

00:31:43 Kennedy Mupeli: Kennedy Mupeli from Botswana. I work for CEYOH0 as Program Manager.

00:31:54 Shekinah Rose: Shekinah Rose (She/Her) Positively Trans, HUREED (Uganda), Pittsburgh, PA USA

00:33:26 Adaobi Olisa: Go sSupercharger 🔥🔥🔥🔥

00:33:32 Bridgette Picou: Good morning. Bridgette Picou, The Well Project. Here at CROI

00:34:10 Adaobi Olisa: Good morning everyone, Adaobi Olisa, CROI community scholar. FHI 360-Nigeria

00:34:31 Adaobi Olisa: Go Natasha 🔥🔥🔥🔥

00:34:35 Shekinah Rose: Good morning Christina!

00:34:37 Jim Pickett: You sound great Natasha

00:35:21 Adaobi Olisa: Yes!!!! Our scholars are faya 🔥🔥🔥🔥

00:35:50 Jim Pickett: Much love to the Community Educator

Scholars – all 💖

00:35:55 Jacque Wambui: 🔥

00:36:25 Julie Patterson: Replying to "Much love to the Com..."



00:36:39 Shekinah Rose: Replying to "Much love to the Com..."



00:37:06 Jim Pickett: well over 200 folks have registered for today's CBC – thank you for being part of the esteemed group!

00:40:45 Francis Luwole: Well said Natasha 🙌

00:40:57 Jim Pickett: Natasha 💖

00:43:09 Jim Pickett: the Late Breaker session today is at 12:15

00:43:20 Kei (they them theirs): I missed what drug we are talking about for what ailment? The auto-captions are offering an autocorrect version that makes no sense.

00:43:24 JD Davids: We see a huge problem with the one-way approach with COVID prevention , with US CDC's announcement of ending most COVID isolation to match recommendations to flu and RSV – even though this is a recipe to spread COVID and Long COVID, and to maintain COVID as the 4th leading cause of adult death

00:43:47 Manju Chatani: Replying to "Much love to the Com..."



00:45:03 JD Davids: I hope people can advocate for poster session to be streamed for virtual participants in future years. We are missing a lot.

00:45:23 Jim Pickett: Replying to "I hope people can ad..."



00:45:35 Jim Pickett: Replying to "I missed what drug w..."

@Carlos del Rio

00:46:36 Kei (they them theirs): I missed what drug we are talking about for what ailment? The auto-captions are offering an autocorrect version that makes no sense.

People are just going to ignore my question and talk about everything as if I didn't say anything? Way to include outsiders from the community. I'm out of here.

UH sucks, and this is emblematic of your problems.

00:46:53 Grace Kumwenda: Replying to "I missed what drug w..."

We will respond live

00:47:00 Jim Pickett: We want to bring the audience into the convo - pls feel free to raise your hand to share your thoughts or ask a question

00:47:02 michael louella (they/them): When will croiwebcasts.org start sharing some of the talks with us? It used to be so wonderful to be able to check out for ourselves the talks. This year, it feels siloed from the public. I wonder if others feel left out? It's hard to care about science that is treated so secretively. Those of us who usually present this science to our community have been negatively affected by this change? Can we get CROI to change back?

00:47:07 Talkmore Mazorodze: An HIV Cure is the game changer, it is what the world needs more Now!! Yes we might have all these interesting prevention strategies, but we need a cure!!!

00:47:50 Jim Pickett: Replying to "When will croiwebcas..."

would you like to make your comment "live" Michael?

00:48:02 Julie Patterson: Replying to "I missed what drug w..."

I thought it was cabotegravir/ rilpivirine

00:48:02 michael louella (they/them): Replying to "When will croiwebcas..."

sure

00:48:55 Jim Pickett: Replying to "I missed what drug w..."

we see your question

00:49:05 Jim Pickett: Replying to "I missed what drug w..."

you are not being ignored!

00:49:19 Shekinah Rose: WOW Supercharger!

00:50:07 Shekinah Rose: They are asking a question. They were misgendered


00:51:22 Jim Pickett: We need to be patient with each other and give each other grace in these Zoom webinars - everyone is trying our best to respond to questions. Kei already left and its too bad

they did.

00:52:22 Axel Vanderperre: i would like to know if there were some presentations/abstracts/posters related to aging & hiv mechanisms and new developments to tackle chronic inflammation, immunosenescence ... (such as REPRIEVE). I think more focus should be on prevention of comorbidities

00:52:25 Enid Vazquez: Perfect response, Jim. We need patience and grace!

00:52:30 Erin Kiernon: Replying to "We see a huge proble..."

This!!! 

00:53:44 Lobna Gaayeb: Michael, the talks are there but there are a bit buried and hidden, we can chat offline and I can show you how to access those. They are posted 24h after

00:54:38 Jim Pickett: Replying to "i would like to know..."

thanks Axel - we will bring this forward

00:54:39 Lobna Gaayeb: It is on the CROI resources platform

00:55:14 Katharine Kripke: Replying to "Michael, the talks a..."

is this only for registered participants, or for everyone? If for everyone, can this information be disseminated through TCA?

00:55:19 Jim Pickett: thank you for saying this about community Carlos

00:55:34 Lobna Gaayeb: Replying to "Michael, the talks a..."

For registered attendees only unfortunately

00:55:48 Krishen Samuel: When we speak about 'choice' regarding prevention and treatment options, we tend to make it sound as though people have all the agency, and it simply comes down to a matter of preference. This is misleading. We can ONLY choose between available options, and our choices are constrained by access, resources and our structural social determinants of health. So we need to contextualise all this 'choice'.

00:56:00 Jill Gay: Any new data on the intersection of HIV and COVID, with or without vaccination?

00:56:14 Danielle Campbell: Replying to "When we speak about ..."

THIS IS THE ONE!!!!!!

00:56:19 Jim Pickett: Replying to "Michael, the talks a..."

I believe all the webcasts will be available to the public in one month

00:56:25 JD Davids: Replying to "When we speak about ..."

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00:56:40 David Palm: @Jim @Carlos similar to Michael's comment, were there recordings made of the "mini theaters"? Those might be useful as well.

00:56:40 michael louella (they/them): My favorite poster:

00:56:55 Lobna Gaayeb: Replying to "When we speak about ..."



00:57:24 Jim Pickett: Replying to "When we speak about ..."

Krishen – excellent points. Would you like to raise your hand and speak these?

00:58:17 Jim Pickett: Replying to "@Jim @Carlos similar..."

@Carlos del Rio – do you have an answer to this?

00:59:40 Jim Pickett: Replying to "Any new data on the ..."

@Christina Farr or @Carlos del Rio

00:59:54 Adaobi Olisa: Yes, there was a session about aging that concluded that the important thing is to ensure provision of comprehensive healthcare services for PLHIV

00:59:59 Adaobi Olisa: Exactly

01:00:19 Adaobi Olisa: PLHIV need the complete package to remain healthy

01:00:36 Adaobi Olisa: Not just HIV services

01:00:52 Jeff Taylor: In the aging context, co-morbidities are the new opportunistic infections that are killing PLH

01:01:10 Jim Pickett: Thanks @Adaobi Olisa for jumping in :)

01:01:23 Janea Hunter: Replying to "PLHIV need the compl..."

precise

01:01:26 Jim Pickett: Replying to "In the aging context..."

yes, great point

01:01:35 Janea Hunter: Replying to "PLHIV need the compl..."



01:01:54 Katharine Kripke: Replying to "Michael, the talks a..."

Thanks, Jim!

01:02:21 Christina Farr: There was also a session on Monday about living into adulthood for those that acquired HIV perinatally that discussed some of the challenges faced including mental health and cardio metabolic issues

01:02:53 Shekinah Rose: Is PEPFAR able to add access to food & transportation for people with HIV in Uganda to be able to access ARVs in the budget Uganda receives? These are barriers many experience currently.

01:03:19 Krishen Samuel: Replying to "When we speak about ..."

Thanks Jim!

01:04:10 Adaobi Olisa: Yes, choice is about the options that best suits your needs at any given time. But we can't have choices when the options are out of reach

01:04:30 Adaobi Olisa: We definitely need to ensure access to all the options to enable choice  
01:04:31 Jim Pickett: Replying to "When we speak about ..."

You made such important points – choice is not so simple, there are so many things that can constrain choice

01:04:52 Adaobi Olisa: That's the only way we can truly say that there's choice among options  
01:05:10 Grace Kumwenda: Replying to "That's the only way ..."

do you want to comment live

01:05:18 Krishen Samuel: Replying to "When we speak about ..."

Absolutely, and sometimes the 'obvious' choice to scientists simply isn't that for communities.

01:06:03 Bridgette Picou: Natasha those are great points.

01:06:35 Danielle Campbell: We can't have choices when options are out of reach!!!!!!!!!!

01:06:41 SHALOM MWAPE: Great points Natasha

01:06:46 Barbara Jungwirth: Any thoughts on injectables for people with substance use disorder for whom injections might be triggering?

01:06:46 Chilufya Hampongo: Replying to "When we speak about ..."

@Krishen Samuel I agree the understanding of Choice by Scientists may not be what community defines it.

01:07:29 Shekinah Rose: Replying to "When we speak about ..."



01:07:53 Jeff Taylor: In the context of PrEP. long acting regimens may not be advisable if availability is intermittent—which could put people at risk of developing resistance

01:08:34 maud isala: Oh yes Choices might be there but we have to take accessibility and affordability

01:08:41 Jeff Taylor: @Jim: your points are all about how deeply dysfunctional the US healthcare system is, despite spending more money on healthcare than any other country

01:08:41 Axel Vanderperre: i think it is not only about "efficacy" but we need also integrate other outcomes measured with biomarkers which can be linked with quality of life, less chronic inflammation etc

01:09:12 Bridgette Picou: If its not accessible , it becomes an option not a choice.

01:09:39 Bridgette Picou: Replying to "@Jim: your points a..."



01:09:42 Jeff Taylor: Replying to "If its not accessibl..."



01:09:50 Shekinah Rose: Replying to "If its not accessibl..."



01:10:02 michael louella (they/them): Replying to "If its not accessibl..."



01:10:02 Luciana Kamel: Replying to "If its not accessibl..."

Great Point

01:10:04 Bridgette Picou: Replying to "i think it is not o..."



01:10:34 Jessica Salzwedel: Not all trials have latency reversing agents. In fact many new trials involve immune based approaches

01:10:37 Jim Pickett: I would also like to say my earlier comments were very prevention-centric.....

01:10:47 Steven Vargas: Replying to "If its not accessibl..."

If it's not accessib...

01:11:03 Jessica Salzwedel: Current trials are charted on TAG <https://www.treatmentactiongroup.org/cure/trials/>

01:11:10 Arda Karapınar: Great point, Jim.

Just because something is an option on paper doesn't mean it's easily accessible to everyone. We need to remind them of this relentlessly, make noise at every opportunity and remind whoever is in charge of it of their job and responsibilities. That is one of our most important jobs as a community.

01:11:10 Jeff Taylor: Supercharger's comments speak to the need for integrating sociobehavioral research into cure research. And all research for that matter

01:11:13 Adaobi Olisa: Go supercharger 🔥🔥🔥

01:11:24 Adaobi Olisa: Amazing to elevate the next generation

01:11:37 Cissy Ssuuna: When we don't have a list of option to pick from and agree even for treatment for HIV or PrEP, then we don't have access to choice

01:11:52 Jessica Salzwedel: Replying to "If its not accessibl..."

100% agree! A cure strategy MUST be accessible and affordable!

01:12:09 Lobna Gaayeb: Thanks Jim for that! Indeed, choice is only possible if the product is accessible and affordable. What are the access plans for all the exciting products presented at CROI, what will access look like globally? We need to demand that access

provisions are spelled out by innovators, as early as possible in the product development. It seems incredible to witness amazing scientific and clinical advances, and hope for a surprise on how stuff will be rolled out globally 🍷

01:12:14 Julie Patterson: Yes, take the microphone!! 🎤

01:12:39 Jim Pickett: Replying to "Thanks Jim for that!..."

100

01:13:22 Simon Collins: Access is also an issue for semaglutide for diabetes and weight loss. Manufacturer Novo Nordisk refuses to support HIV research. We were excluded from all studies. This company is now worth \$500 BILLION – they need to work with medicine patent pool for generic access globally. US ACTG study showing important results on liver fat had to buy drug from Novo Nordisc

01:13:54 Jim Pickett: who else wants to raise their hand?

01:14:05 michael louella (they/them): Replying to "Access is also an is..."

Indeed. Thx for raising this point!

01:14:41 Jim Pickett: Replying to "Great point, Jim.

J..."



01:15:37 Jeff Taylor: 100

01:16:09 Jim Pickett: ATI = analytical treatment

interruption

01:16:11 Jeff Taylor: We need better technology so we can do at home viral load testing so people know their status in real time

01:16:14 Jeff Berry: There is a benefit if you're in a study where you go off treatment and remain undetectable

01:16:30 Jeff Taylor: IF you remain undetectable

01:17:28 Danielle Campbell: STAND UP Jackson!!!!!!!

Welcome.

01:18:25 Jeff Berry: Yes, I realize the chances are few, but to say there is no benefit is maybe a bit strong

01:18:54 Jeff Taylor: Replying to "Yes, I realize the c..."



01:19:03 Kennedy Mupeli: Replying to "Yes, I realize the c..."

While the advancements in cure and biomedical research showcased at CROI are indeed thrilling, I am eagerly anticipating a future CROI where the focus shifts towards groundbreaking science, with at least half of the presentations celebrating breakthroughs rather than outlining challenges.

01:19:12 Jim Pickett: @Janea Hunter – we have a global discussion list called The Choice Agenda that I would be happy to add

you to – you can send me an email at jimberlypickett@gmail.com  
01:19:25 Lobna Gaayeb: Replying to "Access is also an is..."

Absolutely! Thanks for raising this. Incretin mimetic therapies, that include semaglutide are a priority for the medicines patent pool. Access to these drugs is critical. The results showed in the last days only support that these products should be accessible globally!

01:19:59 Jeff Berry: Replying to "Yes, I realize the c..."



01:20:09 Lobna Gaayeb: Replying to "Access is also an is..."

<https://medicinespatentpool.org/progress-achievements/prioritisation>  
01:20:14 Jim Pickett: Replying to "Yes, I realize the c..."

Great point @Kennedy Mupeli!

01:20:40 Shekinah Rose: Malaria too is a concern along with TB

01:20:48 Angel Hernandez: Being a former CROI Scholar, I think it will be helpful to have a compilation of resources that summarize the presentations in lay terms to facilitate sharing with our communities

01:21:34 Talkmore Mazorodze: Replying to "Being a former CROI ..."

oh yes!

01:21:39 Julie Patterson: Replying to "Being a former CROI ..."



01:21:48 Jeanette Murdock: Thank you all for this important information.

01:22:09 Janea Hunter: Replying to "@Janea Hunter – we h..."

I will do this today

01:22:16 Steven Vargas: Another great early morning session. I can't believe I was able to attend each one!

01:22:37 Daisy Ouya: Very interesting what you say about mAbs being the connector of cure, px and tx

01:22:48 Mitchell Warren: Love all of this! Develop options; deliver choices; break the siloes; build the next generation!

01:22:50 Janea Hunter: Replying to "@Janea Hunter – we h..."

my email is also jhunter@gracehousems.org

01:23:08 Darren Lauscher: Thank you to all of our panelists and their thoughts and reflections. To our organizers thank you for bringing us along.

01:23:19 Danielle Campbell: Replying to "Love all of this! De..."





01:23:33 Lobna Gaayeb: Replying to "Love all of this! De..."



01:23:33 Janea Hunter: Replying to "Being a former CROI ..."

Totally agreed.

01:23:35 Birgit Leichsenring: Thank you so much for your all your amazing expertise and activism and energy!

01:23:36 Julie Patterson: Replying to "Love all of this! De..."



01:23:37 Jeff Berry: Great session, thanks everyone!

01:23:39 Shekinah Rose: Replying to "Love all of this! De..."



01:23:53 Adaobi Olisa: True 😊

01:24:10 Adaobi Olisa: The community are experts about our problems

01:24:21 Shekinah Rose: Well said Natasha!!

01:24:25 Janea Hunter: Sharing my contact everyone

jhunter@gracehousems.org

01:24:43 Jason Rosenberg: Thank you speakers and Grace for your amazing moderating!

01:24:44 Julie Patterson: Thank you to all of you who are there at CROI asking the difficult questions and for being courageous! Have a great last day!!

01:24:50 Orbit Clanton: Thanks to all our speakers great session

01:24:50 James Murray: Thank you organizers and participants!

01:24:52 Stacey Hannah: Thank you Grace for wonderful

moderation!!

01:24:52 Udom Likhitwonnawut: Thank you the panelists and everyone. Great discussion.

01:25:09 Adaobi Olisa: Amazing session 🔥🔥🔥

01:25:22 michael louella (they/them): 🍷🍷🍷🍷🍷

01:25:45 Lobna Gaayeb: Thank you Grace, Jim, Carlos, Natacha, Supercharger, Christina and the whole group for the energetic mornings throughout CROI !!

01:25:48 Shekinah Rose: Thanks everyone for another great Community Breakfast Club discussion. Its been a great week to hear so many inspiring people. Thanks Grace!

01:26:39 Jamir Tuten: What a wonderful opportunity this was for me, thank you everyone! Grace Jim Supercharger you all have been amazing. Thanks to the panelists And to the community scholars it was great connecting with you all 🤝💡

01:26:40 Janea Hunter: Thanks to all for being a part of the solution.

01:27:01 Grace Kumwenda: Replying to "What a wonderful opp..."



01:27:12 Shekinah Rose: Thanks Jim! Great music 🎵

01:27:14 Krishen Samuel: Thanks for the shoutout Jim!

01:27:24 maud isala: Thanks everyone.

01:27:26 Natasha Mwila: Great work Grace 🙌🙌🙌

01:27:39 Julie Patterson: aidsmap! TheBody.com!  
Positively Aware!

01:27:42 Janea Hunter: For Us By Us

01:28:10 Giorgio Barbareschi: Thank you for a great  
session ! 🙌 well done to all the panelists and Jim!

01:28:22 Mitchell Warren: Thank you everyone!!!!