December 2007

Opinion: TB striking back with a vengeance; need for research funds grows urgent

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CAPE TIMES (SOUTH AFRICA)
NOVEMBER 9, 2007

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ANTIRETROVIRAL PROJECT

New HIV Drugs for 2007

This has been a banner year for new antiretroviral drugs, with two unique medications now available in pharmacies. Maraviroc (Selzentry, from Pfizer) is the first oral drug approved to protect cells from HIV gaining entry. Raltegravir (Isentress, from Merck) is the first approved HIV drug to prevent the virus from inserting its DNA into the genome of the host T-cell. These two potent drugs are especially important because they work against HIV that has become resistant to many conventional drugs. People who have long battled drug resistance are reporting they are able to suppress the virus and are getting their T-cells up for the first time in a decade.

TAG staffers have been involved in the development process for these drugs at nearly every step. TAG’s Tracy Swan served on the FDA advisory committee that weighed the evidence on raltegravir and recommended its approval.

DEAR FRIENDS OF TAG,
I am excited to share with you some of Treatment Action Group’s amazing accomplishments during 2007. This has been a time of growth and change as we added new Board member Greg Hoffman, and two staff members, Sue Perez and Claire Wingfield. You will find profiles of all three inside, along with reports from TAG’s work on the front lines of anti-HIV drug research, vaccine setbacks, advances in TB/HIV activism—particularly in Africa—and TAG’s HCV/HIV Coinfection Project. We could not have accomplished this work without your support. Inside you will also find ideas for several ways to support TAG: joining TAG’s Board, becoming a major donor, or simply stepping up your current level of support. Thank you for joining TAG’s important work.

Barbara Hughes
President, Board of Directors

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PIPELINE REPORT

TAG Reports on New Drugs in Development

The TAG 2007 annual review of drugs and prevention technologies in the development pipeline was widely distributed at the International AIDS Society conference in Sydney, Australia, this summer. In addition to covering HIV treatment and vaccine candidates, the report called attention to the sluggish pipeline for new drugs to treat tuberculosis, the leading killer of people with HIV worldwide. Hepatitis C drug development was especially active in 2007 and TAG is already planning an interim update to reflect recent changes in that field.

Written by Bob Huff, Mark Harrington, and Richard Jefferys, this year's report was produced in a handy new format and featured easy-to-read capsule reviews of the drugs and products most likely to make a difference to people living with HIV over the next few years. As always, copies were snapped up by conference-goers and taken home. The booklet has already been translated into Portuguese, Russian, and Indonesian. All of TAG's publications may be freely copied for nonprofit use. A copy can be found on TAG's website.

Palm HIV Basic Science Project

Dark Days for Vaccines

The world of HIV vaccine research was dealt a setback in September when the HIV Vaccine Trials Network announced that it had canceled the largest, most promising, and most advanced clinical trial of a vaccine candidate designed to boost immunity to HIV. The gloom deepened when it was revealed that there was a chance that the vaccine had actually made participants more vulnerable to HIV infection. This story is still unfolding, and TAG's Richard Jefferys, Coordinator of the Michael Palm Basic Science, Vaccines, and Prevention Project, has been illuminating the facts and providing blow-by-blow commentary on his respected and widely read HIV pathogenesis and prevention blog on the Web. Richard's analysis is must reading for anyone interested in the scientific progress toward finding a vaccine and a cure for HIV infection. You can link to the blog from TAG's homepage at www.treatmentactiongroup.org

TB/HIV Project

First African TB/HIV Activists Training Meeting

TAG's TB/HIV Advocacy Program, led by Javid Syed and Claire Wingfield in New York, along with TAG's partner organization, ICW East Africa in Kampala, Uganda, sponsored the first training meeting aimed at fostering a new generation of African activists to focus on TB as well as HIV. The meeting was a major milestone in year one of TAG's unique program, funded by the Bill and Melinda Gates Foundation. Nearly 40 activists met in Kampala for a four-day session focusing on TB treatment and diagnosis, research methodology, and activist strategies. Participants wound up by setting goals for their advocacy work when they returned home. TAG plans to sponsor three major TB/HIV activist trainings per year over the next three years.

Hepatitis C/HIV Coinfection Project

TAG Tackles HCV from NYC to Thailand

Hepatitis C coinfection is a threat to health, quality of life, and survival of HIV-positive people worldwide. In 2007, TAG's Hepatitis C/HIV Coinfection Project continued to fight for access to HCV prevention, care and treatment, both internationally and domestically.

At two landmark meetings, Tracy Swan, the Project's Director, urged domestic and international regulators to require that new hepatitis C drugs are studied in coinfected people as soon as it is safe to do so, rather than after their approval. New guidelines for hepatitis C drug development are expected in 2008.

"This work requires a comprehensive strategy," says Swan. "An important part is getting information out to other activists, researchers, policy makers, health care providers, and, most important, people living with HIV and hepatitis C." Thus, the Project added a new publication, Guide to Hepatitis C for People Living With HIV, to continue the push for better HCV prevention, care, and treatment from all directions. The guide highlights an emerging international epidemic of sexually transmitted hepatitis C infections among HIV-positive gay men.

On the international front, the Project has been at work in Thailand and Spain, where HCV coinfection is rampant. Earlier this year, Swan helped develop the advocacy agenda for a new multinational coinfection activist network.

In Thailand, the Project is working in partnership with the Thai Treatment Action Group, to support Thai HIV advocates in their demands for hepatitis C prevention, education, diagnostics, care, and treatment.
common TB diagnostic—the microscope test, introduced in 1882—fails to detect a large percentage of cases and more expensive tests are unavailable in many developing countries.

Neglect, poorly funded TB programmes and lack of quality health services have fuelled the emergence of drug-resistant strains of the bacteria. TB is the leading killer of people with HIV, and TB’s deadly interaction with HIV is devastating communities.

Like SARS and avian flu, the uncontrolled spread of drug-resistant TB also poses a potentially devastating threat to global health and economic growth. Only a few months ago, an international panic was created when an American lawyer boarded a plane with what was thought to be XDR-TB.

The spectre of potential nightmare scenarios such as these will grow if XDR-TB is left unchecked.

Yet, despite the XDR-TB threat, a new report released this week shows that, worldwide, government funding for TB research declined last year.

Between 2005 and 2006, funding from governments for TB research fell from $259 million to $244m.

The United States considers drug-resistant TB to be a potent bio-terror threat. Yet last year, the US National Institutes of Health, the world’s largest health research investor and a leader in TB research, cut funding for TB by $8m. Funding from European countries was also stagnant.

The world is failing to keep its promises on TB. Last year, world leaders agreed to adopt the Global Plan to Stop TB: 2006–2015, which made a commitment to increase funding for TB research to $900m a year.

The plan was announced with enthusiasm at the World Economic Forum in Davos, endorsed by the United Nations General Assembly special session on HIV/AIDS in June 2006, embraced by the G8 in July 2006 and ratified by the World Health Assembly in May 2007.

Yet, the year the Global Plan was adopted, the top 40 research donors worldwide spent only $413m on TB research—half a billion dollars less than the Global Plan’s own targets.

If basic science, operational research and a comprehensive research response to XDR-TB are factored in, the Treatment Action Group estimates the total need is closer to $2 billion a year, five times the current amount.

In the short term, there is some good news, mainly from the Bill and Melinda Gates Foundation, which increased its support for TB research from $58m to $94m in 2006.

But funding from philanthropies, while filling many current gaps and helping to push a few new products through the pipeline, cannot rescue the world from the lack of sufficient public sector investment, which is responsible for most TB research and development worldwide.

New money is urgently needed to develop new vaccines, drugs and diagnostics to treat TB. With drug-resistant TB emerging, decades of neglect have put us back to square one. It will take many years for new TB vaccines to be proved effective.

We know investing in research can yield lifesaving breakthroughs—like the almost 30 new anti-HIV drugs discovered and brought to market since 1987. Millions of people now benefit from these recent discoveries.

But, unlike HIV, the world has largely ignored TB.

In the long run, the public sector must be willing to pay to expand basic TB science and develop clinical trial infrastructure in order to ensure lasting progress. The private sector must also increase its investment in TB research.

We are living in a time of potentially great scientific accomplishments, but what is missing is commitment to make those advances a reality.
Funds for TB Drugs Rise only Slightly

CAPE TOWN NOVEMBER 7, 2007

“Funding for the development of new treatments for tuberculosis scarcely rose last year... according to a study to be issued today.”

“Support from governments declined in 2006. It was only due to extra funding from private donors and pharmaceutical companies that overall financing increased marginally from $393m in 2005, says the study produced by the Treatment Action Group, an AIDS think-tank.”

“Governments around the world have failed to deliver on promises they made only a year ago,” said Mark Harrington, the executive director of TAG, speaking at an annual conference on TB held for the first time in South Africa.”

Thousands Gather at TB Meet in S. Africa

CAPE TOWN NOVEMBER 7, 2007

“In a report issued Wednesday, the New York based advocacy Treatment Action Group accused the United States and other donor nations of backsliding on commitments made last year to step up the fight against TB.”

“Mark Harrington, executive director of the Treatment Action Group, said that with the U.S. budget problems and overspending in Iraq, TB wasn’t “even on the radar” of the Bush administration.”

“The Treatment Action Group said the lack of funding was especially alarming given the global spread of multidrug resistant (MDR-TB) and extensively drug-resistant TB (XDR-TB), which was identified in 2006 and is now present in more than 40 countries.”

March to End TB

Cape Town, South Africa
November 8, 2007

Left: Open Society Institute (OSI) public health watch director Cynthia Eyakuze and TAG’s Javid Syed at the TB march in Cape Town. Center: South African marchers demand “We need patient TB literacy and community education.”

Right: TAG’s Sue Perez and Claire Wingfield flanking UK and Canadian Parliamentarians Doug Naysmith and Lee Richardson. Photos MH
TAG’s New Federal Policy Director Sue Perez

Sue Perez comes to TAG from the global tuberculosis and TB/HIV advocacy world. Her time as a Peace Corps volunteer in a small northern city in Côte d’Ivoire in West Africa was a life-changing experience. As a Peace Corps volunteer Sue collaborated with staff at a local hospital and an alternative girls’ school to design a health education curriculum that covered topics such as malnutrition, dehydration, HIV/AIDS, malaria, and hygiene. Upon returning to the U.S., Sue landed in Washington, D.C. and took a job supporting political development programs in West Africa at the National Democratic Institute for International Affairs before returning to global health work at RESULTS Educational Fund (REF) where she was exposed to advocacy and TB issues. At REF, she researched United States Agency for International Development (USAID) spending for TB and microcredit in India, advocated for greater funding for TB by the U.S. government and the World Bank, and was part of the team that developed the Bill and Melinda Gates Foundation–funded Advocacy to Control TB Internationally (ACTION) project. Sue studied international relations and environmental policy at Boston University and has a Masters in Public Health from the George Washington University.

Asked what she hopes to see TAG accomplish in the future, Sue says, “I just attended my first coalition meeting on hepatitis C and was astonished not only by the low level of federal resources committed, but also by the lack of national surveillance for HCV. The resources committed to TB are also inadequate. The current tools we have to diagnose and treat TB are unacceptable but even more unacceptable is the lack of political priority and resources dedicated to developing new tools. I’ll be working hard to ensure that TAG is a visible presence and influential voice in the Washington, D.C. policy making and legislative arenas on all of our issues.”

Sue Perez, TAG’s Federal Policy Director, with her son, Ashe.

TAG’s New TB/HIV Project Coordinator Claire Wingfield

This February TAG welcomed Claire Wingfield to its TB/HIV Advocacy Project, where she has spearheaded developing curriculum and training materials for TAG’s TB/HIV activist training program. The first training, held in Kampala, Uganda, this September, was a resounding success.

Claire Wingfield’s work has addressed HIV/AIDS from multiple perspectives. Claire began her career by providing direct services to people with HIV in New York, working first for the HIV Unit of South Brooklyn Legal Services and then for Housing Works, a community-based organization providing supportive services to homeless people with HIV/AIDS. Claire went on to the National AIDS Treatment Advocacy Project, where she developed and conducted HIV treatment education sessions at community-based organizations throughout New York City.

From 2000 to 2004, Claire worked for the Asian and Pacific Islander Wellness Center (A&PIWC) in San Francisco. As the statewide treatment education project coordinator, she oversaw the transition of a tri-county HIV treatment education program into a statewide initiative. Claire developed and edited curricula for HIV educational programs, and provided training and technical assistance to people working in communities of color along the continuum of HIV services.

Since becoming Treatment Action Group’s TB/HIV Project Coordinator in early 2007, Claire has focused on developing TAG’s TB/HIV activists tool kit and trainings, which are intended to prepare activists from around the world to more effectively influence TB/HIV policy at the national and global levels. Through this work Claire is helping to shape the global TB/HIV activist agenda and bring about urgently needed change.

Claire holds a Master of Public Health degree in Community Health Education from the University of Maryland.
Join TAG’s Board

TAG is always seeking new board members. If you are looking for a great place to invest your time and talents, please call Barbara Hughes, TAG Board President, to learn more about Board opportunities with TAG.

212 253 7922
barbara.hughes@treatmentactiongroup.org

TAG’S NEWEST BOARD MEMBER

GREGORY H. HOFFMAN

Greg is a native New Yorker, born and raised in Manhattan; he loves New York City and all it has to offer. He lives in Hell’s Kitchen with his partner, Brad Jones, and their two-year-old son, Hayes. Greg works as legal counsel for LiveCareer, an Internet company that helps provide people with the best tools to make important career and educational decisions at key points in their lives.

Before joining LiveCareer, Greg worked for AT&T in San Francisco and New York handling a variety of litigation, regulatory, and transactional matters. Greg worked for Proskauer Rose LLP in New York as a litigation associate for five years immediately after he finished his clerkship with the Honorable Anne E. Thompson, a federal judge in New Jersey.

Outside of work, Greg has a long history of involvement in the nonprofit sector. He has chaired the Duke Alumni Advisory Admissions Committee for the New York City area; chaired the Corporate Committee for Miracle House, an organization providing housing to individuals who come to New York to care for loved ones with HIV/AIDS and cancer; served on the Board of Directors of Academy of Friends, a nonprofit in San Francisco that raises and distributes funds to local Bay Area HIV/AIDS organizations; and served on and as chair of various New York State Bar and American Bar Association committees. Greg joined the Board of TAG in May 2007 after learning about the organization through a close friend. He is very excited about contributing to TAG and helping the organization achieve its goals.

Greg’s greatest passions are his family, his community, and physical fitness and nutrition. He also loves to travel, having spent time in Australia, India, Indonesia, Thailand, Europe, and South America.

Greg is a graduate of the University of Southern California Law Center and Duke University, where he majored in German and Public Policy Studies.

TAG BE INVOLVED

About TAG

Treatment Action Group is an independent AIDS research and policy think tank fighting for better treatment, a vaccine, and a cure for AIDS. TAG works to ensure that all people with HIV receive lifesaving treatment, care, and information. We are science-based treatment activists working to expand and accelerate vital research and effective community engagement with research and policy institutions. TAG catalyzes open collective action by all affected communities, scientists, and policy makers to end AIDS.

Program areas include antiretroviral treatments, basic science, vaccines, prevention, hepatitis C, and tuberculosis.

How to Contribute

TAG welcomes donations from individuals who want to see the AIDS research agenda remain responsive to the needs of all people living with HIV.

TAG is a not-for-profit organization founded in 1992 and based in New York City.

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