

Stop talking about cure for AIDS: expert

22nd July 2007, 6:15 WST

It's time the world stopped talking about a cure for AIDS.

As bleak it this sounds, this is the advice from a top international authority on the invasive disease, Dr Anthony Fauci, who says the answer to the global epidemic will come - but it will come from a new arena entirely.

"This is a hugely exciting time in the world of AIDS research," said Dr Fauci, director of the US National Institute of Allergy and Infectious Diseases.

"We've got incredibly potent treatments on the horizon, possible vaccines in the pipeline and new options for using these things in ways we haven't before.

"But as for a cure, let's just stop talking about it."

Dr Fauci, a key adviser to the White House on HIV, arrived in Sydney to headline the International AIDS Society (IAS) conference.

Presentations range from the benefits of circumcision for cutting HIV rates through to the latest developments in anti-retroviral drugs that stop the virus from binding to human cells.

The biannual conference comes at a time when the disease, a notorious 1980s phenomenon, is making a comeback with a vengeance.

There were 4.3 million new HIV infections in the world last year, most in African nations where access to condoms, clean needles and health warnings remain limited.

"Another major problem is that the women in these countries can very rarely negotiate the use of a condom with their husband or their regular sexual partner so they're at the mercy of a situation over which they have very little control," Dr Fauci says.

Access to treatment is also poor, with only 28 per cent of HIV-positive people getting the drugs they need to stay alive.

Some third world countries, like Thailand, have improved their disease rate with new drug or prostitution policies but others, like Australia's neighbour Papua New Guinea, look to be heading for an Africa-style outbreak.

While rates are vastly lower in the West, many nations are having trouble cutting them back.

The US, for instance, has reported 40,000 annual infections consistently for 14 years.

"It's like we've hit a wall," says Dr Fauci.

Authorities have now instituted broader,

more aggressive prevention measures which involve routine HIV screening but are still concerned the most at risk group, Afro-Americans, will slip through the gap.

In Australia, the rate has doubled in the past seven years, from 500 annual new infections in 2000 to almost 1,000 in present day.

Leading Australian HIV immunologist, Professor David Cooper, said the growth in Australia was mostly in the gay community, due in part to increasing indifference about HIV/AIDS in general and a bold optimism surrounding the new generation of treatment options.

The specialist believes the so-called ice scourge is also fuelling the resurgence by encouraging "hyper-sexual" promiscuity.

He said it was only a matter of time before amphetamines, and the new kind of sexual abandon they promoted, started to push up the heterosexual HIV rate, which until now has remained consistent at about 100 new infections a year.

"It obviously won't be a generalised heterosexual epidemic like Africa," said Prof Cooper, head of the National Centre for HIV Epidemiology and Clinical Research.

"But there will be consistent numbers of straight young people who will encounter the wrong partner due to these drugs and not take the appropriate precautions."

Another major problem is the growing HIV rate among indigenous Australians and the possibility it may soar through cross contact between the Northern Territory and PNG.

"We know there is movement across the Torres Strait and I think it's a serious threat to watch," says Prof Cooper, who supports increased screening in the Top End to monitor any spread.

As for solving the problem among gay men, experts are calling for harder-hitting targeted campaigns that use explicit language about sexual behaviour, something Prof Cooper said made funding authorities distinctly uncomfortable.

In the world of scientific research, preventing the disease is proving more difficult than treating it.

There are three major vaccines entering large-scale trials but the problem, said Prof Cooper, was that they don't actually prevent the infection.

Instead these so-called T-cell vaccines aim to block the progression of the disease and keep virus levels in a person low enough so that they don't infect someone else.

"What we really need is a preventative

vaccine," he said.

"That could be years off, who knows how long. A lot of people have ruined their reputation by trying to guess."

The real excitement comes from the field of anti-retroviral treatments, of which almost 30 are now available.

Showing the most promise is a new generation called integrase inhibitors, which help block the HIV virus infecting new cells.

The new drugs, which are soon to be approved by the US Food and Drug Administration, are more potent than their predecessors and have fewer side effects.

And aimed at a novel target, they have an advantage because they are less likely to face resistance at this point.

They have performed so well that US specialists want to see them given to high-risk groups before they even get the disease to minimise the chance of infection - a controversial move.

Prof Cooper said drugs like those and other breakthroughs had helped put eradication back on the agenda.

"It now may be possible to get the virus down to very, very low levels," he said.

"And there is also new gene technology and a new study where they were able to excise HIV out of the genome, which shows great promise."

But Dr Fauci is more measured in his outlook.

"If there is a person that we might ultimately cure it will be a very, very rare person," Dr Fauci said.

"I don't think cure is a common end point in infection because of the special nature of the virus and its ability to integrate itself into the genome of a cell where it becomes almost impossible to get rid of it."

"You can stop it multiplying and keep someone quite well for many, many years," Dr Fauci said.

"But so far we haven't even come close to truly eradicating it in anyone, and I think we should just stop talking about it."

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Source: www.thewest.com.au/

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