What's New in the HPTN?

A World AIDS Day Message from HPTN

This year's World AIDS Day theme is "Getting to Zero." How do we get new HIV infections to zero? For many around the world who have been at the forefront of the epidemic from its earliest days, the dedication and determination of so many has sustained the momentum of confronting the epidemic. Many of us recall the early dark days and the sense of hopelessness that prevailed in both the prevention and therapeutic arenas. We have come a long way in the journey. The HIV Prevention Trials Network (HPTN) is proud to be a leader in identifying new and innovative HIV prevention strategies. As World AIDS Day approaches, we once again extend our heartfelt gratitude to those who continue to believe that "getting to zero" is possible. For those who work at research sites, who volunteer on community advisory groups, for those who work on the design of the studies, for those who test study samples or analyze the data for our studies, we say thank you. None of the work we do would be possible without the collaborative spirit and passion you bring to this cause.

As we look back on 2013 there is much to celebrate. Results from HPTN 043 showed that efforts to take testing into the communities can increase the number of people who get tested and know their HIV status. The findings from this study, along with those from HPTN 052, will help inform “test and treat” strategies currently underway and in development. The ongoing HPTN 065 (TLC-Plus) and the recently launched HPTN 071 (PopART) study will provide critical information regarding this promising strategy. This year also marked the launch of HPTN 073, the first study to specifically look at the feasibility and acceptability of pre-exposure prophylaxis (PrEP) among Black men who have sex with men in the U.S. There are also exciting vanguard studies planned. HPTN 074 will examine treatment as prevention for injection drug users and HPTN 075 will determine the feasibility of HIV prevention cohort studies among MSM in Sub-Saharan Africa. At the same time, the HPTN continues to build a vibrant pre-exposure prophylaxis agenda with two planned studies, HPTN

Study Updates

HPTN 061
Congratulations to the HPTN 061 team for their successful publications. HPTN 061, or the BROTHERS Study, showed that the overall rate of new HIV infection among Black MSM in the study was nearly 50 percent higher than in white MSM in the U.S. Young black men—those 30 years of age or younger—acquired HIV infection at a rate of 5.9 percent a year, three times the rate among U.S. white MSM. Since July the team has published four new papers with several others awaiting publication or under journal review. Great work HPTN 061!


076 and HPTN 077, which will evaluate the safety and acceptability of two promising long-acting injectable antiretroviral drugs for PrEP.

Despite the progress that has been made we know there are knowledge gaps and more work needs to be done. The HPTN is dedicated to find integrated combination strategies inclusive of biomedical, behavioral and structural interventions that can significantly decrease HIV incidence, maximize the “prevention cascade” to achieve potential effectiveness of prevention interventions and find ways to evaluate new promising PrEP regimens that would fit within a multi-component prevention strategy in the future.

World AIDS Day is an opportunity to come together as a community and to demonstrate our solidarity and commitment to the fight against HIV. Getting to zero new infections, zero discrimination and zero AIDS-related deaths is a goal we must continue to embrace and work tirelessly to achieve.

Wafaa El-Sadr, MD, MPH
Myron Cohen, MD
HPTN Principal Investigators

HPTN 071 (PopART) Launches

The HPTN is pleased to announce the launch of the HPTN 071 study (PopART—Population Effects of Antiretroviral Therapy to Reduce HIV Transmission). The study is being conducted in South Africa and Zambia and will determine the impact of a combined package of several interventions in reducing the number of new HIV infections in communities. The prevention package includes a universal HIV test and treat model (UTT), with annual home-based HIV testing, linkage of those found to be HIV positive to care and the offer of immediate antiretroviral therapy (ART) for all HIV-infected adults, irrespective of CD4 count, and medical male circumcision for HIV uninfected men.

Data from recent clinical trials have demonstrated the efficacy of many components of the combination prevention package. While most of these prevention approaches are now offered in many high HIV prevalence settings, achieving high enough coverage to reduce the number of new infections has proven challenging.

The HPTN 071 (PopART) study will aim to deliver the prevention package to all households within a community to enhance coverage and thereby reduce new HIV infections at the population level. Specially trained community health workers will play a key role in achieving high coverage of the interventions.

“There is a very strong rationale for test-and-treat as a new approach to HIV prevention,” said Richard Hayes, HPTN 071 (PopART) Principal Investigator and Professor of Epidemiology and International Health at the University of California, San Francisco.

HPTN 074 (under development)

HPTN 074 will determine the feasibility of a future trial that will assess whether an integrated intervention combining facilitated antiretroviral therapy (ART) at any CD4 cell count, substance use treatment, and behavioral counseling for HIV-infected people who inject drugs...
London School of Hygiene and Tropical Medicine. “The study will help determine whether this approach can be delivered on a wide scale in sub-Saharan Africa with high uptake and coverage, and what impact this will have on HIV incidence at the population level.”

“HPTN 071 (PopART) is a natural extension of HPTN’s HIV prevention research portfolio as it relates to integrated strategies for HIV prevention,” said Dr. Wafaa El-Sadr, HPTN Principal Investigator. “The findings from HPTN 071 (PopART) will be critical for policy makers as this study will determine whether such an HIV prevention package will work at population level and whether it is cost effective.”

The study will involve 21 communities in South Africa and Zambia with a total population of 1.2 million.

The Cost Effectiveness of TasP

Using model-based analysis of data from HPTN 052, early initiation of ART for HIV infected individuals with uninfected sexual partners not only helps reduce transmission but it also appears to make economic sense. In a report published in the New England Journal of Medicine, researchers found that early antiretroviral therapy (ART) was very cost-effective in South Africa and India over the lifetime of patients.

Researchers used a mathematical model simulating HIV treatment and transmission and its associated health and economic outcomes to make their projections. The results indicated that, during the first five years, 93 percent of patients receiving early ART would survive, compared with 83 percent of those whose treatment was delayed. The potential costs of infections that were prevented by early treatment in South Africa – particularly tuberculosis – would outweigh the costs of ART medications, indicating that the strategy would result in overall cost savings. While this was not the case for India, where costs of care for opportunistic infections are less, early ART in India was projected to be cost-effective, according to established standards.

Lead author Rochelle Walensky, MD, MPH says early ART is a “triple winner”. “HIV-infected patients live healthier lives, their partners are protected from HIV, and the investment is superb. Now that we know that early ART not only improves clinical and prevention outcomes but also is a great investment, we need to redouble international efforts to provide ART to any HIV-infected person who can benefit from it.”

The feasibility of providing early ART has been questioned, particularly in resource-limited countries, but researchers for the report say their analysis shows that with the proper investment dramatic decreases in infections and illness could be realized.

Building Connections: Using Social Media to Increase Community Engagement

Increasingly, the HPTN is looking to social media to expand our reach.
Building our national community engagement has been successful through the collaborative use of several communication channels. When enrollment started for the PrEP implementation study HPTN 073, we launched a multi-faceted social media awareness campaign that included a webinar that was publicized through email messages, event invitations on Facebook and Twitter and through several LinkedIn group discussions. Those messages were amplified when several of our followers on Facebook and Twitter shared those posts and tweets, as did the authors of several blogs.

A one-hour Twitter Chat prior to the webinar encouraged organizations and individuals to tweet questions about the study. Those questions were answered by HPTN’s Senior Community Program Manager, Jonathan Lucas and Christopher Chauncey Watson, Chair of the HPTN Black Caucus. These combined efforts allowed us to share important information about HPTN 073 in a way that is not always possible with traditional communication methods.

Social media outlets reach organizations and other groups that may have concerns about HIV and other health disparities, but may not be aware of important HIV prevention research in the development of policies and programs that impact the communities they serve. We have used our Facebook and Twitter pages to establish connections with community-based HIV service organizations, civic, faith-based, and professional groups, as well as advocacy networks. These connections allow us to provide information that they can then share with their constituency groups.

To help HPTN’s connections continue to grow include a link to Facebook/HIVptn and Twitter/HIVptn in your newsletters or blogs, or email those links to any organization that may benefit from receiving updates about HIV prevention research. You can also help by sharing your feedback. HPTN is conducting a brief survey this month to gather additional information about our national community engagement efforts. Please change to: Please take a minute to click the survey link, and forward to others so our social media efforts can continue to improve.

Let's Talk About PrEP in LA

Community outreach is a 24/7 job. Just ask Kieta Mutepfa and Gregory Victorianne, who are both involved in recruitment efforts for HPTN PrEP studies in Los Angeles, California. Kieta is the Senior Community Health Program Representative for the UCLA Care Clinic. Gregory is the Recruitment and Retention Coordinator at the UCLA Department of Family Medicine.

Kieta started the LA County PrEP group in 2011. “There were a number of PrEP demonstration projects planned in the Los Angeles area. To mitigate oversaturation of the same communities we mapped out where they were taking place to see how community organizations could work together.” As a result of those early conversations and collaborations the LA County Department of Public Health, Division of HIV and STD Programs, will collaborate from around the world to learn the latest about HPTN’s exciting scientific agenda. Reservation and agenda information coming soon. Look for updates at www.hptn.org.

FHI 360 is moving

The HPTN Leadership and Operations Center (LOC), FHI 360, will be moving to a new location in Durham NC, in November. This will not affect the email addresses or telephone numbers of LOC staff. The new office will be located at 359 Blackwell Street, Suite 200 Durham, NC 27701.

Towards an AIDS Free Generation: Increasing HIV Treatment

Join Dr. Wafa El-Sadr Wednesday, November 20 at 1:00 p.m. EST for an interactive webinar brought to you by the Black AIDS Institute and the HIV Prevention Trials Network (HPTN) discussing:

- The Importance and Challenges of Increasing Treatment Adherence
- Policy and Programing Lessons Learned From HPTN 052–The Serodiscordant Couples Study
- What We Hope to Learn From HPTN 065–The Test, Link to Care, Plus Treat (TLC-Plus) Study
- What’s Next in Treatment as Prevention (TasP) Research

Attendance is free, and people from all backgrounds are invited to participate. Register and submit your questions for Dr. El-Sadr. The presentation will be recorded and posted on the HPTN website webinars page.

HPTN at the 2013 U.S. Conference on AIDS

The HPTN presented at a variety of workshops and seminars during the 2013 United States Conferences on AIDS (USCA) in New Orleans, Louisiana. Participants learned more about the latest advances in HIV prevention research as well as ways to become engaged in the clinical research process at the local, regional and community level. You can view the presentations at HPTN.org.

Coming Soon
fully implement PrEP information in their HIV counseling and training beginning in early 2014.

“When it comes to PrEP, education is key,” says Kieta. “When we first started talking about PrEP people were like, ‘What is that?’ ‘Who is it for?’ We need to find ways to normalize the conversation about PrEP especially as we move into healthcare reform.” She says it’s also important that the information comes from sources and organizations that community members are already familiar with and trust.

Gregory agrees that building community trust is critical and he says the education process for PrEP is ongoing. “Not everyone understands yet exactly what PrEP is or the difference between some of the PrEP studies in LA County. One part of my job is education and to cast the net wide—distributing palm cards on buses, hang out where the guys are, including community gatherings, hang out on the streets, support CBOs, and to speak to providers about the availability of PrEP in our community.”

Once a law clerk, Gregory says he migrated to HIV prevention work when he lost his best friend Ricardo to AIDS. “Ricardo told me I need to do this work to prevent our community from dying. We have lost more people of African descent to HIV/AIDS than the Middle Passage or what some call the Black Holocaust." It was the loss of Ricardo and many friends early in the epidemic that Gregory says continues to motivate him. "If I can keep one person from seroconverting in HPTN 073 - that's a success."

Kieta began volunteering at a hospice for AIDS patients when she was in college. “I saw the height of people dying and now to be part of the living is great.” She says she is encouraged and inspired by the progress that has been made. “Hopefully what we learn will shift the paradigm for HIV treatment and prevention. What we do to make it possible for serodiscordant couples to have healthy relationships, to make sure the MSM HIV positive population doesn’t continue to grow, and that women have other options besides condoms. All these things give me hope.”

A Closer Look

HPTN Scholars Spotlight

LaRon Nelson

The HPTN is pleased to once again offer a scholarship opportunity for early-career U.S. minority investigators funded through a supplement from the National Institute of Allergy and Infectious Diseases (NIAID) and the National Institute for Mental Health (NIMH). Applications are now being accepted. Click here for more information and how to apply. Current HPTN Scholar LaRon Nelson is an Assistant Professor and Assistant Dean of Global & Community Affairs in the College of Nursing at the University of South Florida. His research focuses on the primary prevention of HIV and other sexually transmissible infections among men who have sex with men within African and African Diaspora communities. His work is primarily concerned with understanding social and structural factors that influence HIV infection and related clinical outcomes.

Fourth International Conference on Stigma
Friday, November 22
Washington, DC

World AIDS Day
Sunday, December 1

NAESM 2014
January 16-19
Orlando, Florida

CROI 2014
March 3-6
Boston, Massachusetts

Hot Off the Press

HPTN 052

Walensky RP, Ross EL,
What made you decide to apply to become an HPTN Scholar?
The program offered me the opportunity to be more involved with the landmark HPTN 061 Black MSM study and to work more closely with Protocol Co-Chair Dr. Ken Mayer who is a pioneer global health researcher with MSM. This area of research was something I had begun to explore in my own work.

How has the HPTN Scholar’s program helped you? What have you gained from the experience?
Being an HPTN Scholar helped me to develop a more precise focus in my research—MSM in African and African Diaspora communities. The program has helped me gain a strong sense of the cutting edge research that is happening now—not only what is reported in literature 1-2 years after it has been completed. Having the chance to network and collaborate with leaders in HIV prevention science has enabled me to structure my own research program in the context of current and emerging studies, allowing me to have a clear sense of how my work will contribute to overall advances being made in prevention science.

What do you consider your greatest accomplishment as an HPTN Scholar?
For me, it was the opportunity to work so closely with my mentor, Dr. Ken Mayer, and contribute to the development of HPTN 073. It allowed me to bring my research and clinical expertise, as well as my public health leadership background, to that process. The experience definitely helped me think about how to move other research ideas, outside of the network, from concept phase to implementation within a collaborative interdisciplinary team.

What would you tell other prospective scholars about the program and how it might benefit them?
I would encourage the scholars to adopt a go-getter attitude and seek out opportunities to maximize their learning opportunities and exposure to the researchers and knowledge within the Network.

Hear more from LaRon and HPTN scholar Russell Brewer in their StoryCorps conversations with their HPTN mentors on the HPTN website.


HPTN 057

HPTN 061
See separate article on page one.

Want to Read More?
- HIV Prevention Trials Network
- HPTN 052
- HPTN 061
- HPTN 064
- HPTN 065
- HPTN 067
- HPTN 068
- HPTN 069
- HPTN 071
- HPTN 073

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