According to the Centers for Disease Control and Prevention, various risk factors such as discrimination, economic vulnerability, and a lack of support can affect access to healthcare and HIV treatment and prevention services. Transgender women (TGW) bear a disproportionate burden of these risk factors, and as such, HIV infections globally. Gender-affirming hormone therapy is also a significant unmet need and community priority for
TGW. HPTN 091, also known as the I Am Study, is the first HPTN trial focused solely on the needs of TGW.

The HPTN 083 primary paper and accompanying editorial were recently published in the New England Journal of Medicine. The global randomized, controlled, double-blind study compared the safety and efficacy of long-acting injectable cabotegravir (CAB LA) to daily oral tenofovir/emtricitabine (TDF/FTC) (Truvada) for pre-exposure prophylaxis (PrEP). HPTN 083 demonstrated CAB LA lowered HIV incidence among cisgender men and transgender women who have sex with men.

Congratulations to the HPTN 084-01 team on reaching 100 percent study enrollment. Launched in November 2020, HPTN 084-01, also known as Long-Acting Injectable for Teens (LIFT), examines whether injectable cabotegravir for PrEP is safe, tolerable, and
acceptable for adolescents assigned female at birth under 18 years of age. LIFT enrolled study participants at sites in South Africa, Uganda, and Zimbabwe.

Dr. Darrell P. Wheeler, provost and senior vice president for Academic Affairs at Iona College in New Rochelle, New York, has been sworn in as a councilmember of the Presidential Advisory Council on HIV/AIDS (PACHA). PACHA provides advice, information, and recommendations to the U.S. Secretary of Health and Human Services regarding programs, policies, and research to promote effective prevention, treatment, and cure HIV disease and AIDS. Dr. Wheeler, a member of the HPTN Executive Committee and HPTN Scholars Program leadership, also serves on the HPTN Sexual and Gender Minority Scientific Committee and was the HPTN 073 protocol chair.
Dr. Kate MacQueen is a longstanding HPTN Ethics Working Group (EWG) representative supporting HPTN 096, HPTN 083-01, HPTN 084-01, and the Women-at-Risk Scientific Working Group. Dr. MacQueen is also a senior social scientist at FHI 360, an adjunct associate professor at the University of North Carolina (UNC) at Chapel Hill in the School of Medicine and the Gillings School of Public Health, and directs the Development Core of the UNC Center for AIDS Research in Chapel Hill, North Carolina. She has conducted extensive research on the social, behavioral, and ethical aspects of biomedical HIV prevention trials globally and domestically, including vaccines, microbicides, vaginal rings, and pre-exposure prophylaxis.

What attracted you to a career in HIV prevention research?

I was a graduate student studying population dynamics and the intersection of race, gender, and social structure in the Caribbean when HIV hit in the 1980s. HIV impacted people I knew and loved. I volunteered as an AIDS community educator while in graduate school. I had the opportunity to support some early United States Agency for International Development (USAID) consulting work that brought together global stakeholders to discuss addressing the pandemic. In 1991 I successfully applied for a National Institutes of Health-funded post-doctoral HIV/AIDS Training Program for Behavioral and Social Scientists jointly sponsored through Emory University School of Public Health and the Centers for Disease Control and Prevention (CDC). The program confirmed the critical need for HIV prevention research and that there was a role for someone like me, with my social science training, in that work.

Hoff L, Scheidell JD, Mazumdar M, Feelemyer J, Dyer TV, Turpin RE, Cleland CM,


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.