



HIV PREVENTION TRIALS NETWORK



# Prevention NOW

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## The 2016 HPTN Annual Meeting is Right Around the Corner



The 2016 [HPTN Annual Meeting](#) is getting closer. We will see you June 10-15, 2016 at the Crystal Gateway Marriott in Arlington, Virginia. As in years past, the HPTN Annual Meeting overlaps in part with the [IMPAACT Network Annual Meeting](#). The HPTN Annual Meeting will include an engaging lineup of speakers and topics in several plenary sessions, as well as a joint HPTN/IMPAACT plenary session. HPTN Scholars will also present their work, and study teams will highlight key study findings and lessons learned on the rollout and conduct of the trials in an evening poster session. [More information](#)

## STUDY UPDATES



## HPTN and HVTN are AMPed for Groundbreaking Study

Enrollment has begun in the first of two multinational clinical trials of an intravenously-delivered investigational antibody for preventing HIV infection. [HVTN 703/HPTN 081](#) and [HVTN 704/HPTN 085](#) known as the AMP (antibody-mediated prevention) Studies will test whether giving people an investigational anti-HIV antibody called VRC01 as an intravenous infusion every eight weeks is safe, tolerable and effective at preventing HIV infection. With a projected enrollment of 4,200 adults, the trials also are designed to answer fundamental scientific questions for the fields of HIV prevention and vaccine research.

The AMP Study that launched on April 6, HVTN 704/HPTN 085, will take place at 24 sites in Brazil, Peru and the United States, and will enroll 2,700 men and transgender people who have sex with men. The second of the two AMP Studies, HVTN 703/HPTN 081, is planned to launch later this spring, enrolling 1,500 sexually active women at 15 sites in Botswana, Kenya, Malawi, Mozambique, South Africa, Tanzania and Zimbabwe. The volunteers in both studies will be adults at high risk for HIV infection, but HIV-negative when they enter the study.

In each trial, volunteers will be assigned at random to receive an intravenous infusion of either VRC01 at a dose of 30 milligrams per kilogram (mg/kg), VRC01 at a dose of 10 mg/kg, or a saline solution (a placebo). Neither the volunteers nor the study investigators will know who receives which type of infusion until the end of the study. Volunteers will receive a total of 10 infusions, once every eight weeks, and then will be followed for 20 more weeks.

Volunteers will be tested for HIV infection once every four weeks and at any time after reporting possible exposure to the virus. Those who test positive for HIV will stop receiving infusions but will remain in the study for follow-up and will be referred to professionals in their communities for appropriate medical care.

All volunteers will receive the standard care for preventing HIV infection, including condoms and lubricant, counseling on how to reduce behaviors that increase risk for infection, and counseling and referral for antiretrovirals to take immediately following suspected exposure to HIV (post-exposure prophylaxis). In addition, volunteers in the AMP Studies will be referred to available local programs where they may obtain daily oral pre-exposure prophylaxis (PrEP). Volunteers' access to PrEP will expand as more host countries approve Truvada for PrEP and develop the infrastructure to support its use. The AMP Studies have been designed so investigators will be able to discern a preventive effect from VRC01 even if some participants are taking PrEP. The results of the trials are expected in 2022.

## Having a Stake in AMP - Stakeholder Consultation

The [South African Medical Research Council \(SAMRC\)](#), [HIV Prevention Trials Network \(HPTN\)](#) and [HIV Vaccine Trials Network \(HVTN\)](#) recently conducted a stakeholder consultation in Cape Town, South Africa to discuss the upcoming HVTN 703/HPTN 081 (AMP) study. The two-day meeting brought together governmental and nongovernmental organizations, public health advocates, institutional review board members, research staff, community officials and traditional healers from seven sub-Saharan African countries. Topics discussed included: consideration of the HIV prevention tool box and the need for additional tools, HIV prevention through infusions and injections, the science behind AMP and the study design, anticipated implementation challenges and possible solutions, and strategies for ongoing engagement. The anticipated outcome of this meeting was dialogue, mutual understanding, and partnership for this most important study. [Learn more](#)



Linda-Gail Bekker presenting at the AMP Study Stakeholder Consultation

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## Study Shoutouts

The first “seeds” needed for deep-chain respondent driven sampling (DC-RDS) have been planted for HPTN 078. DC-RDS uses a small group of participants, known as “seeds”, who are well connected within the population to recruit MSM they know into the study. The MSM recruited by the “seeds” repeat the process and refer other MSM they know and so on. This type of recruitment process has previously been shown to be effective in recruiting hard to reach populations. The study team will assess the ability of DC-RDS to identify and recruit HIV-infected MSM in the U.S. who are not virally suppressed. [Read more](#)

## NETWORK MEMBER SPOTLIGHT

### Nyaradzo Mavis Mgodzi, MBChB, MMed

Nyaradzo is a histopathologist at the University of Zimbabwe-University of California San Francisco (UZ-UCSF) Collaborative Research Programme, a DAIDS Clinical Trials Unit (CTU). She is a member of the HPTN Executive Committee, protocol co-chairperson for HVTN 703/HPTN 081 (AMP Study) and lead investigator for HPTN 076 and HPTN 082 in Harare.



#### How did you first get involved with the HPTN?

In 2007, having worked in the Zimbabwean Public Health sector for almost 12 years and seeing the relentless morbidity and mortality from HIV/AIDS, I was overwhelmed by an urgent need to contribute significantly towards curbing the HIV epidemic. I embarked on a career change, moving from clinical pathology to HIV prevention/treatment research and joining the UZ-UCSF CTU as a medical officer for HPTN 035. After the completion of 035, although not directly involved in HPTN, I worked closely with the HPTN 052 team in my CTU and eventually re-joined HPTN in 2015 as Investigator of Record for HPTN 076. [Read more](#)

## AWARENESS DAYS



[HIV Vaccines Awareness Day](#)

May 18, 2016

[National Asian and Pacific Islander HIV/AIDS Awareness Day](#)

May 19, 2016



## HOT OFF THE PRESS

Pettifor A, MacPhail C, Selin A, Gómez-Olivé FX, Rosenberg M, Wagner RG, Mabuza W, Hughes JP, Suchindran C, Piwowar-Manning E, Wang J, Twine R, Daniel T, Andrew P, Laeyendecker O, Agyei Y, Tollman S, Kahn K; HPTN 068 protocol team. [A randomized control trial of a conditional cash transfer to reduce HIV infection in young women in South Africa: HPTN068 study design and baseline results](#). AIDS and Behavior 18 Feb 2016.

Ritchwood TD, Hughes JP, Jennings L, MacPhail C, Williamson B, Selin A, Kahn K, Gómez-Olivé FX, Pettifor A. [Characteristics of Age-discordant Partnerships Associated with HIV Risk Among Young South African Women \(HPTN 068\)](#). J Acquir Immune Defic Syndr. 2016 Mar 11.

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