



Biomedical Prevention and Anal Sex

AMSHeR Sexual Health and Rights Institute

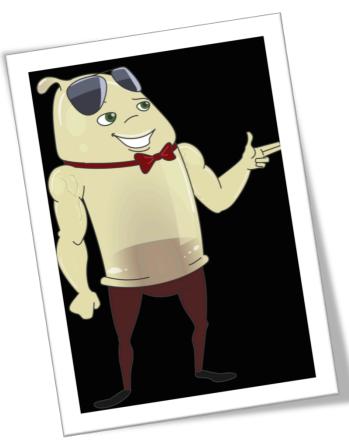
 $17^{th} ICASA - 5.12.13$







Our time together



Discussion

- Update on biomedical ARVbased prevention and advocacy
- Video screening: "The Rectal Revolution is Here: An introduction to rectal microbicide clinical trials"
- Focus on rectal microbicide research and advocacy





Our time together











Condoms work.

So why do we need new strategies to halt the sexual transmission of HIV?



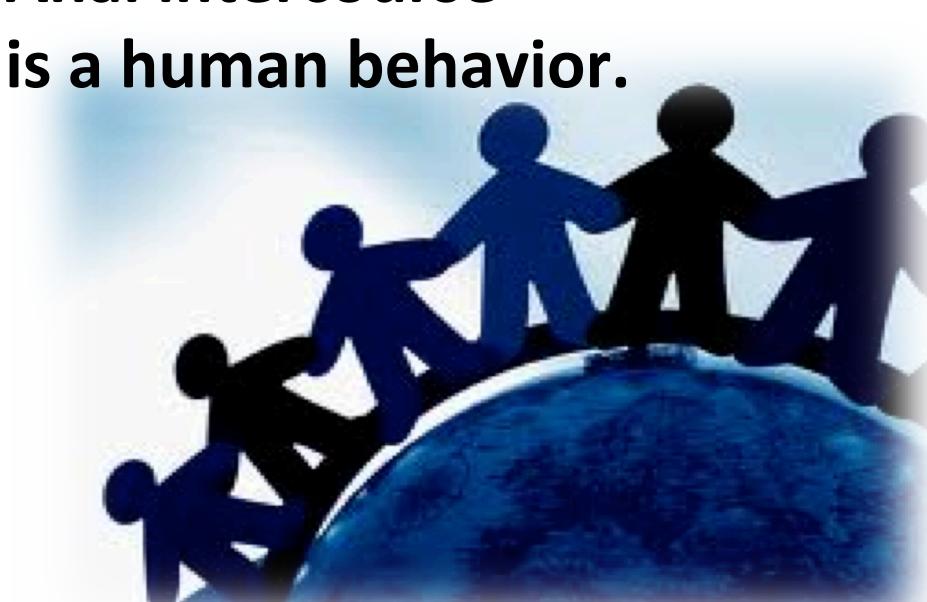
An act of unprotected anal intercourse is 10 to 20 times more likely to result in HIV transmission compared to an act of unprotected vaginal intercourse.

Estimated Per-Act Probability of Acquiring HIV from an Infected Source, by Exposure Acta

Type of Exposure	Risk per 10,000 Exposures
Parenteral	
Blood Transfusion	9,000b
Needle-sharing during injection drug use	67°
Percutaneous (needle-stick)	304
Sexual	
Receptive anal intercourse	50e, r
Receptive penile-vaginal intercourse	10e, f, g
Insertive anal intercourse	6.5e, f
Insertive penile-vaginal intercourse	5=, r
Receptive oral intercourse	lowe, i
Insertive oral intercourse	lowe, i
Other ^h	
Biting	negligible
Spitting	negligible
Throwing body fluids (including semen or saliva)	negligible
Sharing sex toys	negligible



Anal intercourse





Anal intercourse is a human behavior.





A growing prevention toolkit

Prior to exposure

Point of transmission

Treatment

- Rights-focused behavior change
- Voluntary counseling& testing
- •STI screening & treatment
- •Male medical circumcision
- Pre-exposure prophylaxis (PrEP)
- Preventive Vaccines*

- Male and female condoms and lube
- ARV treatment to prevent vertical transmission (PMTCT)
- •Clean injecting equipment
- Post-exposure prophylaxis (PEP)
- Vaginal and rectal microbicides*

- Treating POZ individuals has prevention benefits
- Basic care/nutrition
- Prevention for positives
- Education & rightsfocused behavior change
- Therapeutic vaccines*

*still in development





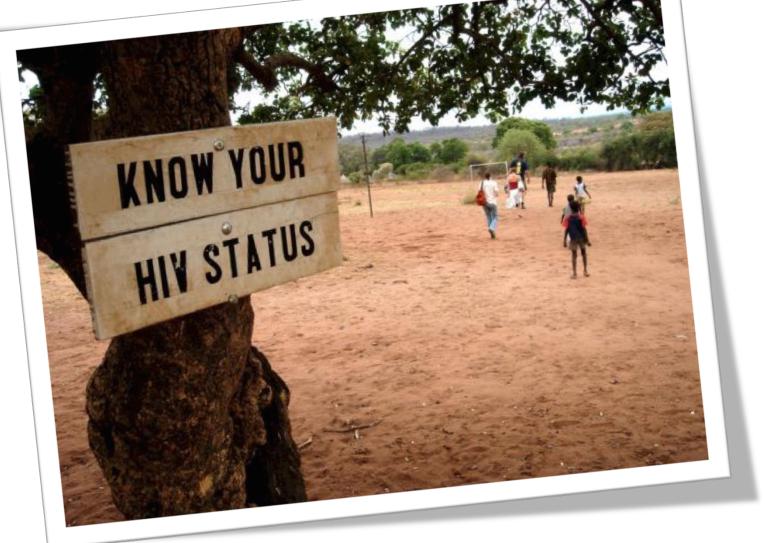




What is ARV-based prevention?

- Strategies that use HIV treatment drugs (antiretrovirals or "ARVs") to prevent HIV infection
 - Treatment as Prevention (TasP)
 - PEP (post-exposure prophylaxis)
 - PrEP (pre-exposure prophylaxis)
 - ARV-based microbicides





Testing is the gateway to all ARV-based prevention











TasP



Treatment as Prevention (TasP)

- Also known as Treatment for Prevention (T4P), Test and Treat (TNT) and TLC+ (Test, Link to Care, Plus Treatment)
- <u>Early use</u> of ARVs in HIV-positive people to reduce the risk passing HIV to others
 - The strategy is a secondary benefit of ARV treatment
- The primary benefit is the individual's health



Treatment as Prevention (TasP)

- The rational is that ARVs reduce viral load, which decreases infectiousness
- Recently proven to work in HPTN 052 study— early treatment reduces risk of transmission by 96% in heterosexuals
 - June 2013: WHO updates its guidelines to start treatment at 500 CD4 count (Consolidated guidelines for the use of ARVs for treating and preventing HIV infection)
 - But what about ANAL INTERCOURSE?



TasP and gay men

- Studies among gay/MSM in EU and Australia
- Serodiscordant gay couples
 - Risk of transmission with POZ partner on treatment
 - Reasons for not using condoms

Europe (14 countries)

- Partner Study
- -http://www.partnerstudy.eu/

Australia

- Opposites Attract study
- -http://www.oppositesattract.net.au/



TasP benefits

- Individual survival rates increase
 - Reduce disease and death
 - Control of TB and other HIV/AIDS-related illnesses
- Population levels of HIV decrease
 - 2004-2011 Kwazulul Natal (30-40% of HIV-infected on ART, decreased incidence by 38%)
 - 2002-2008 San Francisco: Increased tx, decreased community viral load and decreased HIV infections
- Simplified clinical management
- Reduce stigma with routine testing



TasP issues of note

- Ongoing research
 - Anal sex (Partners and Opposites Attract studies)
 - Definitive benefit of early treatment for HIVpositive individuals (START study)
 - Early treatment effects on the population level (TasP Study, PopART, etc.)
 - Studies looking at how best to improve the treatment cascade by getting people tested, treated sustained in care and virally suppressed (TLC+)



TasP issues of note

 Advocacy to start treatment earlier, at least 500 or over, and immediately in serodiscordant couples, pregnant women (Option B-plus), active TB and other clinical needs





PEP



*PEP



Post-exposure prophylaxis (PEP)

Provide 2 or 3 ARV drug regimen after HIV exposure to prevent infection

- Occupational offered to health care providers exposed to HIV, e.g. via needle stick
- nPEP offered for <u>non-occupational exposure</u>, meaning sexual exposure, injection drug use exposure, rape
- Must be taken within 72 hours of initial exposure
- ARVs must be taken for 28 days

THE CONDOM BROKE.

international rectal microbicide advocates

PEP MAY HELP PROTECT YOU FROM HIV UP TO 72 HOURS AFTER EXPOSURE



WHAT WAS
HIS STATUS?
PEP MAY HELP PROTECT YOU
FROM HIV UP TO 72 HOURS
AFTER EXPOSURE

talk

DOP D.org

FENWAY EN HEALTH







Questions?

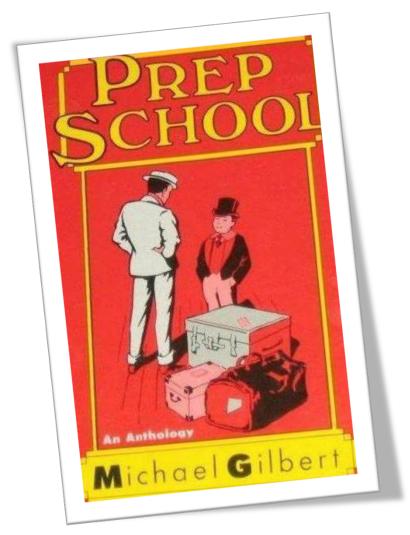




PrEP

What is PrEP?*



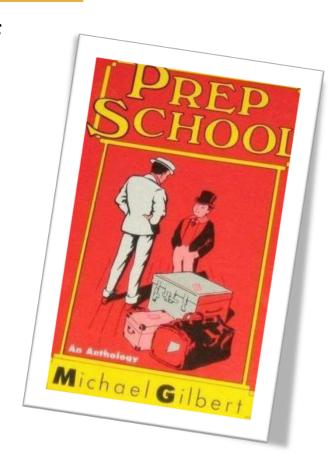


*pre-exposure prophylaxis



Hold up, what is prophylaxis?

- Prophylaxis is simply the provision of medications prior to germ or virus exposure to prevent infection.
- This is not a new concept.
- This is not a new practice.
- Example: taking allergy meds
- What are examples of similar concepts?





PrEP for HIV prevention

- PrEP involves HIV-neg person taking ARVs to reduce risk of infection BEFORE HIV exposure.
- PrEP prevents HIV from reproducing in a person's body.
- In current form, PrEP is taken in a single pill once a day, every day (Truvada).





PrEP research

- All completed trials done on tenofovir & Truvada
- 4 trials = PrEP reduced risk of HIV infection
 - 1. i-PrEX (Truvada in gay men and trans women)
 - 44% reduction overall (reported 2010)
 - Efficacy at 90% + with good adherence
 - 2. Partners PrEP (Truvada and tenofovir in het couples)
 - 75% reduction Truvada (reported 2011)
 - 3. TDF2 (Truvada heterosexual men & women)
 - 63% reduction overall (reported 2011)



PrEP research

- 4. June '13 Bangkok Tenofovir Study (BTS)
- CDC study of injection drug users (2,400 +)
 - Median age 31, 80% male
- Daily tenofovir (75% chose directly-observed therapy)
- It works. 49% overall, 74% high adherers



PrEP research

- 2 trials = PrEP did not work
 - FEM-PrEP (Truvada in women stopped 2011)
 - VOICE (Truvada, tenofovir reported 2013)
 - Both had very low adherence though self-reports were high)
 - Low/undetected drug levels





What PrEP does not do

Truvada as PrEP does not

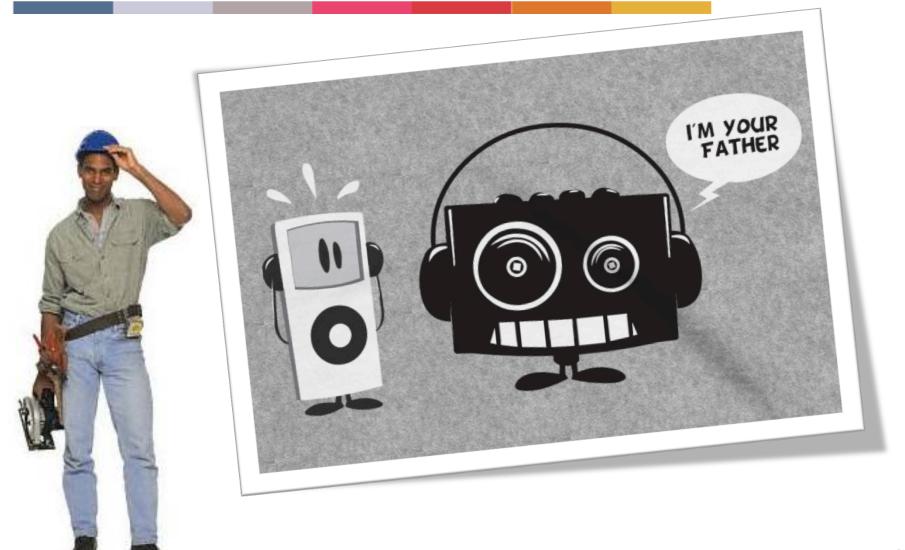
- Guarantee 100% protection from HIV
- Protect a person against other STIs like chlamydia, syphilis, herpes, or gonorrhoea
- Prevent pregnancy
- Cure HIV
- Function, on its own, as a treatment regimen for someone already living with HIV.
- Why is Truvada, on it's own, not considered adequate for treatment?







PrEP # Truvada







WHO Guidelines - PrEP



WHO PrEP Guidelines for MSM, TG

Countries that decide to proceed with introducing oral PrEP should undertake demonstration projects to ascertain most appropriate groups and best delivery approaches:

- HIV testing, retesting
 - Adherence
 - Side effects
 - Drug supply
- Referrals, resistance testing for seroconverters
 - PrEP before achieving universal Tx access?





WHO PrEP Guidelines for MSM, TG

"In countries where HIV transmission occurs among men and transgender women who have sex with men and additional HIV prevention choices for them are needed, daily oral PrEP (specifically the combination of tenofovir and emtricitabine - Truvada) may be considered as a possible additional intervention.

Conditional recommendation, high quality of evidence*."







Questions?





Microbicides

What is a microbicide?

A product applied in the vagina or the rectum that offers protection against HIV and, ideally, other sexually transmitted infections

Ideally, contraceptive version, and another to allow for pregnancy – ARV/non-ARV

Formulated as a gel/lubricant, film, or vaginal ring

A <u>rectal</u> microbicide might be delivered via gel/ lubricant, douche/enema, or ...

Microbicides are still in development - they are not available yet!







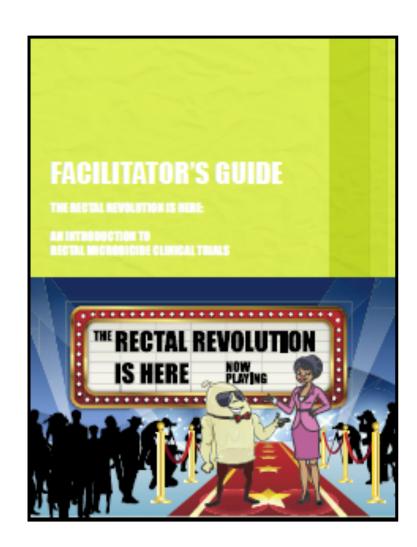




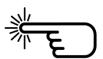


Questions?





tinyurl.com/rectalvid





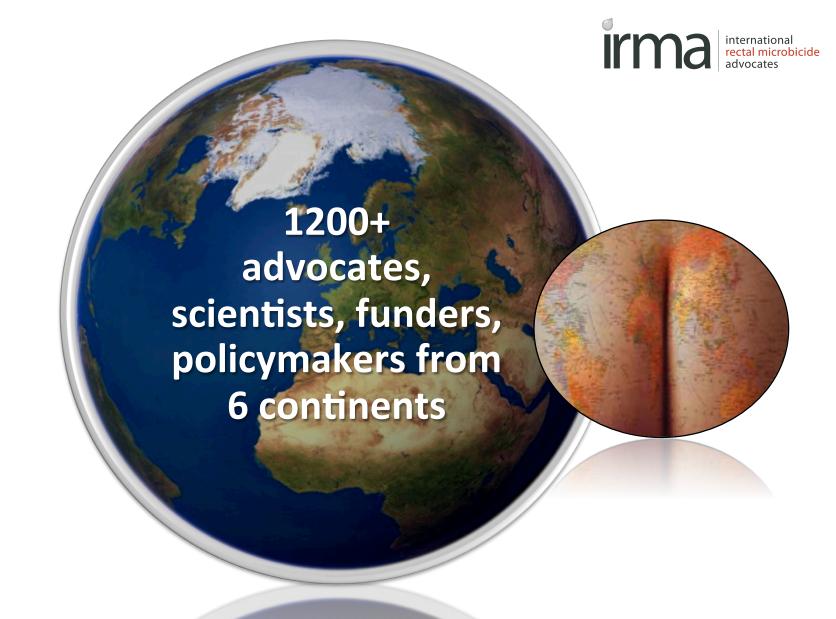


Rectal Microbicide Advocacy





Who is IRMA?





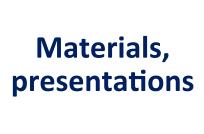
Mission: support development of safe, effective, acceptable, and accessible rectal microbicides for all that need them







Highly active moderated listserv







Website

Blog, Facebook, Twitter, YouTube











Engage w/ science and community



Lubricant safety/access



Funding, civil society support

Engage w/ clinical research

Anal health, anal sex



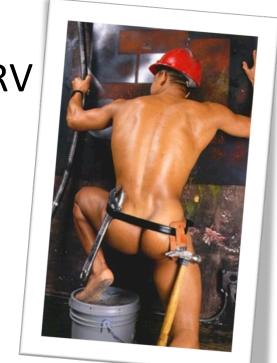
Rectal microbicide science





CHARM Program

- Combination HIV Antiretroviral Rectal Microbicide Program
- Development of rectal <u>specific</u> ARV microbicides
- Humanized mouse model
- Phase 1 studies (rectal specific)
 - Tenofovir, Maraviroc
 - Tenofovir & Maraviroc







MTN-017





MTN-017

A Phase 2 Randomized Sequence Open Label Expanded Safety and Acceptability Study of Oral Emtricitabine/Tenofovir Disoproxil Fumarate Tablet and Rectally-Applied Tenofovir Reduced-Glycerin 1% Gel







017 participants, locations

N = 186

Participants
Gay/MSM,
transgender
women

Study sites

- US (4)
- Thailand (2)
 - RSA (1)
 - Peru (1)



DESMOND TUTU HIV FOUNDATION



017 in brief

- Study regimens include:
 - Rectal tenofovir gel used daily
 - Rectal tenofovir gel used before and after sex
 - Truvada tablets taken daily
- Each participant will follow all of the study regimens for eight weeks, with a weeklong break between regimens when no product will be used
 - The order in which participants follow study regimens will be based on random assignment
- All participants receive standard HIV prevention package



Vaginal applicator







017 primary objectives

Safety

 Compare the safety profiles of rectal tenofovir gel used daily and before and after sex, and Truvada tablets

Acceptability

- Evaluate and compare the acceptability of Truvada tablets to rectal tenofovir gel
- Did they like the product? Would they use it in the future, if available?





017 adherence

PK monitoring, "real time" PK

Layered approach to monitoring

- SMS (text messages)
- Product returns
- CASI (computer assisted self interview)



Rectal Microbicide Timeline*

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Phase 1	•	→								
Phase 2				-	ightharpoonup					
Phase 2B						-		•		
Review									*	
Available										→
Vaginal microbicides						_	•			

^{*}An approximation based on tenofovir 1% gel







Questions?



PROJECTAR MICROBICIDES





Africa needs a rectal microbicide research and advocacy strategy specific to the continent





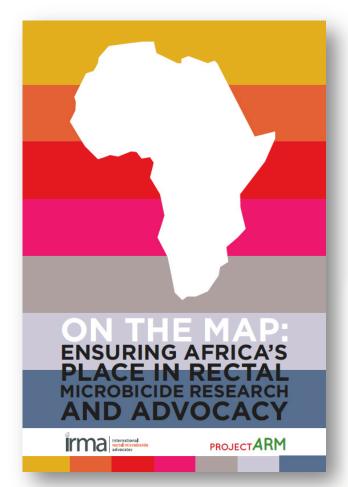
at ICASA 2011

- Birthing Project ARM
 - Working/strategy meeting before ICASA 2011
 - Addis, Ababa, EthiopiaDecember 2 3, 2011
 - -45 individuals:
 - Africans/allies



PROJECTARM







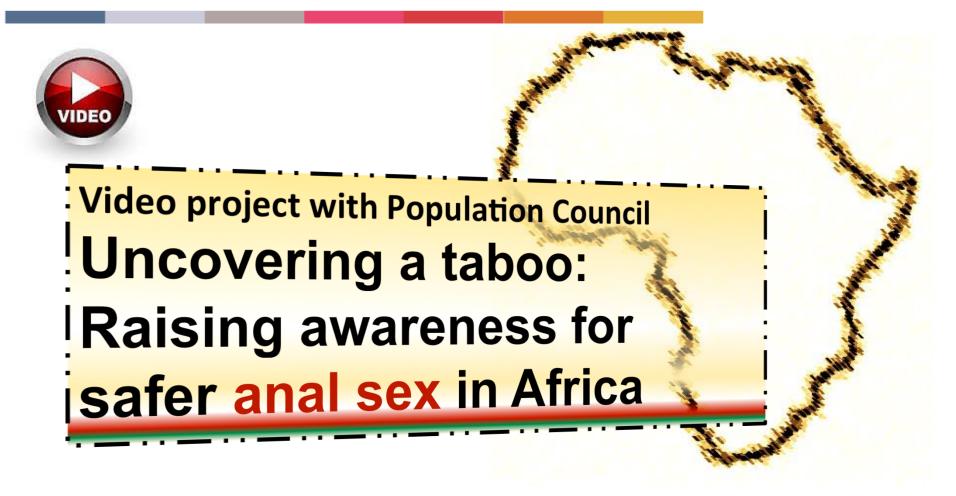
Our diverse sexualities in Africa shouldn't be defined only by the prevention tools we have available. HIV prevention tools must be adapted to our sexualities.

Alliance Nikuze, Rwanda

www.rectalmicrobicides.org/ProjectARMreport2012.pdf



Communication/education materials











AND LUBE ACCESS MOBILISATION

GLAM



The tag line for the Global Lube Advocacy Mobilisation sums it up. Whenever someone says "condoms," we say "And Lube." You cannot say one without the other. Too often that is exactly what happens. Access to condom-compatible lubricant is deplorable all across Africa—it's unacceptable, and we are working to change that.

PROJECTARM

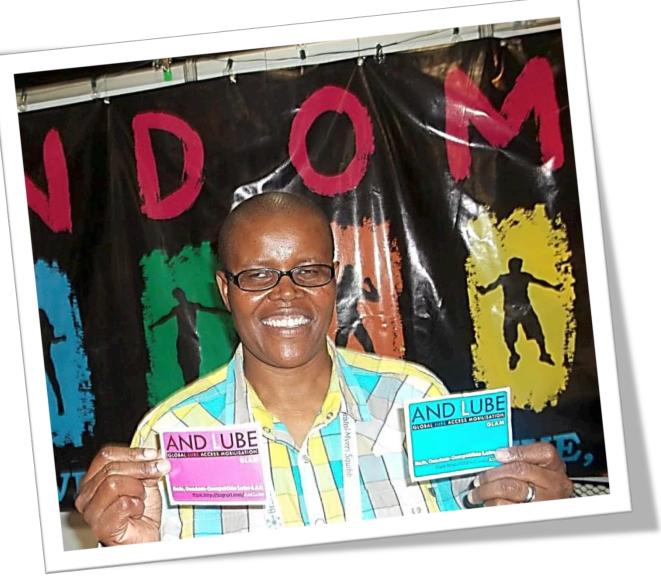




Whenever anyone says "condoms" – we say "AND LUBE!"



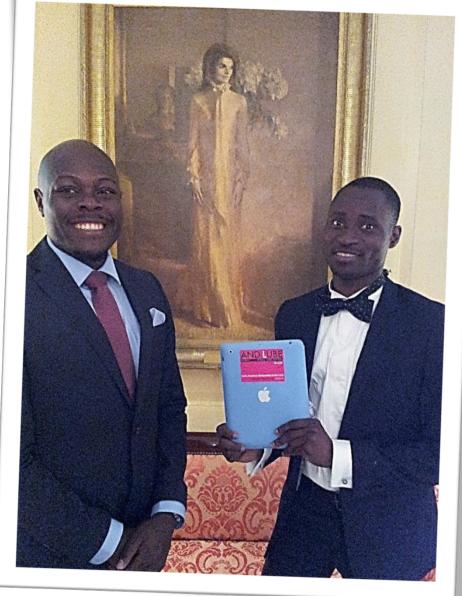




Visit http://tinyurl.com/AndLube







Visit http://tinyurl.com/AndLube

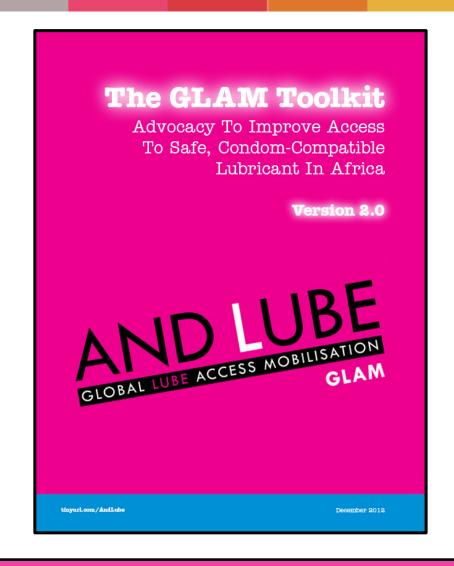
AND LUBE ACCESS MOBILISATION GLAM

Safe, Condom-Compatible Lube 4 All

Visit http://tinyurl.com/AndLube/

English

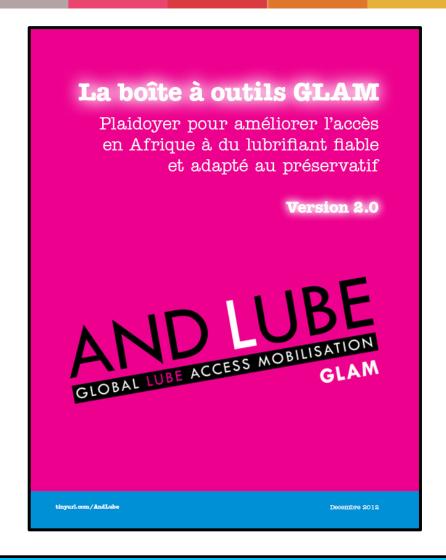






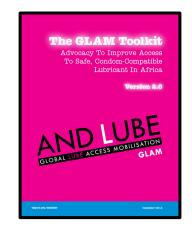
French

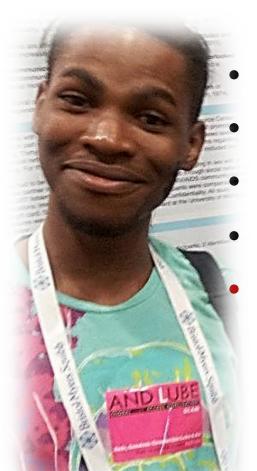




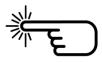


What is in the GLAM Toolkit?

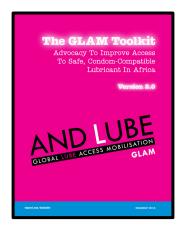




- **Lube Access and Safety**
- **African National Strategic Plans**
- **National Case Studies**
- Survey Findings Lube Distribution, Access
- <u>Advocacy Steps for Improving Access to Safe, Condom-Compatible Lubricant</u>



What is in the GLAM Toolkit?

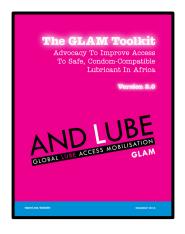


Lube Access and Safety Info

- Many people use some type of lubricant during anal and vaginal intercourse.
- Some lubricants (water- and silicone-based)
 are safe to use with condoms; others
 (petroleum-based products) are not safe to use
 with condoms.
- Using condom-compatible lube reduces the risk of condoms breaking or slipping.



What is in the GLAM Toolkit?



Lube Access and Safety Info

- Condom-compatible lubes are inaccessible to most people around the world, esp. Africa.
- Promotion and distribution of condoms and safe condom-compatible lube should go hand in hand.
- However, more research is needed on the safety of lubricants to determine which products are safest.





EXPLORE IF THERE IS A LINK BETWEEN LUBE USE AND ACQUIRING HIV AND /OR RECTAL

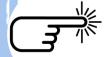


Lube Fact Sheet, Lube QA

OSafety of lubricants for rectal use:
A fact sheet for HIV educators and advocates

OSafety of lubricants for rectal use:

Questions & Answers for HIV educators
and advocates



rectalmicrobicides.org/materials.php



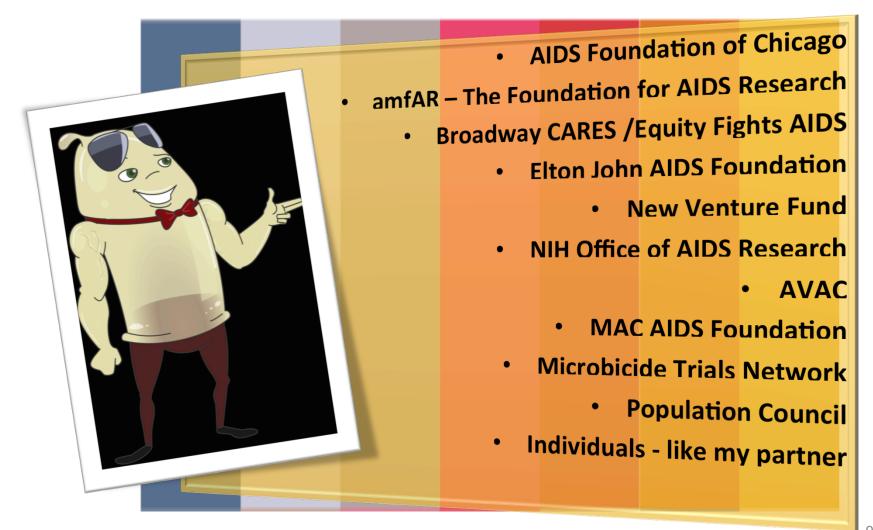




Questions?



Special thanks to IRMA supporters



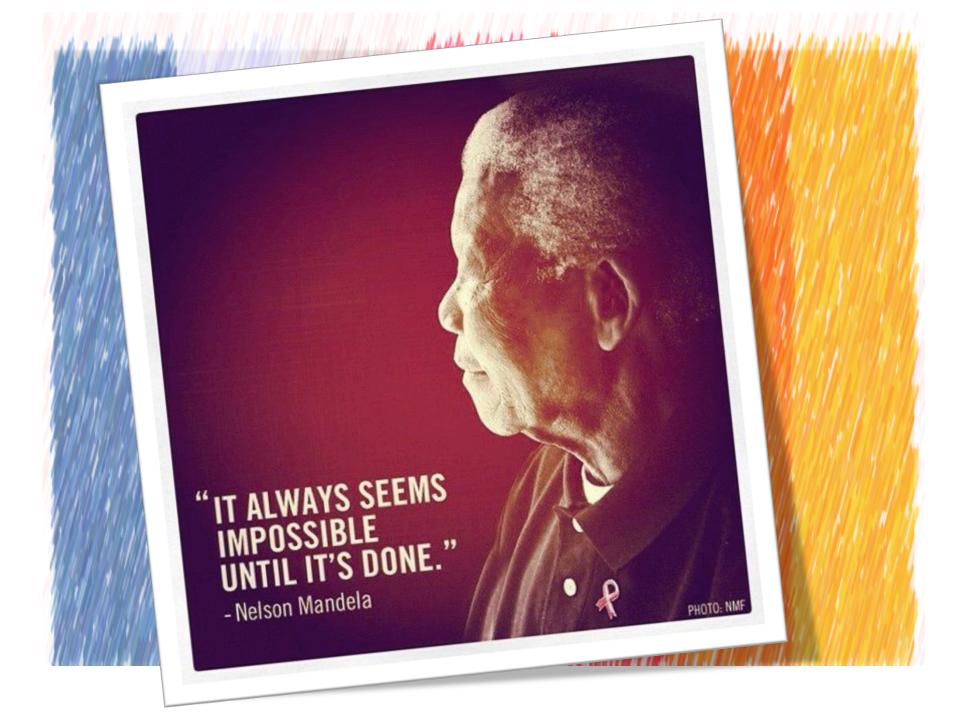
Thank you













Stay in touch



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Jim Pickett <u>jpickett@aidschicago.org</u>
Visit <u>www.rectalmicrobicides.org</u>