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## Hope amid frustration as World AIDS Day approaches

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Thirty-four million people live with HIV today, and 1.7 million became newly infected in 2011. But on the eve of World AIDS Day, many experts see room for some optimism.

Studies now show that identifying -- and effectively treating -- people who are HIV-positive early in the course of their infections will not only reduce sickness and deaths for those patients but will also reduce the risk of spreading the virus to others. That's because the antiretroviral medications keep the levels of virus low in a patient's body.

For those reasons, the U.S. Preventive Services Task Force this month released draft advice for the government and U.S. physicians proposing that HIV screens should be routine for most people -- not just those whose behavior puts them at high risk. A commentary by AIDS experts published in the Canadian journal CMAJ suggested the same thing for our neighbors to the north. The advice is in line with CDC guidelines as well as with ones from a variety of medical groups.

Yet less than a third of HIV-infected people in the United States are being treated successfully for their infection such that the virus is fully suppressed, and similarly low percentages have been observed in other countries, noted a statement released by the National Institutes of Health. It was coauthored by Dr. Anthony Fauci (director of the National Institute of Allergy and Infectious Diseases), Jack Whetsell (director of the NIH Office of AIDS Research) and NIH director Dr. Francis Collins. To try to fix that problem, the NIH has a trial underway to test a community-based program that would a) test and b) immediately link those whose results are positive to treatment facilities so they can start getting medications right away.

The NIH is also pushing along with other research efforts. They still hope to find an effective vaccine (a long and frustrating quest). They're testing a protective device that slowly releases an HIV-destroying microbicide: a ring inserted around the cervix, which would be replaced once a month. And they are also thinking about cures -- a notion no longer considered crazy talk, as a July Los Angeles Times article describes.

Scientists in that story said they thought that the drugs used today are likely as good as they're going to get, that they have side effects and have to be taken for life -- and argued that it's time to aim higher. Inspiration came from Timothy Brown, an HIV-positive American who developed leukemia. He was treated with a bone marrow transplant, and doctors chose as a donor who was one of the few individuals genetically resistant to HIV infection. Brown is now cured.

Bone marrow transplants are risky, so this isn't a feasible approach for every person who is HIV-positive. But scientists are working on several other strategies. One would be gene therapy: You'd engineer a patient's own immune cells to resist infection with HIV.

For more on the current state of HIV/AIDS research, heres a video of Caltech Nobel Laureate David Baltimore talking about progress in his lab.

Meanwhile, on Thursday, Secretary of State Hillary Rodham Clinton unveiled a new plan from the President's Emergency Plan for AIDS Relief, the PEPFAR Blueprint: Creating an AIDS-free Generation. The goals:

- "1. Work toward the elimination of new HIV infections among children by 2015 and keeping their mothers alive.
2. Increase coverage of HIV treatment both to reduce AIDS-related mortality and to enhance HIV prevention.
3. Increase the number of males who are circumcised for HIV prevention.
4. Increase access to, and uptake of, HIV testing and counseling, condoms and other evidence-based, appropriately-targeted prevention interventions."

Read/watch Secretary Clintons remarks upon release of the report and access the entire blueprint [here](#).

[See the topic on aegis.org](http://aegis.org)