On June 5, 1981, *Morbidity and Mortality Weekly Report*, the Centers for Disease Control and Prevention’s weekly report, included an article about five young gay men in Los Angeles treated for a rare form of pneumonia. This syndrome became known as gay-related immune deficiency, which would later be called acquired immunodeficiency syndrome, or AIDS, caused by the human immunodeficiency virus, or HIV.

During the past 40 years, HIV/AIDS has impacted millions of men, women, and children across the globe. According to UNAIDS, since the start of the pandemic, an estimated 75.7 million people have acquired HIV, and 32.7 million people have died from AIDS-related illnesses.
However, with the development of effective HIV treatment and prevention options such as antiretroviral therapy, or ART, and pre-exposure prophylaxis, or PrEP, the United Nations reports AIDS-related mortality rates have dropped 42 percent and new HIV infections by 29 percent since 2010. Presently, approximately 38 million people globally are living with the virus, with many maintaining full lives.

Since its inception in 1999, the HPTN has successfully designed and implemented complex clinical research studies focusing on biomedical interventions and integrated strategies to prevent HIV acquisition and transmission.

HPTN 094 (INTEGRA) Open to Accrual

HPTN 094 (INTEGRA) is now open to accrual. The study will investigate whether using mobile vans to deliver integrated health services can improve HIV and substance use outcomes among people with opioid use disorder (OUD) who inject drugs. HPTN 094 aims to enroll at least 25 percent women and 25 percent of participants under 30 years of age. Participants enrolled in the study will be followed for one year. HPTN 094 is expected to last for
approximately three and a half years. The study is sponsored by the U.S. National Institute of Allergy and Infectious Diseases (NIAID) with funding from the U.S. National Institute on Drug Abuse (NIDA), both part of the U.S. National Institutes of Health.

View Press Release

Shoutouts

The HPTN 084-01 (LIFT Study) website is live! The clinical trial is examining whether injectable cabotegravir for PrEP is safe and acceptable for adolescent females assigned female at birth under 18 years of age. LIFT is enrolling this population at sites in South Africa, Uganda, and Zimbabwe.

View Website
The HPTN 082 primary manuscript was recently published in PLOS Medicine. HPTN 082 was a Phase IV research study that evaluated an enhanced adherence support package for pre-exposure prophylaxis (PrEP) for adolescent women living in South Africa and Zimbabwe at risk for HIV. Although PrEP initiation was high, enhanced adherence support including drug level feedback did not increase adherence at six months. HIV incidence was low (1 percent in this cohort) with a 39 percent prevalence of curable sexually transmitted infections. Strategies to support PrEP use and less adherence-dependent formulations are needed for this population.

Dr. Thomas Coates recently stepped down as chair of the HPTN Manuscript Review Committee. We thank him for his years of service and commitment to the HPTN. Dr. Coates has supported the Network for more than 20 years, including his roles as Network co-principal investigator (1999-2006) and study protocol chair for HIVNET 015 (EXPLORE) and HPTN 043 (NIMH Project Accept). He is currently director of the University of California Global Health Institute in San Francisco, a distinguished research professor of medicine at the David Geffen School of Medicine, and director emeritus of the UCLA Center for World Health in Los Angeles. Dr. Coates was elected to the Institute of Medicine (now the National Academy of Medicine) in 2000.
Network Member Spotlight

Jaasiel Chapman, a member of the HPTN 083 Community Working Group, is a clinical research community educator at the University of Cincinnati Infectious Diseases Center in Ohio.

What attracted you to a career in HIV prevention research?

In the early 2000’s I had two very close friends pass away from HIV. I saw how the church and society shunned them. I became motivated to prevent someone else from experiencing the pain that I saw them go through. Also, as a Black gay man, I knew the risk of me contracting the virus was extremely high. I started to advocate for people like me, which eventually opened the door to a career I never knew I wanted.

Read More

Awareness Days


What would you like to see from our newsletters? Please e-mail us with your thoughts and ideas at news@hptn.org.

*Copyright © 2021 The HIV Prevention Trials Network, All rights reserved.*