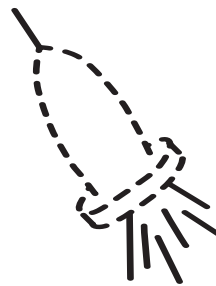
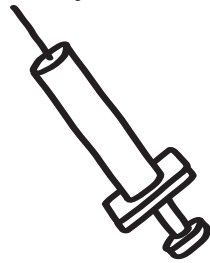


AIDS Vaccines: The Next Frontiers

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AVAC Report Executive Summary

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In this year's AVAC Report, our argument is simple:
The future is now.

The next several years will bring a variety of scenarios which we must not encounter unprepared. Instead, the AIDS vaccine field, together with other prevention research partners, must engage in rigorous debate, dialogue and scenario planning to anticipate the issues that the next few years will bring, and ensure that a wide range of stakeholders are informed and empowered to make decisions to compete against the virus.

Why do we say this? Why now?

Because:

- The next two to five years will bring results from a variety of ongoing trials, including the Thai prime boost trial, the test-of-concept studies of adenovirus-based AIDS vaccine candidates, several microbicide efficacy trials, as well as studies of male circumcision, treatment of herpes simplex virus type 2 to prevent HIV transmission or acquisition, pre-exposure prophylaxis and the female diaphragm as strategies for AIDS prevention. Each new finding means new choices, new messages, and new points of convergence and necessary collaboration among trial planners, public health program designers, and communities. The time to begin anticipating and discussing these challenges is now.
- The infusion of funding from the US National Institutes of Health and the Bill & Melinda Gates Foundation is meant to stimulate product development at the earliest stages, starting with critical investigations of immunology and early infection. The fruits of these labors—in terms of new products in the pipeline—will not be seen for several years. There is an urgent need now, though, to map out the pathway for the future: How do we ensure that there is sufficient clinical trials capacity, human resource development and community and political will for the “long haul”? How do we ensure that these new consortia generate new ideas, cross-fertilize each other and produce better candidates?

- The AIDS vaccine field can learn valuable lessons from other fields. Recent licensure of Gardasil™, Merck's HPV vaccine, provides the opportunity to explore issues of trial participation, access, delivery and funding for a vaccine targeted at a population which is also in urgent need of an AIDS vaccine: adolescent girls. There is no perfect model for AIDS vaccine delivery; but there is also no excuse for passing up the chance to collaborate on and learn from roll out of a vital public health tool for cancer prevention and sexual and reproductive health.

AIDS Vaccines: The Next Frontiers is the AIDS Vaccine Advocacy Coalition's first contribution to the scenario planning that we think is critical to the success of the field. In this year's report, we present four thought-provoking chapters, each of which begins with a future scenario that considers how the world might look in five or six or ten year's time. *The chapters include:*

**AIDS VACCINE SCIENCE, STRATEGY & ACTION:
The state of the field, the stakes for the future**

New infusions of funding into the field are being channeled to projects which aim to tackle one or more of the goals laid out in the Scientific Strategic Plan of the Global HIV Vaccine Enterprise. Each of the new projects aspires to greater coordination and a departure from “business as usual” in the arena of academic science and product development. How can advocates assess whether these efforts at collaboration are paying off? What are the top challenges facing the new Enterprise chief executive? And what about the areas of the plan that have not been funded to date?

REPORTS FROM THE FRONTLINES:

Learning from last year's clinical trials

More trials, more volunteers, more reports on what works and what doesn't work in the field. The past year has seen bold moves, some exciting successes, and some instructive setbacks in AIDS vaccine trials and prevention research as a whole. There is more conversation than ever about the need to build clinical trials capacity and to ensure that communities are authentic partners in the research process. How well is this happening “on the ground” and what can we do better?

SHOOTING PAST THE MOON



Why the space theme in this year's report? Actually, it's not the first time AVAC has had astronauts in its annual report. In the 1998 AVAC Report—the second one we ever issued—photos of the moon shot were used as a fitting analogy for the search for an AIDS vaccine. In 2006, we're revisiting the comparison, with a new perspective born of the past years' progress, challenges and discoveries. Our inspiration is longtime vaccine advocate Jose Esparza, who has pointed out that the search for an AIDS vaccine is a far greater challenge than sending a man to the moon. When it came down to the space race, we knew where we were. We knew where the moon was. And we knew, roughly, how to get there. It was,

essentially, an engineering problem. When it comes to an AIDS vaccine, we don't know where the moon is—yet. But that doesn't stop us for aiming for the heavens. As you'll see on the cover of this year's report, the spacemen and rockets morph into needles and target cells in the blink of an eye. It's our hope that careful planning and execution of the goals laid out in this report will help transform the search for an AIDS vaccine into an engineering problem whose solution will change the world.

THE EMERGING ADOLESCENT AGENDA: HPV vaccine, AIDS prevention research, and the new opportunities for reaching the young people of the world

Two years ago, in 2004, the AVAC Report examined the issue of adolescents and HIV vaccine research in its article, "The Missing Cohort." In light of new developments, including licensure of the first HPV vaccine and steps to involve young women and men in AIDS vaccine trials, we re-visit these issues, and discuss what it will take to make these elements coalesce into an ongoing, coordinated effort to improve health and reduce disease among the world's young people.

AIDS PREVENTION EVOLVES (AGAIN): Why we are on the verge of an era of new complexity
Microbicides, pre-exposure prophylaxis, herpes-simplex 2 treatment, male circumcision: the list of potential prevention interventions currently under investigation is long and varied. It is our great hope that all of these show

some efficacy, and that the arsenal of AIDS prevention tools expands accordingly. And if they do, this will mean new challenges for trials of AIDS vaccines, second-generation microbicides and other interventions, which may be more complicated—though no less necessary.

ALSO IN AIDS VACCINES: THE NEXT FRONTIERS

- Executive letter: Why now is the time to plan for the future and the critical role for advocates in this process
- The AIDS Vaccine Solar System: Understanding the cosmology of the Enterprise
- Current AIDS vaccine trials table
- AIDS at 25, HAART at 10, AIDS vaccine research at 20: A timeline of past, present and future events in the history of the epidemic

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The AIDS Vaccine Advocacy Coalition (AVAC)

To order this year's AVAC Report, *AIDS Vaccines: The Next Frontiers*, please e-mail us at avac@avac.org. Or fill in the tear-off sheet and mail it back to us. You can also download this year's Report (and see previous editions, too) at <http://www.avac.org/reports.htm>.



AIDS Vaccine Advocacy Coalition

For more information about AVAC, please contact us at:

Physical: 119 West 24th Street, 8th Floor, New York, NY 10011

Mailing: 101 West 23rd Street, Suite 2227, New York, NY 10011

Phone: +1-212-367-1279 Fax: +1-646-365-3452

E-mail: avac@avac.org

Internet: www.avac.org

Internet: www.aidsvaccineclearinghouse.org

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Consider this...

It is 2010... Have four years of CHAVI and Gates Foundation funding yielded an array of new vaccine candidates? Is the pipeline as broad as we had hoped it would be? Were AIDS vaccine advocates able to measure the pace of progress along the way?

It is 2011... Are the world's adolescent girls reaping the benefits of HPV vaccine programs? Are we reaching this high-need population with information, services, and opportunities to participate in clinical trials?

It is 2012... Can communities and researchers work together and learn from one another for trials that are bigger, costlier and more complex than ever before?

It is 2013... What does prevention look like now that there is an expanded prevention arsenal, including things like partially-effective microbicides and, perhaps, a first generation vaccine? How do we move on to test new and potentially better products?

THE AIDS VACCINE ADVOCACY COALITION (AVAC)

Founded in 1995, the not-for-profit AIDS Vaccine Advocacy Coalition (AVAC) is dedicated to accelerating the ethical development and global delivery of vaccines for AIDS. AVAC does not accept funding from government or the pharmaceutical industry. This publication and AVAC's continuous policy, advocacy, education and outreach work is made possible by the dedicated labor of AVAC advocates and support from Broadway Cares/Equity Fights AIDS, the Ford Foundation, the Bill & Melinda Gates Foundation, the International AIDS Vaccine Initiative, the Overbrook Foundation, Until There's a Cure Foundation, the WHO-UNAIDS HIV Vaccine Initiative, and many generous individuals who have become AVAC Members. AVAC is an IRS-certified 501(c)3 tax exempt organization, and donations are tax deductible.

