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AIDS 2010 Heralds Continued Innovation in Global AIDS Response

Exciting New Avenues of Research and Policy Drive Expansion of HIV Treatment Access, Use of Antiretrovirals to Prevent Infections and Pursuit of a Cure

21 July 2010 [Vienna, Austria]—The unwillingness of the global AIDS community to accept the status quo is fuelling a new era of scientific innovation to drive novel ways of treating and preventing HIV, organizers of the XVIII International AIDS Conference (AIDS 2010) taking place in Vienna, Austria said today. And, with millions of lives dependent on expanding access to antiretroviral treatment to all those clinically in need, researchers and clinicians are partnering in new ways to find the most effective and efficient methods to deliver treatment and strengthen health systems. A new Medicines Patent Pool described in today's plenary session also offers the possibility of broader access to more effective and less toxic regimens.

"The inspiring element of the conference so far has been the marriage of cutting edge science and innovative policy and programming," said Dr. Brigitte Schmied, AIDS 2010 Local Co-Chair and President of the Austrian AIDS Society. "We need that same energy and creativity to break through the HIV-related stigma and discrimination that prevents too many from benefitting from the knowledge we already have about how to save lives."

Growing evidence of the power of antiretroviral drugs to prevent new infections offers the possibility of a major step toward universal access to HIV prevention while increasing access to lifesaving care. The use of treatment science to develop new prevention modalities, such as the antiretroviral-based vaginal microbicide used in the CAPRISA trial, whose results were released this week, is a further example of the drive to provide a variety of effective new prevention options.

"Additional evidence demonstrating the potential use of antiretroviral drugs to prevent infections coupled with other exciting scientific advances discussed this week signal a potential new era in innovation," said Dr. Julio Montaner, AIDS 2010 Chair, President of the International AIDS Society and Director of the B.C. Centre for Excellence in HIV/AIDS in Vancouver, Canada. "At the same time, with lifesaving treatment and prevention tools readily available now, world leaders must step up and fund universal access."

There is also an increasing focus on the development and pursuit of strategies for a cure. Key experts in the area of latent viral reservoirs met just prior to the conference to examine new scientific results in this arena to inform the way forward. The meeting was also convened to encourage young investigators to work on this priority topic. Participants will provide an update in a press conference at 14:00 today.

Wednesday's plenary session included three provocative presentations:

Anti-HIV Drugs for Prevention

Dr. Bernard Hirschel (Switzerland) of the Infectious Diseases Service Geneva University Hospitals said that treatment as prevention is a promising strategy that needs to be properly evaluated in clinical trials. It is known that decreased viral load lowers the risk of HIV transmission and that effective treatment lowers viral load to undetectable levels. Therefore, if one could identify and treat all PLHIV, the AIDS epidemic would wither and die away. However, such a radical solution is a "pipe dream". In reality, the preventive potential of ART currently is not fully characterized. Modelers have tried to fill the gap, but models differ depending on assumptions, which are debated. As treatment expands, incidence in some cities has fallen, which is encouraging, but correlation does not necessarily imply causation. Studies in sero-discordant couples appear to show that treatment protects from transmission, as well, but such couples are only part of the sexually active population potentially at risk.

Funding agencies are currently evaluating proposals for more definitive studies, where a number of communities are randomized to receive the "test-and-treat" approach, or continue as before. These trials face logistical, practical and ethical obstacles. However, without more definitive data, the intuitive appeal of "test-and-treat" is unlikely to translate into action on a global scale. In the meantime, based on the available evidence, the medical community must strive to provide treatment under current guidelines to those patients in need, leading to better individual and societal outcomes, including decreasing HIV incidence.

A Proposal for Change: Managing Patents for Access to AIDS Medicines for All

Ellen 't Hoen (The Netherlands) of UNITAID discussed the Medicines Patent Pool, a new mechanism that allows patent holders to voluntarily offer the intellectual property related to their AIDS medicines, under certain conditions. Any company wishing to use the intellectual property to produce the drugs can do so in exchange for a royalty payment. 'tHoen noted that if licenses for patents on AIDS drugs are not made available in countries that grant patents, generic competition will no longer be able to play a role in bringing down prices.

Over the past 10 years, activism, generic competition for medications, the development of fixed-dose combinations, and many countries' willingness to use flexibilities in national and international patent rules have greatly increased access to antiretroviral therapy, according to 'tHoen. However, many patients will soon need to switch to much more expensive second- and third-line drugs and the World Health Organization (WHO) is recommending newer, safer, patent-protected medications. By making licenses available and harnessing the power of competition in medicines markets, the Medicines Patent Pool could promote the availability of better and more robust treatments and generate considerable cost savings.

ART Advances – Into the Next Decade

Dr. James Hakim (Zimbabwe) of the University of Zimbabwe called on the HIV/AIDS community to accelerate access to antiretroviral therapy that maintains the long-term health of PLHIV; develop point-of-care diagnostics that allow clinicians to prescribe medications wisely; and improve health delivery systems that can efficiently provide therapy to those still in need. He said that despite the rapid scale-up of ART, the world is not moving fast enough to keep up with the pace of five new HIV infections for every two PLHIV who gain access to ART.

New WHO treatment guidelines recommend phasing out older, more toxic drugs and beginning therapy at higher CD4 counts, which increases the number of PLHIV eligible for treatment. As countries move to adopt these recommendations, equity and human rights must remain paramount to implementing a progressive and comprehensive HIV response. He concluded that the

Millennium Development Goals serve as a clear roadmap to the overall achievement of the sanctity of human dignity.

Visit www.aids2010.org for complete programme information and comprehensive online coverage, as well as a link to the Vienna Declaration, the official declaration of the XVIII International AIDS Conference, which calls for a reorientation of international drug policy.

About the AIDS 2010 Organizers

AIDS 2010 is convened by the IAS, the world's leading independent association of HIV professionals, in partnership with a number of international, regional and local partners.

International partners for AIDS 2010 include:

- Joint United Nations Programme on HIV/AIDS (UNAIDS), including its co-sponsors, the World Health Organization (WHO) and the United Nations Office on Drugs and Crime (UNODC)
- International Council of AIDS Service Organizations (ICASO)
- Global Network of People Living with HIV/AIDS (GNP+)/International Community of Women Living with HIV/AIDS (ICW)
- World YWCA
- Caribbean Vulnerable Communities Coalition (CVC)

Local and regional partners for AIDS 2010 include local scientific leadership and:

- City of Vienna
- Government of Austria
- Aids Hilfe Wien
- Austrian AIDS Society
- East European & Central Asian Union of PLWH (ECUO)
- European AIDS Clinical Society (EACS)
- European Commission

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