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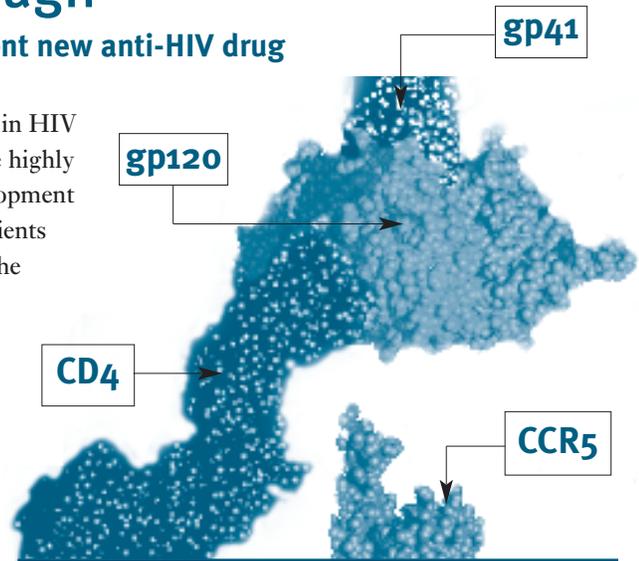
A Treatment Breakthrough

Early amfAR research paves way for potent new anti-HIV drug

In what researchers have called a pivotal moment in HIV treatment, two new drugs have been shown to be highly effective against resistant strains of HIV, a development that offers new hope for tens of thousands of patients whose treatment is failing due to resistance. One of the drugs—maraviroc—blocks the CCR5 co-receptor, a protein the virus uses to gain entry into the cell and whose function was first described by an amfAR grantee in 1995.

Maraviroc and the second drug, raltegravir, developed by Pfizer and Merck respectively, each fight HIV in different ways and are unlike any of the other classes of antiretrovirals. Both have shown marked efficacy against HIV that is resistant to all other anti-HIV drugs, which is why they are so critical to patients who may be running out of treatment options. The findings were presented at the Conference on Retroviruses and Opportunistic Infections in Los Angeles, February 25–28.

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Proteins on the surface of HIV (gp120 and gp41) and on the human cell (CD4 and CCR5). To infect a cell, the virus's gp120 first attaches to the human CD4. gp120 then binds to another protein on the same cell, in most cases CCR5, to enter human cells. This interaction was described by amfAR grantee Nathaniel Landau in 1995.

Preventing Rectal HIV Transmission

amfAR awards \$1 million in new research grants

amfAR awarded nearly \$1 million in January for six new research grants and two fellowships aimed at increasing understanding and prevention of rectal HIV transmission.

“Twenty-five years after the first identification of AIDS, the taboos that surround an open discussion of sexual behavior are still haunting us in our efforts to contain this pandemic,” said Dr. Rowena

Johnston, amfAR’s vice president of research. “It is time for us to take an honest and unflinching look at how HIV is spread and how to minimize the risks. This new research should help us to further untangle this riddle.”

Sexual transmission accounts for the majority of HIV infections both in the United States and around the world, but how much of that transmis-

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Stop AIDS: Keep the Promise

Commemorating World AIDS Day 2006

Established in 1988 by the World Health Organization, World AIDS Day—December 1—plays an important role in raising awareness of HIV/AIDS and spurring collective action against the epidemic. The theme of World AIDS Day 2006 was (and will be for the next several years) “Stop AIDS: Keep the Promise,” a call to action urging governments to stay true to the commitments they have made to ending the HIV/AIDS pandemic.

amfAR commemorated World AIDS Day through a number of events aimed at focusing attention on HIV prevention among vulnerable populations, both here and abroad, as well as AIDS-related stigma.

HIV Among Men Who Have Sex With Men

amfAR and Columbia University’s Mailman School of Public Health assembled an international panel of experts for a November 27 symposium in New York City examining HIV prevention among men who have sex with men (MSM), a population that continues to be particularly vulnerable to HIV infection.

Panelists detailed the epidemiology of HIV among MSM, reviewed promising biological and social prevention methods, discussed prevention challenges among African-American

MSM, and assessed the complications of addressing MSM health care in the developing world.

Kevin Frost, amfAR’s interim chief executive officer and vice president of global initiatives, moderated the panel, which was comprised of Dr. Chris Beyrer of the Johns Hopkins Bloomberg School of Public Health, Baltimore; Dr. Kenneth Mayer of Brown University and Memorial Hospital, Providence, RI, and an amfAR program board member; Dr. Gary Dowsett of La Trobe University, Melbourne, Australia; Shivananda Khan of Naz Foundation International, Lucknow, India; and Gregorio Millett, of the U.S. Centers for Disease Control and Prevention, Atlanta.

“Bed-In” Helps Fight AIDS Stigma

Also on World AIDS Day, a serodiscordant couple staged a “bed-in” in the window of amfAR Chairman Kenneth Cole’s 42nd Street store in New York City. Shawn Decker is HIV positive, Gwenn Barringer is negative. The two spent the morning in bed together to show that people with HIV/AIDS can live life to the fullest and enjoy safe sex. HIV/AIDS statistics and a message about practicing safe sex were prominently displayed in the store window.

In addition, amfAR and Kenneth Cole Productions teamed up with Discovery Health to bring an AIDS awareness message to audiences across a range of platforms. Mr. Cole was featured in a public service announcement that aired on the Discovery Health network throughout World AIDS Day.



World AIDS Day “bed-in” in the window of Kenneth Cole’s 42nd Street store in New York City. From left: Kenneth Cole, Shawn Decker, who is HIV-positive, and his HIV-negative wife, Gwenn Barringer, showed that people living with HIV/AIDS can enjoy intimacy.

Advocating for Black Women and Families Affected by HIV

amfAR co-sponsored a Congressional briefing in Washington, D.C., December 1, on African-American women and HIV/AIDS. Supported by Sen. Christopher Dodd (D-CT) and Rep. Barbara Lee (D-CA), the briefing featured a panel of expert speakers: Dr. Adaora Adimora of the University of North Carolina at Chapel Hill; Candace Webb of AIDS Alliance for Children, Youth & Families; Danielle Warren-Diaz, of the University of Connecticut Health Center; and actress and AIDS activist Gloria Reuben. The panelists were united in calling for an urgent expansion of HIV/AIDS funding and services for communities most severely affected by HIV. The briefing was also co-sponsored by the AIDS Alliance for Children, Youth & Families and the Sexuality Information and Education Council of the United States (SIECUS). (See page 4).

“This is about saving lives,” said Dr. Monica Ruiz, amfAR’s acting director of public policy. “Prevention is about preventing disease, preventing illness, preventing families from breaking apart. This is about preventing the destruction of entire communities.”

Following the briefing, Dr. Ruiz delivered the keynote address at the Washington, D.C., VA Medical Center’s annual World AIDS Day observance. She provided an overview of the broad spectrum of HIV prevention strategies and examined prevention challenges at this point in the epidemic. The Department of Veterans Affairs is the largest single provider of HIV and hepatitis C care in the United States. ■

Special Travel Bonus from American Airlines



American Airlines is contributing travel points to amfAR to be used to advance our program activities and events. If you choose to travel with American Airlines, you only have to provide amfAR’s **Business ExtraAA account number: 784369** when making your reservation. amfAR will then receive at least one point for every \$10 you spend on eligible tickets, and you will still be eligible to receive your personal American AAdvantage frequent flyer benefits. ■

HIV and the Treatment-Experienced Patient

amfAR community forum participants share strategies for long-term HIV survival

Drug-resistant HIV is a serious challenge for the treatment-experienced patient, but new strategies as well as a new class of antiretroviral drugs offer hope for patients with limited treatment options, according to a panel of experts at an amfAR-sponsored community forum in Seattle, January 30. The program was planned in conjunction with local AIDS service organizations BABES Network-YWCA, Lifelong AIDS Alliance, and People of Color Against AIDS Network (POCAAN).

“Don’t give up,” said panelist Timm Cameron of Lifelong AIDS Alliance in Seattle, who was diagnosed with HIV in 1995. “There’s always something coming around the corner.”

Approximately 10 percent of people newly diagnosed with HIV are infected with some sort of resistant virus.

Cameron was joined on the panel by Laury McKean, a registered nurse; Peter Shalit, M.D., of the University of Washington; Joey Merrifield, an advanced registered nurse practitioner;

and consumer advocates Jeff Henderson and Pat Migliore.

Treatment of HIV disease has come a long way in the past decade. Today, thanks to more than 20 drugs to fight HIV, life expectancy for people living with HIV is now about 20 to 35 years, said Dr. Shalit. And more new drugs are in the pipeline.

“My personal feeling is that with proper treatment someone with HIV should have the same life expectancy as someone without HIV,” he said.

“However, this virus is very crafty. It takes advantage of any little opening that a person will give it.”

One way to stay ahead of the virus is

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HIV in Black America

World AIDS Day Congressional briefing focuses on black women and families

By Sandra Murillo

“People still die. Here in America, in my America,” said Danielle Warren-Diaz, a panelist at a World AIDS Day Congressional briefing sponsored by amfAR, AIDS Alliance for Children, Youth & Families, and the Sexuality Information and Education Council of the United States.

“I buried a 10-year-old three months ago. A week ago, I went to bury one of my friends. In the America that I live in, we’re dying, we’re fighting for our lives.”

“In the America that I live in, we’re dying, we’re fighting for our lives.”



Danielle Warren-Diaz, an HIV-positive mother, speaks about the dire need to fully fund social service programs for families affected by HIV. (Photo: Emily Byram)

doesn’t let women and children die in 2006 when they don’t have to,” said moderator Diana Bruce, of AIDS Alliance. “That’s just completely unacceptable in this country.”

Disturbing Disparities

African Americans make up 12 percent of the U.S. population, but represent nearly 50 percent of the estimated 1.2 million Americans living with HIV/AIDS, according to the U.S. Centers

for Disease Control and Prevention. From 2001 to 2004, blacks represented 61 percent of people under 25 diagnosed with HIV/AIDS. Black women comprised 67 percent of new AIDS diagnoses among women in 2004, and the rate of AIDS diagnoses for African-American women was approximately 23 times the rate for white women.

Gloria Reuben, who played an HIV-positive physician assistant on the medical drama *E.R.*, implored political leaders to work with media and celebrities to once again bring HIV prevention to the forefront of public discourse in the United States.

“The thing that disturbs me the most is to witness HIV become pandemic in the black community,” Reuben said. “AIDS is the number one killer of black women aged 25–34. How could this be?”

Why are black women at such high risk for HIV? According to Dr. Adimora, who has done extensive research on heterosexual transmission of HIV among African Americans in the rural south, a high rate of sexually transmitted infections and a complex mix of socioeconomic factors set the stage for higher HIV rates.

Black men and women in a study group reported extensive economic depression and racial discrimination that restricted educational and employment opportunities. Women noted how incarceration, drug addiction, and violence had greatly reduced the number of available black men, profoundly affecting the partners women chose and the type of behavior they would tolerate from their men.

The rate of concurrent partnerships—sexual relationships that overlap over time and spread HIV and other sexually transmitted infections much more quickly than sequential partnerships—is much higher among African Americans than whites.

Incarceration, the ratio of available men to women, low marriage rates, and economic instability all contribute to high-risk sexual network patterns—such as concurrency—possibly causing “bridging” from low-risk women to men from higher risk subgroups. Residential segregation also affects sexual networks, concentrating poverty, drug use, and other negative factors within the segregated group. Youth are more likely to be exposed to risk factors or to become sexually involved with someone in a high-risk group. A high rate of other sexually transmitted infections—which facilitate the spread of HIV—is also helping to fuel the HIV epidemic among black Americans, Dr. Adimora said.

Why “Flat” Funding Hurts the Most in Need

Today, 69 percent of those infected with HIV are uninsured or on

public assistance and rely on Ryan White funding programs for primary health care and support services. Title IV of the Ryan White CARE Act provides vital support services such as transportation, mental health services, and support groups to help remove some of the obstacles that keep people from accessing treatment.

Eighty-eight percent of Title IV clients are people of color. Title IV clinics have been instrumental in reducing mother-to-child HIV transmission in the U.S. from more than 2,000 HIV-positive infants born annually a decade ago to fewer than 200 in 2004.

Warren-Diaz works with families at the University of Connecticut Health Center in a program funded through Title IV. She knows firsthand how difficult it can be to make sure some people receive treatment.

“We have the medications that can bring down mother-to-child transmissions, but in a lot of these cases, it’s a big step to get these women to sit in front of a doctor to get that prescription,” Warren-Diaz explained. To illustrate her point, she read a letter from a woman whom she helped into recovery several years ago. The woman was an HIV-positive alcoholic and Warren-Diaz was concerned that her child would be born with the virus and fetal alcohol syndrome.

“She wasn’t going to her prenatal appointments, wasn’t seeing the infectious disease doctors because she couldn’t. Her

“AIDS is the number one killer of black women aged 25-34. How could this be?”

life was out of control.”

With Warren-Diaz’s help, funded through Title IV, the child was born negative and the woman has been in recovery for six years.

But Title IV has received “flat” funding for several years now and the legislation to reauthorize Title IV recommends that the program continue to receive flat funding for the next three years. If this trend continues, we will see cuts in lifesaving programs, especially to front-line staff who bring and keep women and youth in care, said Bruce.

The current budget allocated \$71.8 million for Title IV, while \$113 million was the minimum needed to meet the growing needs of women and youth living with HIV, she said.

“We need that money,” Bruce said. “Level funding on top of all these rescissions means that people like Danielle



From left: Panelists Candace Webb, Danielle Warren-Diaz, and Gloria Reuben at a World AIDS Day Congressional briefing examining HIV’s impact on black women and families. (Photo: Emily Byram)

[Warren-Diaz] get laid off every day across the country. People who Danielle touches, these young people and these women, whose lives she turns around and whose lives she preserves, they will lose when title IV gets flat funded.”

Funding for Future Generations

Candace Webb lost her mother to AIDS six years ago. Strong, proud, and willing to sacrifice everything for her daughters, her mother told no one about her diagnosis. Webb was left trying to make sense of her death.

“I started educating myself, trying to find out what happened and why my family didn’t know and why my mother didn’t have the right support system in place,” Webb said. Originally planning a career in medicine, she took the advocacy route to try to “change the system” so her mother’s death would not be “in vain.”

“Had my mother had some of these support systems, I think she would be alive,” Webb said. “I want to make sure that programs like Title IV are funded and expanded, to reach women who are in isolation, to bring them into a network where they can have the support that they need to see HIV not as a death sentence, but to understand that there is life after diagnosis.”

Warren-Diaz has been living with HIV for 15 years. She became a mother several years ago when she agreed to raise three children whose mother had died of AIDS.

“I promised her that I would keep all of them healthy, but at the rate that HIV is growing in my community, I don’t know if I can keep my promise,” she said, her voice shaking with emotion. “I don’t like begging, but if that’s what it takes to preserve my family, then I ask that you go back to your bosses and make some noise. Tell them you’re saving American families.” ■

Coming Out of the Dark: One Latina's Journey to AIDS Advocacy

By Sandra Murillo

Just days after being diagnosed with HIV in 1996, Nancy Soto awoke to find a priest at her bedside. He recited her last rites and the rest of her family got on with the mourning process. She went back to sleep. She had no intention of dying.

Ten years later, Soto has founded her own nonprofit organization, Latina HIV, to empower Latinas to overcome the obstacles HIV might put in their way. It is not a journey she would ever have envisioned, but her own experience has taught her that there just are not enough resources for Latinas living with HIV.

In a recent conversation with amfAR, she explained how Latinas must advocate for their health within a male-dominated culture that still often views HIV/AIDS as shameful and is reluctant to accept that HIV has made its way into its homes and families.

But it has. Today, 19 percent of all AIDS cases in the United States are among Latinos, who represent only about 14 percent of the U.S. population.

"I see a lot of women who fall apart because it impacts every aspect of their life," Soto said. "You lose your family, your friends. If you're financially dependent on your husband, you're left with no resources. There's a lot of shame and it's a very difficult path to travel. But we can do it."

Facing Her Diagnosis

Looking back, Soto says it was a mix of the profound and the practical that got her through those first dark days after her diagnosis.

She had to live for her son, then seven years old, and wanted to see him take his first communion. They had just moved into a beautiful home and he still

did not have his bedroom set. She would, at the very least, live long enough to accompany him to his first communion and get him his bedroom.

Her mother, sister and brother had practically moved in, cooking, helping out with her son, calling the priest to ensure her place in heaven, and generally acting as if she had already died. The only way they would leave, she reasoned, was if she got better. She began treatment and slowly came back from the brink. She remembers breaking down in tears as she prepared to attend her son's communion.

19 percent of all AIDS cases in the United States are among Latinos, who represent only about 14 percent of the U.S. population.

"I was actually there, living that moment," she said. "But I was so afraid that I wouldn't have any more moments."

Soto now believes she was infected in 1987. By the time she was finally diagnosed, she had only two T cells. A former runner, she had lived with incapacitating, unexplained fatigue, hair loss, and other strange symptoms for almost two years.

Late diagnoses are not uncommon among Latinos. Stigma and taboos surrounding HIV, as well as a lack of proper HIV education and a belief that they are

not at risk, mean that too many Latinos do not test early enough, presenting to their doctors with AIDS-defining conditions either at the time of HIV diagnosis or within six months. This is one of the reasons why Latinos are not reaping the benefits of advances in the treatment of HIV disease.

In Soto's case, doctors were at a loss to figure out what was wrong. As a married woman who had never used drugs, neither she nor her doctors suspected HIV.

"I had every test in the world done," she said. "And then when they had no more tests to do, they did an HIV test."

Soto knew she must have been infected through unprotected sex. Her husband tested negative so that only left her first love and former fiancée, who she says died in 1988 of respiratory failure. He was never diagnosed with HIV, but looking back, she now realizes that the recurrent infections, strange symptoms, and dementia he suffered before his death had all been signs of the disease.

It was the mid 80s, so she had certainly heard about AIDS, but she was young and in love and life was good. AIDS had nothing to do with her.

It is this mentality, that "AIDS is not here," that is most damaging to Latinos, she said. "We have to get over the *vergüenza* [shame] and that whole idea that women should be submissive and accepting of whatever a man does. It's a cycle and I don't see how that cycle is going to be broken."

Moving Beyond Stigma and Shame

For a long time, Soto said, she was part of that cycle. She was ashamed to be positive, and even though they were supportive, her

family made it clear that it was something that should remain a secret. After a very ugly divorce in which she almost lost custody of her children, Soto had a revelation.

“There’s a lot of shame and it’s a very difficult path to travel. But we can do it.”

“I wasn’t going to live in the dark any more,” she states. “Here I am, mad at the stigma, but I’m part of it. I decided, I’m going to be free, single, and I’m going to start talking to people about this.”

Soto, who has endured neuropathy, lipodystrophy, peripheral wasting, and other side effects from a decade of taking anti-HIV medications, has set out to tell her story and bring more attention to the

issue of women and HIV. Last March, she sat on a Congressional briefing panel for the first annual National Women’s HIV/AIDS Awareness Day. She is a spokeswoman for the National Latina Health Network, sits on the government’s Office on Women’s Health panel of advisory experts, and is working to obtain more funding for her organization.

Soto envisions her Latina HIV website as a one-stop informational resource for Latinas living with HIV, something she wishes she could have had when she began her fight against the disease. It is crucial that women understand the harsh side effects of anti-HIV drugs, but it is also important that they hear from other women who have been through treatment and came out better for it in the end, she says. She speaks candidly about the medication and what it’s done to her body and she wishes that doctors and health-care providers were more responsive to women’s specific needs and concerns.

“I want to empower women to realize that when it comes to your treatment and your health, nothing is too small or trivial,” she says. “It doesn’t make you

weak, stupid, or vulnerable. You have to accept what’s happening and get help, get support, and get treatment.”

In the meantime, Soto continues an otherwise traditional existence. The mother of school-aged children, she shuttles her kids to and from their various activities and is actively involved at their schools.

She has found love again. She expected him to run in the other direction as soon as she disclosed her status. He stayed and proposed.

“He doesn’t think anything’s going to happen to me,” she said. “He says whatever time we have is great and he knows we’re going to have a lot.” ■

“You have to accept what’s happening and get help, get support, and get treatment.”

Giving to amfAR Through Your Workplace

Federal employees and members of the U.S. military can direct donations to amfAR through the Combined Federal Campaign (CFC). If you are eligible to make donations through the CFC, please note that amfAR is listed in your CFC directory as “AIDS Research Foundation (amfAR),” and that we participate in the CFC through a federation called Community Health Charities.

Community Health Charities also represents amfAR in a number of state, municipal, and institutional employee giving campaigns, as well as workplace giving programs with corporations and businesses, such as American Airlines, American



Express, GAP, Inc., Pitney Bowes, Sears, and United Health Group. Employees at organizations that participate in United

Way campaigns can support amfAR with a “write-in” designation. Many companies choose to operate their own workplace giving programs, including the American Bar Association, IBM, Microsoft, and Toyota Corporation.

You CAN make a difference, and workplace giving provides a convenient, cost-effective way to support amfAR’s AIDS research programs. For more information about workplace giving or setting up a workplace campaign, please contact karen.cress@amfar.org.

treat asia update

Pediatrics Initiative Launched

Despite the decline in AIDS-related mortality made possible by combination drug therapies, children with HIV/AIDS in developing countries are less likely to receive treatment than adults and they die from AIDS at a much higher rate. To help improve treatment and expand access to it for children in Asia, where only a fraction of the 35,000 in need of medication are actually receiving it, TREAT Asia has launched a new Pediatrics Initiative.

A newly assembled TREAT Asia Pediatrics Network, representing 35 health-care facilities in eight Asian nations, held its first full meeting in November 2006 in Phuket, Thailand. More than 70 participants from Cambodia, China, India, Indonesia, Laos, Malaysia, Thailand, and Vietnam were in attendance, as well as representatives from major international health organizations. The meeting offered specialized training in managing HIV among infants and children, as well as a detailed overview of treatment guidelines.

One of the main goals of the meeting



Dr. Annette Sohn (left) and Dr. Nia Kurniati have been involved in organizing the new Pediatrics Initiative since the program was conceived in 2005. (Photo: Tavitphun Lumliengal)

was the creation of the TREAT Asia Pediatric HIV Observational Database, the first of its kind in Asia and one that could potentially yield insights into the best treatment for HIV-positive children in Asia. With nine sites participating initially, the Database includes anonymous demographic and clinical data on nearly 1,200 HIV-positive children. The first transfer of data will occur in Spring 2007 with the second scheduled for the Fall.

Purple Sky

In recent years, the Greater Mekong Subregion—Cambodia, China's Yunnan and Guangxi provinces, Laos, Myanmar, Thailand, and Vietnam—has seen a rise in the number of HIV-positive men who have sex with men (MSM). A new collaboration between MSM groups known as

the Purple Sky Network was recently conceived to help fight that development, and TREAT Asia has been chosen to serve as the network's Regional Coordination Secretariat.

Purple Sky's first regional meeting, held in Bangkok in August 2006, attracted more than 60 attendees, including 40 representatives of MSM groups and more than 20 participants from governments, nongovernmental organizations, and community groups. Participants shared experiences and ideas, and received practical information on HIV prevention among MSM communities.

Following the Bangkok meeting, an in-country workshop was held in Kunming, China, in November, attended by more than 50 participants. Although the challenges faced by those working with



Dr. Virat Sirisanthana of Chiang Mai, Thailand (above), along with Dr. Annette Sohn were elected to represent the Pediatrics Initiative on the TREAT Asia Steering Committee. (Photo: Tavitphun Lumliengal)

The TREAT Asia Pediatric HIV Observational Database, the first of its kind in Asia, could yield insights into the best treatment for HIV-positive children in the region.



Members of the Purple Sky Network gather for the group's first regional meeting in Bangkok last summer. (Photo: Dredge Kang)

MSM and HIV in the Greater Mekong Subregion remain daunting, the landscape has begun to change. "It has been an incredible journey to go from having so few HIV interventions among MSM only 18 months ago," noted one participant, "to having all the activity we have heard about."

AIDS Care Training in Cambodia

In 2004 the Cambodian government launched a multi-faceted national program to support the continuing education of health-care workers involved in HIV treatment and care, organized by the country's National Center for

HIV/AIDS, Dermatology, and STDs (NCHADS) and supported in part by a grant from TREAT Asia.

While the larger Cambodian HIV education program was initiated two years ago, those elements supported by TREAT Asia were launched in March 2006 and will continue to be implemented over the next several months. The TREAT Asia/NCHADS program is comprised of a national symposium geared toward clinicians and health-care workers; training of opportunistic infection (OI) and antiretroviral (ARV) treatment specialists

What Is TREAT Asia?

Anticipating the potential for an AIDS crisis in Asia, amfAR launched its TREAT Asia initiative in 2001. Through a network of clinics, hospitals, and research institutions, TREAT Asia—Therapeutics Research, Education, and AIDS Training in Asia—is bringing health-care workers, researchers, community groups, and policy makers together to raise treatment standards, build treatment capacity, and conduct research that is specific to the needs of patients in the region.

According to the Joint United Nations Programme on HIV/AIDS (UNAIDS), roughly 8.6 million Asians were living with HIV in 2006, including some 960,000 people who became infected in that year.

at district hospitals across Cambodia; mentoring of new specialist teams; training updates at 20 hospitals where OI/ARV programs were established prior to TREAT Asia's involvement; regional workshops; and training in epidemiology and biostatistics. ■

Cambodian Women Take the Reins in Treatment Workshop

Recognizing that HIV-positive women need women-specific education about how to manage their health, TREAT Asia and the Asia Pacific Network of People Living with HIV/AIDS (APN+) held an antiretroviral treatment workshop for women in Phnom Penh, Cambodia, December 4-7, 2006. The workshop involved more than 20 HIV-positive women and addressed issues such as the prevention of mother-to-child transmission, women's sexual health, and ways to improve treatment outcomes. ■



Cambodian activists Mony Pen (left) and Pheng Pharoazin (right)—pictured with TREAT Asia program manager Jennifer Ho—facilitated a treatment workshop for women in Phnom Penh, Cambodia.

Treatment Breakthrough (continued from page 1)

Maraviroc has been in development for more than a decade, with amfAR funding some of the first and most important research demonstrating the feasibility of designing drugs that block CCR5 to treat HIV.

In 1995, amfAR grantee Dr. Nathaniel (Ned) Landau, who had received amfAR funding to conduct research on another aspect of HIV, stumbled upon exciting results pertaining to CCR5 and was promptly given the go-ahead to pursue this new avenue. He and his colleagues published their findings in the prestigious journal *Nature*, describing the activity of CCR5 as a co-receptor for HIV infection.

Until 1996, researchers had been puzzled as to why HIV could not infect all CD4 cells (i.e., immune cells with the protein CD4 on their surface). Dr. Landau's findings resolved part of the mystery—CD4 cells must also have a co-receptor on their surface to allow the virus to slip inside the cell. (In most cases HIV uses the CCR5 co-receptor to gain access to human cells, but it can also use another co-receptor called CXCR4.)

Dr. Landau a couple of months later published further results describing a small number of people who have a genetic mutation that results in a total lack of CCR5 in their bodies. These people suffer no ill effects from this lack of CCR5 and are also almost entirely immune from HIV infection.

Dr. Landau's two findings together spelled out a clear track for drug development. Drugs that could block CCR5 would be likely to impair the ability of HIV to infect cells and unlikely to do any harm.

Results from clinical trials analyzed at 24 weeks showed that approximately twice as many patients receiving maraviroc in combination with an optimized background regimen reached undetectable levels of virus in their blood compared with those who were not on maraviroc. The outcomes of clinical trials indicate the drug is very effective at suppressing even drug-resistant HIV, and it does so with very few, and minor, side effects.

Raltegravir, the other drug making headlines because of its proven efficacy against resistant strains of HIV, blocks an HIV enzyme called integrase. If approved, it will be the first drug that prevents the virus' genetic material from becoming part of the host cell's DNA. The main drugs used in therapy today block the other two enzymes of HIV—reverse transcriptase and protease.

In two ongoing Phase III studies of the drug, patients taking raltegravir in combination with an optimized background drug regimen demonstrated significantly greater declines in viral load versus patients who were on an optimized regimen alone.

Both drugs have received "fast track" status from the FDA, meaning they will be reviewed within six months, and Pfizer has already applied to the FDA for permission to sell maraviroc. ■

Preventing Rectal HIV Transmission (continued from page 1)

sion is due to anal intercourse remains unclear.

Although not often acknowledged, many heterosexual couples engage in anal intercourse and may not be aware that they are placing themselves at high risk for HIV and other sexually transmitted infections, Dr. Johnston said.

In South Africa, a country with one of the highest rates of HIV infection in the world, little is known about the extent to which the virus is spread by anal intercourse. Dr. Joanne Mantell, a researcher at the Research Foundation for Mental Hygiene in New York, will use amfAR funding to gain insight into the frequency of anal intercourse in South Africa among heterosexuals and the circumstances under which it occurs.

Others, such as Drs. Charlene Dezutti of Magee-Women's Research Institute and Foundation in Pittsburgh and Craig Hendrix of the Johns Hopkins School of Medicine in Baltimore, will strive to understand the interactions



between the virus and the cells in the rectum and colon that can tip the scale towards the establishment of infection.

Understanding the extent to which anal intercourse spreads HIV infection will become increasingly important as researchers race to devise microbicides, substances that could be applied topically prior to intercourse to prevent infection. It is possible that these may be effective only when used vaginally. Findings made by these new amfAR researchers will contribute to the development of prevention technologies that can also be used by those engaging in anal intercourse. ■

amfAR Fellow Carolina Herrera, Ph.D. (top), of St. George's University of London, will examine the response of human rectal colon tissue after exposure to HIV or semen. (Photo: Robin Shattock) Marjan Javanbakht, Ph.D., of the University of California Los Angeles, will study the extent to which anal intercourse contributes to the spread of HIV among both men who have sex with men and heterosexuals. (Photo: Romena Johnston)

Treatment-Experienced Patient *(continued from page 3)*

to avoid developing resistance to existing drugs. Resistant strains of HIV do not respond to certain drugs and approximately 10 percent of people newly diagnosed with HIV are infected with some sort of resistant virus. The virus can also become resistant when a drug combination is not strong enough, when the drug levels in the blood are not high enough to work properly due to lack of adherence, or if a person was taking antiretrovirals prior to 1996 when sub-optimal one- or two-drug regimens were the standard of care.

Adherence Is Crucial

Side effects and/or a complicated regimen can make it difficult for patients to stick to treatment, but panelists stressed the importance of adherence. Panelists and audience members shared ways of keeping to a treatment schedule.

Migliore told of one patient who was having trouble taking his medication because he worked odd hours in a bar. She worked with him to develop cues to remind him when it was time to take his meds. Now when he hears “last call” every night, he knows it is time to take his medication, she said. To keep track of his meds, Cameron uses a pill box with the days of the week clearly indicated, which he fills each month. One audience member said he sets up text messages to remind him when it is time to take his pills.

“It has to work for you, for your lifestyle,” Migliore said.

If side effects are keeping you from sticking to your regimen, speak to your doctor, said Cameron.

“At this point in 2007 there is no need for you to suffer with side effects,” Cameron said. “In the 90s...we didn’t have great treatment for a lot of the side effects. But now there are so many simple little changes you can make that will eliminate some of the side effects.”

It is really important to find an expe-

rienced HIV doctor with whom you feel comfortable, with whom you can communicate, and who will advocate for your needs, the panelists agreed. And while it may seem counterintuitive, it is sometimes best to stay on treatment even if it appears

“Stopping meds is not the right answer.”

not to be working, Shalit said.

“Sometimes it’s better to stay on because the medication is keeping things under some type of control,” Shalit said. “If you stop the meds, this ‘wild type’ (which tends to be more aggressive) will come back. People get very sick when that happens. Stopping meds is not the right answer.”

Neither is taking one drug that is not working and substituting it for another, he said.

“The virus has its own rules and one of the rules that the virus plays by is that you have to change two drugs at one time. If you only change one drug, you get a failing cocktail and that virus is going to develop resistance.”

The best option, if possible, is to switch to an all new combination, he said.

“If you slam it with three or four new drugs, that’s your best chance of getting it completely undetectable, assuming you can really take those new drugs the way they’re supposed to be taken,” Shalit said.

New Drugs, More Choices

Two new protease inhibitors, a new non-nucleoside reverse transcriptase inhibitor (NNRTI), and a new class of drugs known as integrase inhibitors, the first drug that prevents the virus’s genetic

material from becoming part of the T cell’s genetic material (see page 1), have greatly improved what medical providers can do for people with virus resistant to multiple classes of drugs, Shalit said. (Both the newest NNRTI and one drug in the integrase inhibitor class are currently only available through expanded access programs for eligible patients.)

This is especially good news for patients in salvage therapy whose virus has not responded to any existing treatment.

“Until a couple of years ago we couldn’t really do anything for people like that except to say, stay on what you’re on or we’ll give you a cocktail that doesn’t make you sick and hopefully things will kind of stay stable for a while,” Shalit said.

“But now because we have newer drugs, the goal is to do your best to get the virus completely undetectable and keep it that way because that’s the best way to make sure that you’re going to stay healthy long term.”

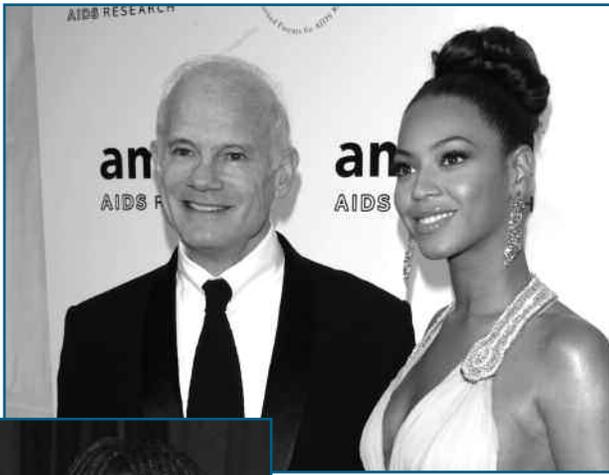
While the focus of the forum was on the challenges of HIV treatment, panelists and audience members said medication was only one aspect of ensuring long-term survival with HIV.

“It is important for us to remember that we’re whole people, that we’re not just a virus,” said Migliore. “We have to be really responsible as patients to make sure that we round out the rest of our lives. I’ve heard it again and again in here tonight—the power of prayer, the power of spirituality, the power of exercise, of just trying to live your whole life as a whole human being.”

This community forum was funded in part by unrestricted educational grants from Boehringer Ingelheim and Gilead Sciences. ■

Legends of AIDS Activism Receive Award of Courage

amfAR pays tribute to John Demsey, Whoopi Goldberg, Bill Roedy, Dr. Mathilde Krim, and Sharon Stone



At its New York Gala on January 31, amfAR honored John Demsey, Whoopi Goldberg, and Bill Roedy with its Award of Courage for their substantial contributions to the fight against HIV/AIDS. The Foundation also paid special tribute to Founding Chairman Dr. Mathilde Krim with the announcement of a newly established Krim Fellows research program, and bestowed the inaugural Roy London Award on Sharon Stone, chairman of amfAR's Campaign for AIDS Research.

The Gala, which took place at Cipriani 42nd Street and featured a stellar performance by Grammy-winning singer-songwriter Tracy Chapman, raised nearly \$3 million.

Following opening remarks from amfAR Chairman Kenneth Cole, Tony Award-winning actress Natasha Richardson spoke passionately of her own involvement in the fight against AIDS. Ms. Richardson, who recently joined amfAR's board of trustees, lost her father, director Tony Richardson, to AIDS complications in 1991.

As chairman of the M•A•C AIDS Fund, John Demsey has helped raise more than \$84 million through sales of the VIVA GLAM lipstick line and other initiatives. He is also actively involved in a number of AIDS-related organizations. Accepting his Award of Courage from rapper and actress Eve, Mr. Demsey said, "I know firsthand through my work at M•A•C that, not only can battling AIDS be part of a successful business strategy, it's simply the right thing to do."

Richard Gere, who presented Whoopi Goldberg with her award, recalled the early days of the epidemic when it was difficult to muster a crowd for an AIDS fundraiser.

"I remember these events when no one showed up," he said. "There was no press, there were three tables instead of 300."

As a single mother and performing artist living in Berkeley, California, in those days, Whoopi

Goldberg remembered watching friends succumb to AIDS. She and her daughter set aside space in her home for those who were "hiding and dying alone."

Ms. Goldberg is well known for her AIDS activism and her participation in a range of humanitarian causes.

"I thank you for this because it means the world and it's something I'll share with the grandkids and my daughter," she

Clockwise from top: Award of Courage honoree Bill Roedy, Vice Chairman, MTV Networks, with Beyoncé Knowles; Eve and Award of Courage Honoree John Demsey, Chairman, M•A•C AIDS Fund; Woody Allen and Dr. Mathilde Krim; Sharon Stone, Chairman of amfAR's Campaign for AIDS Research; and Award of Courage recipient Whoopi Goldberg. (Photo: Jim Spellman and Theo Wargo/WireImage.com)

said. "It's only [for doing] what my mom told me I should do in the world."

Beyoncé Knowles presented the Award of Courage to Bill Roedy, vice chairman of MTV Networks. Mr. Roedy, who leads MTV's global efforts to promote HIV education and awareness through the Staying Alive campaign, dedicated the evening to the AIDS heroes he has met throughout the years.

"They're extraordinary young people on the front lines of the battle and you don't read about them, but they're everywhere," he said. "It's people like them who I am convinced will turn the tide against AIDS, so for them, I commit to continue this fight stronger and more than ever."

Sharon Stone received the inaugural Roy London Award for her unwavering determination to do everything in her power to stop the spread of AIDS worldwide. Roy London, Stone's friend and acting coach, died of AIDS in the early 1990s, and it was his death that inspired her to dedicate so much of her time and energy over the past 12 years to amfAR. Garry Shandling, a long-time friend and fellow student of London's, presented her with the award.

"Roy London taught me that you have so much to give simply because of who you are," she said. "I'm so extraordinarily grateful for what he taught me." ■

Mathilde Krim Fellows Research Program

A highlight of the New York Gala was a special tribute to amfAR Founding Chairman Dr. Mathilde Krim. As an expression of amfAR's gratitude and admiration for Dr. Krim's many years of dedicated service to the Foundation and the advancement of AIDS research, Kenneth Cole announced the creation of the Mathilde Krim Fellows in Basic Biomedical Research program.

Two-thirds of the \$3 million raised at the Gala will benefit the Krim Fellows program and will help ensure that young scientists continue to enter the field of HIV/AIDS research.

Woody Allen, a long-time amfAR supporter, delivered a warm and personal tribute to Dr. Krim, who co-founded amfAR in 1985 with Elizabeth Taylor.

"When the AIDS catastrophe struck, she leaped to the forefront," said Allen. "She went on television and kissed an AIDS patient when nobody would go within 100 yards of anyone who had HIV. She explained that you can love someone with HIV, you can kiss them. The ultimate thing about her is her identification with the underdog. Take a bow, Mathilde Krim." ■

Wall Street Concert Series Draws Top Performing Artists

Kanye West, Gloria Estefan, Elvis Costello, and Lionel Richie were just a few of the legendary entertainers who performed during the Cipriani/Deutsche Bank 2006 Wall Street Concert Series last spring and fall. The series of intimate concerts, which culminated in a performance by Duran Duran and a live auction hosted by Sharon Stone on November 7, raised more than \$800,000 for amfAR. ■

Gloria Estefan and Kanye West were among the musical legends who performed at the Wall Street Concert Series.



San Franciscans Honored at Fall Dinner

Bay Area citizens receive amfAR's Award of Courage

amfAR's San Francisco Fall Dinner, November 8, raised more than \$430,000 and honored Vanessa Getty, John Manzon-Santos, and Ken McNeely for their contributions to the fight against AIDS.

amfAR Chairman Kenneth Cole welcomed almost 450 guests to The Ritz-Carlton, where the honorees received amfAR's Award of Courage. Presentations were made by Dr. Sandra Hernández, Assemblyman Mark Leno, and Nick Augustinos. A rousing performance by Liza Minnelli was a highlight



“It is a comfort to know that there is an organization that is working tirelessly, around the clock, to find a cure. amfAR gives us all great hope.”

of the event.

All three honorees spoke about their dedication to the fight against HIV/AIDS, with Vanessa Getty sharing a particularly moving story about the loss of a family friend to the disease in 1983 when she was only eleven years old.

“No one knew what he had— they couldn't explain this

strange seeming cancer that appeared to be only affecting gay men,” Getty said of her parent's best friend Mark Chase. There was no diagnosis, no test for what he had. Suffering terribly, Mark Chase died of AIDS. I will never forget the day my parents told me.”

“amfAR has been there all along,” she added, “constantly raising money to fund research that will help beat the disease, helping people to understand the true risks, working to alleviate the stigma attached to it. It is a comfort to know that there is an organization that is working tirelessly, around the clock, to find a cure. amfAR gives us all great hope.”

Guests gathered for cocktails and a silent auction, followed by dinner designed and prepared by Craig Stoll of Delfina. The live auction, conducted by Durwood Zedd, featured several one-of-a-kind items, such as the chance to join Liza Minnelli on stage while she sang a cappella. Twelve guests jumped at the chance to pay \$2,500 for the honor.

Along with amfAR's many Bay Area supporters and friends of the honorees, attendees included the Honorable Willie L. Brown, Jr., Tracy Chapman, San Francisco District Attorney Kamala Harris, and Stephan Jenkins of Third Eye Blind.

amfAR extends its grateful thanks to presenting sponsor Wells Fargo and to American Airlines for its commitment to the fight against AIDS and its generous support of amfAR's mission. ■



Clockwise from top: The legendary Liza Minnelli; honoree Vanessa Getty and Billy Getty; honoree John Manzon-Santos with Liza Minnelli; singer-songwriter Tracy Chapman and event chair and past honoree Vince Calcagno share a light moment. (Photos: Drew Altizer)



Two by Two Scales New Heights

Record proceeds from Dallas fundraiser; Tom Friedman honored with amfAR's Award of Excellence

Dallas's art and philanthropic communities came together at the eighth annual "Two by Two for AIDS and Art" event on October 28, 2006, raising a record \$2.7 million for amfAR and the Dallas Museum of Art.

amfAR Chairman Kenneth Cole, Board member Natasha Richardson, and actor Stanley Tucci were present to lend their support to this increasingly successful black-tie dinner and art auction.

Sponsored by Harry Winston, JP Morgan Chase, and Sotheby's, Two by Two was graciously hosted once again by Cindy and Howard Rachofsky and was co-chaired by Lizzie Routman and Susan Kaminski.

The auction, conducted by Jamie Niven, vice chairman of Sotheby's, included major works of contemporary art and photography. Highlights included a Harry Winston signature lace timepiece, which sold for \$110,000, and renowned artist Tom Friedman's sculpture "Small Dog, 2006," which sold for \$180,000. The auction generated \$1,640,000.

As part of the fund-raising weekend in Dallas, Tom Friedman was honored with amfAR's Award of Excellence for Artistic Contributions to the Fight Against AIDS at a brunch hosted by Deedie and Rusty Rose on Sunday, October 29. Richard Metzner, amfAR Board member, presented Mr. Friedman with his award. ■



Top left: Artist Tony Horton and Natasha Richardson; Top right: Stanley Tucci; Bottom (from left): Kenneth Cole, Lizzie Routman, Natasha Richardson, Susan Kaminski, and event hosts Cindy and Howard Rachofsky. (Photo: Steve Foxall)

amfAR Rocks for AIDS Research



DJ Lady Bunny, Carson Kressley, and Kevin Aviance. (Photo: Stephen Lovekin, WireImage)

amfAR Rocks attracted more than 600 revelers to New York City's landmark Puck Building, September 25, 2006, raising nearly \$180,000 for amfAR programs.

D.J. Lady Bunny supplied the sounds, while 32 of the city's finest restaurants served up samples of some of their tastiest dishes, making for a festive fundraiser. Devon Aoki, Kevin Aviance, Carson Kressley, *All My Children's* Aiden Turner, and Harold Dieterle, winner of the first season of *Top Chef*, all came out to show their support for AIDS research.

A silent auction of a variety of luxury goods was a highlight of the evening, raising more than \$30,000 through bids on items such as a trip to Barbados donated by AAAltman Villa Rentals that sold for \$3,500, and a trip to Puerto Vallarta, courtesy of Mexico Boutique Hotels, that sold for \$2,600.

amfAR Rocks was sponsored by Harper's Bazaar, Donna Karan, ETC, Inc., M•A•C VIVA GLAM, 57th and Irving Productions, and Mr. and Mrs. Robert Fromer. amfAR is especially grateful to the amfAR Rocks Benefit Committee, a volunteer group of professionals dedicated to mobilizing friends and colleagues in support of amfAR's research and awareness programs. ■



Gift for Life Celebrates 15 Years Anniversary Party raises \$300,000 for amfAR

Gift for Life's 15th Anniversary Party, held January 28 in New York City, raised more than \$300,000 for amfAR. Peer Baekgaard, Rick Ruffner, and Jeff Sampson were honored by Gift for Life for their contributions to the fight against AIDS. The event featured a special performance by Tony Award-winner Christine Ebersole, star of the Broadway musical *Grey Gardens*, as well as an appearance by poet and AIDS activist River Huston.

Gift for Life is a nationwide group of volunteers from the gift, stationery, tabletop, and decorative accessories industries who raise funds for AIDS research and education and promote HIV/AIDS awareness within the gift industry. Since its inception, Gift for Life has raised more than \$4 million for amfAR programs. ■

calendar

Please note that all events are subject to change. Up-to-date event listings can be found at www.amfar.org.

May 22-30

TREK amfAR IN AFRICA— NAMIBIA

Intrepid participants in this fundraising hike through the Namib Desert will learn about the AIDS crisis in sub-Saharan Africa from medical experts working on the front lines. Funds raised through the Trek will be used in part to support amfAR's Global Initiatives program. Contact Erica Topple at (212) 806-1753 for more information.

Wednesday, May 23

CINEMA AGAINST AIDS

With its illustrious guest list and legendary live auction, Cinema Against AIDS promises once again to make for an extraordinary evening. Now in its 14th year, this signature fundraiser is one of the most popular events held during the Cannes International Film Festival. This year's presenting sponsors are Bold Films, M•A•C AIDS Fund, and The Weinstein Company.

Event co-sponsors are Chopard, Hewlett-Packard Company, Nassiri Music, and Warner Home Video. Contact Kate Fitzsimons at (212) 806-1612 for more information.

Tuesday, June 5

HONORING WITH PRIDE

amfAR's annual Honoring with Pride event at the Rainbow Room in New York City will feature cocktails, a gala dinner, live and silent auctions, and awards ceremony. The benefit pays tribute to individuals who have played a significant role in the gay and lesbian community's response to the HIV/AIDS crisis. This year's honorees are David Barr, Liz Smith, and Barbara Starrett. Contact Timothy Stahl at (212) 806-1636 for more information.

Monday, September 24

amfAR ROCKS

Join us for amfAR Rocks, the 16th annual restaurant tasting and dance party in support of amfAR.

Dance the night away while sampling some of the city's finest cuisine. Guests can also bid on items in the exclusive silent auction and participate in a raffle of luxury goods. Contact Kate Fitzsimons at (212) 806-1612 for more information.

Saturday, October 27

TWO BY TWO FOR AIDS AND ART

Howard and Cindy Rachofsky will once again welcome guests to their home for the ninth annual Two by Two for AIDS and Art event to benefit amfAR and the Dallas Museum of Art. Chaired by Jennifer Eagle and Catherine Rose, this Dallas event will feature a black-tie dinner and art auction followed by a luncheon and award presentation to an honored artist the following day. Previews of the artwork will be held during the week prior to the auction. Sponsors include Harry Winston and Sotheby's. Contact Franklin Fry at (212) 806-1611 for more information.

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AIDS RESEARCH

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