



Europe needs the HIV prevention pill now

Pre-exposure prophylaxis could slash HIV infections in our most vulnerable communities

Seattle, Tuesday 24 February 2015: The European AIDS Treatment Group (EATG), Europe's network of HIV activists and AIDES, a leading French NGO in the fight against AIDS and viral hepatitis, backed by 81 European HIV, LGBT civil society organisations and concerned actors, issued an urgent HIV Prevention Manifesto today. We demand that pre-exposure prophylaxis for HIV (PrEP) is made available as soon as possible within the European Union, and that Gilead, the company that makes the PrEP medicine Truvada®, submits an application to the European Medicines Agency (EMA) for a change of indication so that its use to prevent HIV can be approved.

Two studies of PrEP were today presented today at the Conference for Retroviruses and Opportunistic Infections (CROI) in Seattle, USA that demonstrated unprecedentedly high levels of effectiveness.

"In both of these studies, PrEP stopped 86% of the HIV infections that would otherwise have happened in the gay men who took it," said Brian West, Chair of EATG.

"But they also demonstrated that the rate of HIV infection in the particular populations these studies served was even higher than we had feared. In this situation, it becomes a moral and political imperative to offer PrEP to those who might need it, and to raise awareness of it as a possible HIV prevention method within those communities" said Bruno Spire, President of AIDES.

The HIV Prevention Manifesto emphasises that, as well as a providing a licence for PrEP, Europe needs urgently to consider how to pay for PrEP; and research needs to be conducted to find out which other populations might benefit from PrEP and how it can best be combined with other HIV and sexually transmitted infection (STI) prevention measures.

Read the HIV Prevention Manifesto at <u>www.eatg.org</u> <u>www.aides.org</u>

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Background:

Pre-exposure prophylaxis (PrEP) involves giving HIV-negative people HIV drugs – fewer than are needed for HIV treatment – in order to prevent HIV infection. A succession of studies starting in 2010 have shown that PrEP is effective in <u>gay men and transgender</u> women, in <u>heterosexual couples</u>, in <u>high-risk heterosexuals</u>, and in <u>injecting drug users</u>.

<u>Two other studies</u> – <u>both in mainly young African women</u> – failed to demonstrate any effect, due to low adherence in trial participants. This shows that providers of PrEP need to work

with people at high risk of HIV to ensure it is provided in a way that meets their needs and suits their lifestyle.

Now, two European studies of PrEP in gay men – the English PROUD study and the predominantly French IPERGAY study – have now demonstrated an effectiveness rate far higher than in any previous studies. By coincidence, these two very differently-designed studies both report effectiveness of xx% - in other words, that for every 20 HIV infections that would otherwise have occurred, PrEP stopped more than xx of them. They show that PrEP may be an effective and cost-effective way of preventing HIV in populations at very high risk of HIV. IPERGAY also showed that PrEP did not have to be taken every day but could just as effective if taken when people anticipated sex.

PrEP is not the answer to HIV infection for everyone. It is not cost-effective in populations at low or moderate risk of HIV infection, where methods such as condoms and lubricant remain the most effective way of preventing HIV. And, as other recent studies have shown and <u>as</u> <u>UNAIDS calculates</u>, the single biggest contributor to cutting HIV infections and ending the epidemic may be to extend HIV-treatment to as many people living with the virus as possible, as this drastically reduces their infectiousness at the same time as it improves their health.

The PROUD and IPERGAY studies are not the last word in innovative HIV prevention. Other drugs are being investigated and, as has also been shown at CROI, further innovative methods of stopping HIV infection are being developed such as topical microbicide gels that can be used during sex and vaginal rings that can be inserted monthly. However these studies represent a considerable advance in the development of new tools to prevent HIV.