

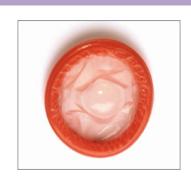
Why Do We Still Need Microbicides?

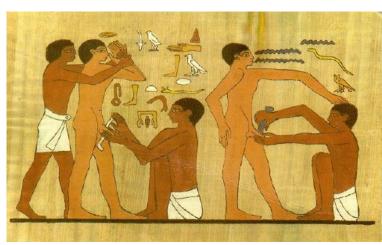
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Proven HIV Prevention Strategies

- Use of male condoms
 - Receptive partners (vaginal and anal) often cannot control condom use by their male partners
- Circumcision
- Very effective for insertive partner but limited data supporting decreased HIV in women or MSM





Proven HIV Prevention strategies

Treatment as prevention

- Highly effective in HIV serodiscordant couples
- However, most people at risk have limited knowledge of their partner's HIV status or control of whether their partner is virologically suppressed

PrEP

- Highly effective in known HIV serodiscordant couples due to high product adherence
- Less effective in younger, high risk people whose partner status is unknown (FemPrEP and VOICE)

The Unmet Need in Women

- Young unmarried women living in S Africa still have high HIV incidence despite the rollout of treatment programs
 - Women in the placebo group of CAPRISA-004: 9.7%
 - Seroincidence among former CAPRISA participants following the completion of the trial and access to gel in the open label extension study: 10% per year
- Incidence in young, unmarried women in VOICE
 3- 10X higher than in older, unmarried women
- Much higher incidence than serodiscordant couples

Incidence of HIV Acquisition in VOICE

	South Africa	Uganda / Zimbabwe
Age <25 y	8.7 (7.6, 10)	2.6 (1.1, 5.1)
≥ 25 y	4.7 (3.8, 5.8)	0.8 (0.4, 1.7)
Married	0.9 (0.2, 2.7)	0.9 (0.4, 1.7)
Unmarried	7.5 (6.6, 8.4)	2.8 (1.1, 5.7)

Incidence per 100-person-years (95% C.I)

What Women Are Telling Us

- They highly value the reproductive health services which we provide
 - Contraception
 - STI and HIV screening
 - Cervical cancer screening
- They know that using condoms reduces risk of HIV and STIs but it is very difficult to maintain consistent condom use
- There is stigma associated with use of ARVs
 - Even for a vaginal product it can be difficult to explain to a partner or family member what it is and why it is being used

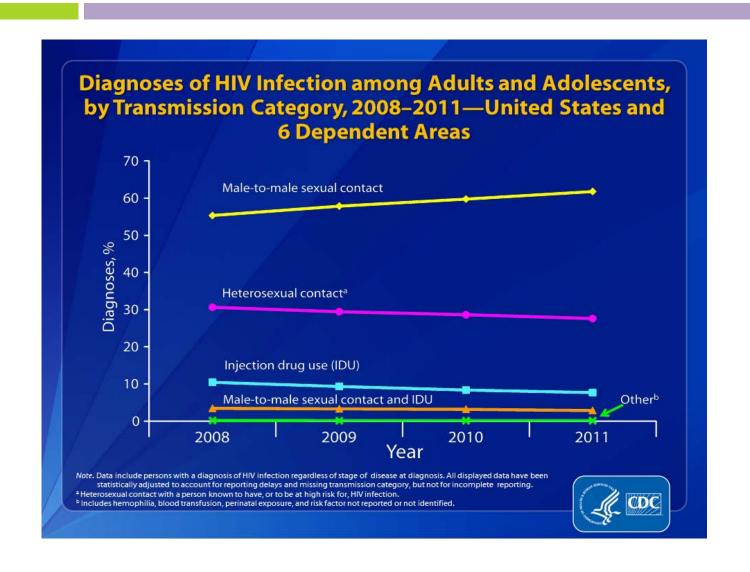
What Would Make It Easier for Women to Use HIV Prevention?

- Give them what they want- products that meet their reproductive health needs
 - Family planning methods with "stealth" ARVs
 - Helps to manage the stigma associated with ARVs for prevention
- Sustained delivery or on demand products depending on a woman's circumstances
 - Must be discrete and low cost



Why Do we Still Need a Rectal Microbicide?

The HIV/AIDS Epidemic in 2014



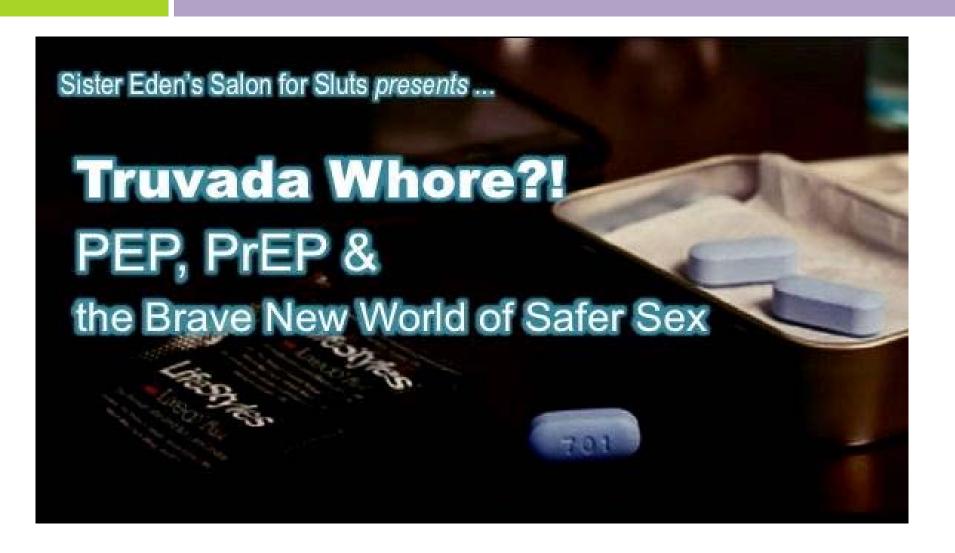
HIV Prevention Options

- Behavioral modification
 - Abstinence
 - Serosorting
- Diagnosis and treatment of STIs
- Condoms
- Circumcision
- Treatment as prevention
- Oral PrEP

PrEP Efficacy in MSM

- The iPrEx study
 - 2,499 MSM and male-to-female transgendered women randomized to Truvada or placebo
 - 44% reduction in HIV acquisition
 - PK analysis only detected drug in 51% of participants
 - Increased efficacy in subgroup who took
 Truvada

PrEP Roll-Out Still Quite Limited



Strong Rationale for Rectal Microbicides

- Unprotected receptive anal intercourse (RAI) is the highest risk sexual activity for HIV transmission
- Use of lubricants common in MSM
- Murine and non human primate studies have shown proof of concept that rectal application of ARV microbicides can prevent SIV/HIV infection
- Phase 1 rectal PK/PD studies demonstrate dose dependent explant protection

The Method Mix

- One size does not fit all
- At risk individuals may wish to choose from
 - Condom use
 - Oral PrEP
 - Treatment as prevention
 - Long acting injectable PrEP
 - Rectal microbicides
- We will know much more after MTN-017