure: views of people with HIV



Fred Verdult. Photo © IAS/Ryan Rayburn - Commercialimage.net

The views of people with HIV about what makes a cure desirable must be taken into account during research into possible cures, Dutch research shows.

A total of 458 people with HIV were asked what they found most difficult about living with HIV and what would make a cure desirable. The results of this research were presented at the *Towards an HIV Cure* symposium at *AIDS 2012*.

Uncertainty about the future, the fear of **infecting others**, and the **stigma** associated with HIV were all rated as highly undesirable factors of life with HIV.

Approximately three-quarters of those surveyed said that they thought a cure for HIV was very important.

But their enthusiasm for a cure declined as levels of uncertainty about its effectiveness and the risk of transmission to others increased.

Almost all the respondents thought that a cure that eradicated HIV with no risk of future transmission of infection was desirable. But only 14% of patients considered a curative treatment that involved the need for regular check-ups to make sure that the virus had been eradicated was a desirable option.

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HIV, stigma and men who have sex with men



Michael Kirby. Image by Denis Largeron. ©MSMGF

Another **major theme** of this year's conference is the prejudice and **discrimination** that affects **men who have sex with men** (MSM) in many parts of the world, and how this is contributing to the spread of HIV in this group.

Law reform for MSM in Africa and the Caribbean was the focus of a meeting of the Global Forum on Men who have Sex with Men (MSM GF) held on the eve of the conference.

A recent study in *The Lancet* showed that 26% of MSM in studies from the Caribbean were HIV-positive, as were 18% of MSM in research from Africa and 15% of MSM in research carried out in south-east Asia.

The meeting heard that decriminalising sex between men was an essential first step for creating a safer legal environment for this population.

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[See more information on the MSM GF pre-conference here](#)

Keep the promise



The Keep the Promise march and rally in Washington. Image: Greta Hughson/aidsmap.com

This was the plea from participants in the first of two rallies planned for the conference week. One of those taking part was **aidsmap's** Greta Hughson. [Visit our website to find out more and see pictures from the march and rally.](#)

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Two other official partners are providing coverage and analysis online, so you can have the fullest picture of the conference.

Clinical Care Options (CCO), will be providing audio highlights, capsule summaries and downloadable slidesets, while the **Kaiser Family Foundation** are providing webcasting from conference sessions.



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For more details, please contact NAM:

tel: +44 (0)20 3242 0820

fax: +44 (0)20 3242 0839

email: info@nam.org.uk

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