RESEARCH INTO COMMUNITY PERSPECTIVES ON HIV CURE SCIENCE

PROPOSED OUTLINE

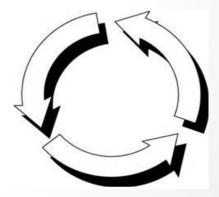
- Panobinostat + alpha-interferon HIV cure study update: *Lynda Dee*
- Overview of community-based research; U.S. survey results: Karine Dubé
- Perceived risks/benefits of HIV cure research: Jeff Taylor/Laurie Sylla
- MDC focus groups: Laurie Sylla
- Upcoming community based research: David Evans
- Discussion and Q&A

PANOBINOSTAT + INTERFERON CURE STUDY UPDATE

Lynda Dee

COMPETING STAKEHOLDER ROLES IN RISKY CURE RESEARCH HEALTHY VOLUNTEERS WITH MANY SAFE & EFFECTIVE OPTIONS:

FOOD AND DRUG ADMINISTRATION CLINICAL RESEARCHERS & SPONSORS COMMUNITY ADVOCATES



FDA IND APPROVAL SAFETY AND EFFICACY



RESEARCHERS IND APPROVAL NO DELAYS



NOVARTIS PANOBINOSTAT FULL FDA APPROVAL



ROLE OF THE COMMUNITY

ETHICAL RESEARCH

CONDUCTED EXPEDITIOUSLY



- PANOBINOSTAT (FARYDAK): HIGHLY TOXIC/RISK OF HEART ATTACKS
- ONLY APPROVED AS SECOND LINE THERAPY IN CANCER PATIENTS
- PANOBINOSTAT & INTERFERON
- **RISK OF HEMORRAGING**
- ETHICAL IN HEALTHY PATIENTS?
- PROCEED EXPEDITIOUSLY?

- COMPROMISE REACHED BY RESEACHERS AND THE FDA
- Stress echocardiograms to r/o clinically unsuspected cardio issues
 - Standard stress test
- Single, one week course of panobinostat +/-IFN
 Three of four courses spaced four weeks apart

- COMPROMISE REACHED BY RESEACHERS AND THE FDA
 - o 20 mg dose, the approved dose
 - Cohort 1: n=8, 5 mg (6 with INF and 2 without INF)
 - Cohort 2: n=8, 10 mg (6 with INF and 2 without INF)
 - Cohort 3: n=15, 15 mg (10 with INF and 5 without INF)
 - 20 mg after the FDA reviews data from all three cohorts
- PROTOCOL UPDATE

• No safety issues to date: Proceeding to Cohort 2

THANKS

○FDA

ODAN KURITZKES

ORICHARD JEFFERYS

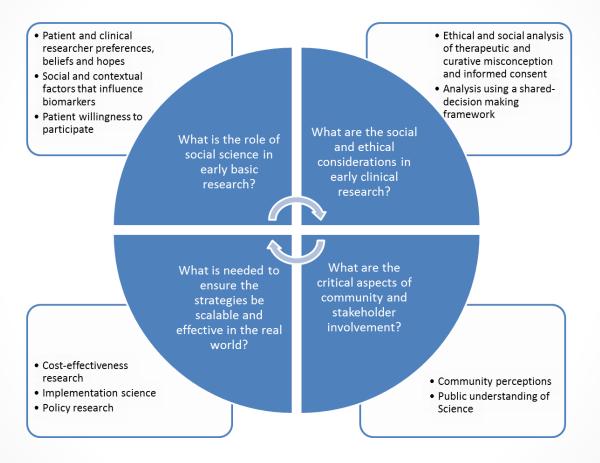
RESEARCH INTO COMMUNITY PERSPECTIVES ON HIV CURE SCIENCE



Karine Dubé



INTEGRATING THE BIOMEDICAL AND SOCIAL SCIENCES AGENDA AROUND HIV CURE



Grossman CI *et al.* Towards a Multi-Disciplinary HIV Cure Research. Integrating Social Science with Biomedical Research *Trends in Microbiology* 2016



ORIGINAL RESEARCH

Journal of Virus Eradication 2017; 3: 40-50

Willingness to participate and take risks in HIV cure research: survey results from 400 people living with HIV in the US

Karine Dubé¹*, David Evans^{2,3}, Laurie Sylla⁴, Jeff Taylor⁵, Bryan J Weiner^{1,6}, Asheley Skinner^{1,7}, Harsha Thirumurthy¹, Joseph D Tucker^{8,9}, Stuart Rennie¹⁰ and Sandra B Greene¹

¹ University of North Carolina Gillings School of Global Public Health, Chapel Hill, NC, USA
² Delaney AIDS Research Enterprise (DARE) Community Advisory Board (CAB), Los Angeles, CA, USA
³ Project Inform, Los Angeles, CA, USA
⁴ defeatHIV CAB, Seattle, USA
⁵ Collaboratory of AIDS Researchers for Eradication (CARE) CAB, Palm Springs, USA
⁶ Department of Global Health, University of Washington, Seattle, WA, USA
⁷ Duke Clinical Research Institute (DCRI), Durham, NC, USA
⁸ UNC Project China, Guangzhou, China
⁹ UNC Institute of Global Health and Infectious Diseases (IGHID), Chapel Hill, NC, USA
¹⁰ Department of Social Medicine, UNC Bioethics Center, Chapel Hill, NC, USA

QUALITATIVE DATA ANALYSIS

• KEY INFORMANT INTERVIEWS (N = 36):

- ◆ 12 persons living with HIV (PLWHIV) (≥ 18 years old; 7 males, 5 females; from survey subset)
- 11 clinician-researchers (8 academic centers in the United States; various HIV cure research modalities)
- 13 policy-makers/bioethicists/regulators of HIV cure research (from different agencies)

• FOCUS GROUPS (N = 11):

- 4 in Seattle area (Laurie Sylla): women, LT survivors, Latino gay men, young adults
- ✤ 2 in Los Angeles (David Evans): women and mixed
- ✤ 2 in San Diego/Palm Springs (Jeff Taylor): women and older MSM
- 3 in North Carolina (Karine Dubé): 2 mixed (mostly African-Americans); 1 couple



RESEARCH ARTICLE

'Well, It's the Risk of the Unknown... Right?': A Qualitative Study of Perceived Risks and Benefits of HIV Cure Research in the United States

Karine Dubé¹*, Jeff Taylor², Laurie Sylla³, David Evans^{4,5}, Lynda Dee⁶, Alasdair Burton⁷, Loreen Willenberg⁸, Stuart Rennie⁹, Asheley Skinner^{1,10}, Joseph D. Tucker^{11,12}, Bryan J. Weiner^{1,13}, Sandra B. Greene¹

1 University of North Carolina Gillings School of Global Public Health, Chapel Hill, NC, United States of America, 2 Collaboratory of AIDS Researchers for Eradication (CARE) Community Advisory Board (CAB), Palm Springs, CA, United States of America, 3 defeatHIV CAB, Seattle, WA, United States of America, 4 Delaney AIDS Research Enterprise (DARE) CAB, Los Angeles, CA, United States of America, 5 Project Inform, Los Angeles, CA, United States of America, 6 AIDS Action Baltimore, Baltimore, MD, United States of America, 7 Multi-Decadal, Multi-CAB Member, Glendale, CA, United States of America, 8 Zephyr Long-Term Non-Progressors (LTNP) Foundation, Inc., Sacramento, CA, United States of America, 9 Department of Social Medicine, UNC Bioethics Center, Chapel Hill, NC, United States of America, 10 Duke Clinical Research Institute (DCRI), Durham, NC, United States of America, 12 UNC Project China, Guangzhou, China, 13 Department of Global Health, University of Washington, Seattle, WA, United States of America

MDC Focus Groups Laurie Sylla

MDC FOCUS GROUPS MOST IMPORTANT PERCEIVED BENEFITS



- Helping find a cure (soc 4-14X)
- Feel good contributing to cure research (ind. 3-6X)
- Helping others with HIV in future (soc 4-5.5X)
- Free lab work (ind 3-5.5X)

FACTORS AFFECTING WILLINGNESS FOCUS GROUP DATA



- Incentives
- Compensation
- Study procedures
- Study risks
- Childcare/transportation/food
- Inclusion/exclusion criteria
- Safety plan
- Clear, informed consent

- Research Team
 - Trustworthy
 - Respected research institution
 - Respectful of participants
 - Culturally competent
 - Multi-lingual
 - Accessible 24 hours
 - Tend to participant mental health
 - See whole person
 - Trauma-informed
 - Non-stigmatizing

FUTURE RESEARCH INTO COMMUNITY PERSPECTIVES ON HIV CURE RESEARCH David Evans

FUTURE SOCIAL SCIENCES RESEARCH

| Table 4. Future potential social sciences questions to infor | rm study participation in biomedical HIV cure-related research |
|--|---|
| Meanings of cure | |
| What are the various meanings of HIV cure research and regulators' perspectives? | d how can we reconcile patient-participants, clinician-researchers and policy-makers/ |
| What are the various meanings of 'success' in HIV cure | research (including intermediate outcomes)? |
| What do potential participants understand about HIV or | ure research and how does that affect their willingness to participate? |
| Role of altruism | |
| What role do altruism, expectations, optimism and hope | e play in HIV cure research participation? |
| Research with prospective study participants | |
| How do demographic characteristics (such as age, gender, socio-economic status, nationality) relate to HIV cure understanding, acceptability and willingness to participate? | |
| How do people undersand the purpose and risks of HIV | cure studies? |
| How does people's perceptions and experiences of their | r own health impact their willingness to assume risk in HIV cure studies? |
| Discrete choice experiments borrowing from economic, research decision making (e.g. anchoring, judmental he | cognitive psychology and decision-making literature – what are common trends in HIV cure uristics and defaulting to patterns)? |
| How can we increase recruitment of women and under | Research with actual study participants |
| Would asking for long-term follow-up of study partic participants feel better? | Would collaboration from biomedical HIV cure scientists, either retrospectively or prospectively as part of actual HIV cure studies (e.g. nested social sciences research), be required? What does HIV cure research mean for quality of life outcomes (such as Short-Form-36 Health Survey)? |
| How can we begin to study therapeutic (or curative) | What factors predict retention (or serial participation) in HIV cure studies? |
| What motivations to join HIV cure studies are ethicall | Research with study decliners (more difficult) |
| How does long-term survival with HIV affect willingn | What are some of the reasons that cause people living with HIV to decline participation in HIV cure research? |
| What factors affect willingness to participate in studie | Research with clinician-researchers and policy-makers |
| What ractors arrect withingness to participate in stude | How do clinician-researchers and policymakers view risks in HIV cure research? |
| | Research ethics questions What is an acceptable risk-benefit balance for potential HIV cure study participants? |
| | |
| | Are there groups who are more vulnerable than others in HIV cure research? |
| | How can HIV cure researchers best measure effective management of scientific uncertainty? |

ACKNOWLEDGMENTS

We thank the study participants!

David Evans, DARE CAB Jeff Taylor, CARE CAB Laurie Sylla, defeatHIV CAB Lynda Dee, AIDS Action Baltimore



















THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL