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Activist Group Claims HIV Cure Is Closer Than Many Think

The AIDS Policy Project, in Philadelphia, has [issued a report](#) contending that a cure for AIDS may be closer to fruition than most people think, but that poor research funding is holding it back.

“Who knows exactly what’s going on with AIDS cure research?” ask Kate Krauss, Stephen LeBlanc and John James, the activists who wrote the report. They argue that most people outside of the research community don’t know how close we may be to a cure, nor how much funding is being spent toward a cure. This includes reporters, members of Congress and the public at large.

“Not even most AIDS activists, who assume that the cure is decades out of reach, [know what is happening],” they said. “And most importantly, not people with AIDS themselves, millions of whose lives are at stake.”

The authors define a cure as either completely eradicating HIV from the body or teaching the immune system to control the virus. Then they give an example of one person who apparently has already been cured. The man, who received a bone marrow transplant due to aggressive leukemia, was given cells that are naturally resistant to HIV. More than two years later, he still has no detectable HIV in his body. Research building on this case is already underway, along with a number of other approaches.

The report alleges, however, that funding for cure research at the National Institutes of Health (NIH) is about one fifth of what it should be. The authors analyzed funding at a number of different NIH institutes, including the National Institute of Allergy and Infectious Diseases (NIAID), where most HIV research takes place. They estimate that NIAID spent about \$41 million toward cure research last year. “The total AIDS spending of NIAID in 2009 was \$1.541 billion. Thus, NIAID spent less than 3 percent of its AIDS budget on cure research,” they note.

The authors recommend that cure-based research should be increased five-fold, to \$240 million by next year, and to \$600 million in five years, but they insist that other NIH funding should not be raided to pay for the increase. Rather, they are calling on Congress to increase the NIH budget by 20 percent, to \$37 billion next year, “to start to make up the funding gap from the past eight years.”

Beyond funding, the activists are also calling on the AIDS research community to spur innovation, to be more open to scientists working in other areas and to openly declare—to other researchers and to patients—that their goal is a cure.

The authors give a recent example where researchers in Philadelphia didn't tell prospective volunteers that a somewhat risky gene therapy study was ultimately focused on finding a cure for HIV. This Philadelphia study site couldn't find a single volunteer. Meanwhile, the authors recount, "A second study site, in San Francisco, explained the purpose of the study to patients and easily enrolled the same study, with a waiting list."

Throughout the report, the authors stress that a cure for HIV is not only possible, but even within reach—provided that proper funding can be achieved. And therein lies the problem. As they state: "Whether there is the political power from the advocacy community to compel this funding is an open question.

"But if we can properly fund this research and researchers are given opportunities to work together and share data, if we encourage innovators," they conclude, "we have a real chance of finding a permanent cure for AIDS. Soon."