

## **HIV vaccines**

- We don't know how to make one that would work.
- We do know that a product of the correct design could probably be manufactured and distributed.
- We do know that an effective product would be used.

## **HIV microbicides**

- We do know how to make one that would work (I think).
- We don't (yet) know that a product of the correct design could be manufactured and distributed.
- We don't know for sure that an effective product would actually be used by real women in the real world.

**The third generation of microbicides (specific inhibitors, topical ARVs) is the one we have to get right!  
(Or there may be no “Next Generation”)**

- **We need** .... Active ingredients, compounds that might actually prevent HIV-1 transmission.
- .... Formulation expertise, particularly for co-formulating inhibitor combinations.
- .... Product development expertise - industrial input into the overall process would be desirable.
- .... A better regulatory process, flexibility from the FDA - an easier path to testing combination formulations.
- .... Trial sites and volunteers, focused on concepts that have a real chance of proving effective.

## **Primate models can help microbicide development ("low" and "high" dose models can be used)**

- Priority in clinical development should be given to compounds with proven efficacy in primates.
- Monkey availability is limited.
  - access issues for non-NIH funded projects at primate centers
- ARVs or compounds similar to those in clinical testing are generally likely to be reasonably safe (non-toxic).
  - some will probably be affordable;
  - can be gel-formulated (HMC).
- Entry inhibitors conferring protection in the macaque model include **PSC-RANTES, CMPD 167, BMS-378806, T-1249, C52L, CV-N, CD4-IgG2, b12, CAP, etc.**
- RT-inhibitors include **Tenofovir (UC-781** has not been successfully tested in the macaque model).

## **The case for combination microbicides**

**The arguments for using inhibitor combinations are as strong for prevention as for treatment.**

- **Increased breadth of coverage against divergent HIV-1 strains.**
- **Reduced probability of transmitting viruses resistant to any single inhibitor.**
- **Possible synergy, creating dose-sparing effects.**
- **Supportive data from animal models.**

## **Industry plays a critical role in microbicide development**

- **The Pharmaceutical Industry tends to protect its clinical candidates but is sometimes willing to make available alternative compounds that are similar to the ‘crown jewels’ and “just as good”.**
- **Models for industry involvement include:**
  - **Direct corporate funding, by share-holders and the private sector.**
  - **Involvement of NIH or an NGO as direct funding partners.**
  - **Agreement by an NGO to develop a company’s products collaboratively (e.g., IPM with Tibotech/J&J, Merck, Bristol-Myers).**

**The best model will vary from company to company.**

**Microbicides, oral prophylaxis and vaccines are complementary, not competitive ways to prevent HIV-1 sexual transmission**

**Why not try to combine technologies?**

- **Deliver entry inhibitors/ARVs both orally and vaginally.**
- **Use a microbicide formulation to deliver vaccine antigens vaginally or rectally, directly to mucosal sites.**
- **Can oral prophylaxis boost the protective effects of a sub-optimal vaccine?**
- **See if a partially protective microbicide can help a partially effective vaccine confer better protection (a monkey study is now being planned, with Dan Barouch).**

# **Basic/pre-clinical microbicide research**

## **A summary of where we are**

- **The pipeline is open. Many compounds suitable for human trials are available but not yet tested.**
- **A major research question:**
  - **Can we develop the combination microbicide & microbicide/PREP/vaccine concepts?**
- **What are the major choke-points?**
  - **Better access to animal models (including appropriate viruses and viral load assays).**
  - **Creating feasible public-private sector models.**
  - **More flexible regulatory processes.**

## **The Forum for Collaborative Research**

- **Prevention science needs such a forum.**
- **Over the past decade, prevention science has followed not this approach but has instead become:**

## **The Forum for Competitive Research**

- **NGO wars.**
- **Inter- and intra-foundation politics.**
- **Fights over trial sites and volunteers.**
- **Battles for funding in a competitive world.**
- **Everyone knows the stories..... It's time to stop!**