



OFFICIAL PRESS RELEASE - DAY 4

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HIV Epidemic in Asia and the Pacific, HIV Vaccine Developments, and HIV-Hepatitis C Co-infection Discussed at Final IAS 2013 Plenary Session

Wednesday, 3 July 2013 (Kuala Lumpur, Malaysia)--Researchers speaking on the final day of the 7th IAS Conference on HIV Pathogenesis, Treatment and Prevention (IAS 2013) have focused on HIV epidemic trends in Asia and the Pacific, new vaccine insights and HIV and Hepatitis C comorbidity.

The presentations reflected the breadth of expertise among more than 5,200 researchers, clinicians and community leaders attending the conference, which runs from 30 June – 3 July in Kuala Lumpur, Malaysia.

“Thanks to tremendous efforts, in the last few years most countries in the Asia and the Pacific region have registered a reduction of new HIV infections,” said IAS 2013 Local Co-Chair Adeeba Kamarulzaman, Director of the Centre of Excellence for Research in AIDS (CERiA) and Dean of the Faculty of Medicine at University of Malaya in Kuala Lumpur. “However, we still have challenges ahead of us, especially in reducing mortality among children and disproportionately affected populations. Having the conference here has, no doubt, pushed the issue up the agenda and I hope this translates into real changes based on the available scientific evidence.”

“HIV comorbidity is one of the most pressing issues that we need to address in HIV,” said Françoise Barré-Sinoussi, IAS 2013 International Chair and International AIDS Society President. “There is no doubt that new studies on Tuberculosis and Hepatitis C will contribute to better integrate research and improve multidisciplinary coordination. In the case of HCV, injecting drug use is the main driver of infection, and we face similar challenges in terms of stigma and discrimination towards infected people.”

Tracking the HIV Epidemic in Asia and the Pacific

In his plenary presentation, J.V.R. Prasada Rao, UN Secretary-General’s Special Envoy for AIDS in Asia and in the Pacific, described how Asian AIDS epidemics are characterized by high levels of HIV prevalence among key populations, including sex workers and their clients, injecting drug users (IDUs), men who have sex with men (MSM), and transgender women. As a region, Asia witnessed the highest HIV incidence

from 1990 to 2000 which plateaued and reversed during the next decade in a number of countries.

Asian countries have conducted systematic surveillance, data collection and analysis, helping them to monitor the progress of the epidemic with a fair degree of accuracy.

Rates of new HIV infections are decreasing or stable, except in a few countries, and mortality rates peaked from 2000 to 2005. Mortality among children, however, has not reduced that appreciably, largely due to low coverage of prevention of mother-to-child transmission (PMTCT) programmes. There is high coverage of interventions among sex workers and their clients, but coverage levels of interventions for IDUs, MSM, and transgender women continue to be low – largely due to political apathy and criminalization. High levels of stigma persist because of the prevailing adverse legal environment and criminalization of key populations.

Looking beyond 2015, the situation remains hopeful, but uncertain, with a great opportunity for progress at the UN General Assembly in September 2013 where countries will meet to deliberate the reports of the Intergovernmental Working Group (IMG) of Rio + 20 Conference and a High Level Panel appointed by the UN Secretary General to define post-2015 development agenda.

Vaccine: New Developments in Protecting Antibodies

Dennis Burton (United States), Professor of Immunology and Microbiology, Scripps Research Institute, noted that many now consider that in order to be successful, an HIV vaccine will need to induce broadly neutralizing antibodies capable of neutralizing many different strains of virus. Induction of such antibodies by classical vaccination strategies, such as live attenuated virus and killed virus, has not been successful. An alternative approach is a rational one based on understanding, at the molecular level, the structure of the HIV envelope spike at the surface of the virus, and how broadly neutralizing antibodies interact with this spike. It is the binding of antibodies to the spike that makes virus non-infectious.

Great progress has been made in recent years in isolating broadly neutralizing antibodies and understanding how these antibodies interact with the envelope spike. The next stage, which is to take this knowledge and design proteins that may be capable of inducing broadly neutralizing antibodies, has begun. With examination of more and more of the broadly neutralizing antibodies, some of the hurdles to inducing them through vaccination become clearer. At this moment, many insights are being obtained and many vaccine candidates are being designed and tested. It is hoped that this rational design approach will begin to give signs of success within the near future.

HCV in HIV Patients: Cure and Beyond

Around 25% of HIV-infected patients are also chronic carriers of hepatitis C virus (HCV) and because of the intricate and deleterious influence both viruses have upon one another, liver-related morbidity and mortality have been lately increasing in the co-infected population. Karine Lacombe (France), Associate Professor of the Infectious and Tropical Diseases Department, Saint-Antoine Hospital, Paris, France, reviewed the latest data regarding the evolving epidemics of co-infection around the world and gave

some insights on the physiopathological pathways by which both viruses may lead to end-stage liver disease.

HCV cure is becoming a reality thanks to the major changes occurring in the treatment paradigms: care is shifting from a long course of Peg-Interferon – ribavirin-based bitherapy with major side effects and low response rate to well-tolerated and short courses based on two, three or four-drug regimens with a very high rate of success. But this reality may stay out of touch for the most parts of the HIV-HCV infected world because of cost and human resources constraints. In her address, Lacombe advocated for an easier access to innovative therapies for those most at needs.

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Further information:

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. The IAS 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 lead organizer of the IAS Conference on HIV Pathogenesis, Treatment and Prevention, which will be held in Kuala Lumpur, Malaysia, 30 June – 3 July 2013 and custodian of the biennial International AIDS Conference, which will be held in Melbourne, Australia, 20-25 July 2014.

www.iasociety.org | www.ias2013.org | www.aids2014.org

The **Centre of Excellence for Research in AIDS (CERiA)** was established in 2007 to respond to the need to better understand the Malaysian HIV epidemic and to build local capacity in conducting HIV related research. Since its establishment it has become the leading Centre in Malaysia conducting HIV related research in various fields including epidemiology, social behavioural, clinical and laboratory based research.

IAS 2013: Join the conversation

Get the latest conference updates and share your thoughts and ideas through the IAS 2013 Social Media channels.

We are tweeting – @_IAS2013 – and hope many of you will tweet along with us, using #IAS2013 to keep the conversation going.

Become a fan of IAS 2013 on Facebook - www.facebook.com/conferencelAS2013 and stay in touch with the latest conference updates and developments. Tell us why you are coming to Kuala Lumpur and what you hope to gain from IAS 2013.

Join the IAS 2013 LinkedIn group, you are welcome to start new discussions and add your comments to existing threads.

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