



FOR IMMEDIATE RELEASE

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**FINAL STUDY RESULTS PROVIDE DEFINITIVE SCIENTIFIC EVIDENCE
TO SUPPORT EARLIER INITIATION OF HIV TREATMENT**

New Data Support the Broad and Earlier Use of ARVs for Treatment and Prevention

Additional Research Provides New Insights on Non-Daily Use of PrEP

Vancouver, British Columbia, Canada (20 July 2015) – Final results from two landmark studies bolstered the scientific case for initiating HIV treatment soon after diagnosis, and an additional study shed new light on the non-daily use of pre-exposure prophylaxis (PrEP) among diverse populations at high risk for HIV. The research was presented today in an official press briefing at the 8th IAS Conference on HIV Pathogenesis, Treatment and Prevention (IAS 2015) in Vancouver.

“IAS 2015 will be remembered as the definitive moment when the world agreed earlier initiation of treatment is the best way to preserve the health of people living with HIV, and one of the best tools we have to slow HIV transmission to others,” said **Julio Montaner**, IAS 2015 Local Co-Chair and Director of the British Columbia Centre for Excellence in HIV/AIDS. “The new data presented today will inform HIV treatment guidelines worldwide, and inspire governments, funders and health systems to act to save millions more lives.”

Research and other highlights from today’s briefing include:

Final data from the START study demonstrate the multiple benefits of early HIV treatment: For the first time, **Jens Lundgren** of the University of Copenhagen presented full results of the Strategic Timing of Antiretroviral Treatment (START) study, which was halted in May 2015 after preliminary data showed significant health benefits of earlier initiation of HIV treatment, regardless of the state of an individual’s immune health. START is the first large-scale randomized clinical trial to establish that all individuals with HIV have a considerably lower risk of developing AIDS or other serious illnesses when they begin treatment right away after diagnosis. The final results released today have important implications for the way HIV antiretroviral therapy is used worldwide. *[No abstract; detailed results will be presented at the press briefing on site in Vancouver.]*

Session: The Strategic Timing of Anti-Retroviral Treatment (START) Study: Results and Their Implications (Ballroom A; Monday 20 July, 11:00 – 12:30)

Ten-year results of HPTN 052 show dramatic and durable reductions in transmission: HPTN 052 Protocol Chair **Myron Cohen** of the University of North Carolina at Chapel Hill presented the final results of the landmark HPTN 052 study, finding that the risk of sexual transmission of HIV was dramatically reduced for the duration of the ten-year study among individuals whose infections were well suppressed by therapy. HPTN 052 included 1,171 HIV serodiscordant couples in Malawi, Zimbabwe, South Africa, Botswana, Kenya, Thailand, Brazil and the U.S. The new data confirms the significant “treatment as prevention” benefit to early

ART for HIV prevention that was previously reported in 2011. *[Summary based on submitted abstract; updated data may be presented on site.]*

Abstract: Final results of the HPTN 052 randomized controlled trial: Antiretroviral therapy prevents HIV transmission

Session: TasP: Just Do It (Ballroom C-D; Monday 20 July, 11:00 – 12:30)

New findings on PrEP dosing strategies: HPTN 067 Protocol Chair **Robert Grant** of the Gladstone Institutes presented study results from the ADAPT study, which evaluated the feasibility of PrEP using daily, time-driven and event-driven dosing. The study of more than 500 participants was conducted among heterosexual women in Cape Town, and men who have sex with men (MSM) and transgender women in Bangkok and the Harlem neighbourhood of New York City. The new data provided new insights into the adherence to daily versus non-daily PrEP use, as well as patterns of sexual activity among women and MSM – with significant implications for PrEP rollout among heavily affected populations. *[No abstract; detailed results will be presented at the press briefing on site in Vancouver.]*

Session: How Would You Like Your PrEP? (Ballroom C-D; Monday 20 July, 14:30 – 16:00)

Preview of new WHO ARV Guidelines: The growing body of evidence on the health and prevention benefits of earlier treatment initiation for HIV-infected individuals, as well as evidence for the use of antiretrovirals to prevent new HIV infections, have led the World Health Organization (WHO) to embark on an extensive review and updating of the global health agency's guidelines for ARV use. The new guidelines will help shape HIV treatment and prevention for years to come. WHO HIV Director **Gottfried Hirnschall** previewed the new guidelines currently in development, and their implications for individuals, health systems and the future of the epidemic.

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About IAS

Founded in 1988, the International AIDS Society (IAS) is the world's largest association of HIV professionals, with members from more than 180 countries. IAS members work on all fronts of the global response to AIDS and include researchers, clinicians, policy and programme planners, and public health and community practitioners.

About IAS 2015

The 8th IAS Conference on HIV Pathogenesis, Treatment and Prevention (19-22 July, Vancouver) is the leading scientific meeting on HIV. IAS 2015 brings together a broad cross section of more than 6,000 HIV professionals from around the world, with a focus on moving science into practice.

IAS 2015: Join the Conversation

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- We are tweeting – [@IAS_conference](#) and [@iasociety](#) – and hope many of you will tweet along with us, using **#IAS2015** to keep the conversation going.
- Like IAS 2015 on [Facebook](#) – and stay in touch with the latest conference updates and developments.
- Check us out on Instagram to see photos as they are happening! <https://instagram.com/iasociety/>

- Tell us why you're following IAS 2015 and what matters most to you. Join the IAS Conference on HIV Pathogenesis, Treatment and Prevention group on LinkedIn. You are welcome to start new discussions and add your comments to existing threads.

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