

August 13, 2019

The Honorable Roy Blunt  
Chairman  
Appropriations Subcommittee for  
Labor, Health and Human Services,  
Education, and Related Agencies  
U.S. Senate  
Washington, DC 20510

The Honorable Patty Murray  
Ranking Member  
Appropriations Subcommittee for  
Labor, Health and Human Services,  
Education, and Related Agencies  
U.S. Senate  
Washington, DC 20510

Dear Chairman Blunt and Ranking Member Murray:

On behalf of the Federal AIDS Policy Partnership's Research Working Group, we write to request your support for programs that advance HIV/AIDS research in your Fiscal Year (FY) 2021 Labor, Health and Human Services, Education, and Related Programs Appropriations bill. The Research Work Group (RWG) of the Federal AIDS Policy Partnership (FAPP) is a coalition of more than 60 national and local HIV/AIDS research advocates, patients, clinicians and scientists from across the country. Our goal is to advance and support U.S. leadership to accelerate progress in the field of HIV/AIDS research. The House LHHS subcommittee report included a \$37 million increase for HIV research as part of a FY 2021 budget request level of \$3.1 billion for HIV/AIDS research and at least \$47 billion for the NIH. The FAPP RWG urges the subcommittee to add to that increase to include funding of \$149 million, but not less than \$37 million, for HIV research at the NIH. We also strongly support, as part of the Ending the HIV Epidemic initiative, the House LHHS subcommittee request for \$61 million for the NIH Centers for AIDS Research.

A \$37 million increase for HIV research at NIH falls far short of the \$769 million in promising research priorities, identified by the NIH Office of AIDS Research in its most recent FY 21 Professional Judgment Budget, that remain unfunded. These priorities include reducing incidence through vaccines, more effective treatments, HIV cure research, addressing the relationship between HIV and aging, as well as HIV co-morbidities research involving opioid co-epidemics, viral hepatitis, tuberculosis and cancer. In FY 2020, the House LHHS subcommittee recommended an increase for HIV funding of \$149 million, and we have endorsed that request as a partial downpayment on the research need that OAR has identified.

Public investments in health research via NIH have paid enormous dividends in the health and wellbeing of people in the U.S. and around the world, particularly for people living with, or vulnerable to, HIV. NIH-funded AIDS research has supported innovative basic science for better drug therapies, and evidence-based behavioral and biomedical prevention interventions which have saved and improved the lives of millions. NIH funding has contributed to over 210 approvals for a range of novel therapeutics between 2010 through 2016, with new antinfectives for HIV and HCV receiving the second largest fraction of those approvals. Additionally, NIH support was crucial in the development of pre-exposure prophylaxis (PrEP), a significant and groundbreaking HIV prevention tool that is upwards of 99% effective in preventing sexual transmission.

The area where investment in HIV research is showing its critical value is in NIH work in developing a COVID-19 vaccine. Though an HIV vaccine has yet to be licensed, years of painstaking work by the NIH to develop vaccines for HIV are now making possible the record-breaking timelines that researchers aspire to for the development of COVID-19 vaccines. Various DNA, messenger RNA (mRNA), viral vector and antibody-based vaccine approaches, or “platforms”, that are currently in advanced development for HIV are simultaneously being deployed in COVID-19 vaccine candidates. For example, Janssen’s Ad26 HIV vaccine, currently in two HIV vaccine efficacy trials, is being quickly adapted as a COVID-19 vaccine candidate. Several other developers are exploring vaccines based on genetic material known as mRNA, which are also being studied for HIV. NIH researchers and research networks are applying their skills and researches to developing a COVID-19 vaccine. This pivot of staff and resources justifies the modest \$37.0 million increase in HIV research in the House LHHS subcommittee request.

A meaningful commitment towards maintaining the U.S. pre-eminence in HIV research and fostering innovation cannot be met without prioritizing the research investment at NIH that will lead to tomorrow’s lifesaving vaccines, treatments and cures that are needed to end the HIV epidemic here and abroad. We look forward to a world in which HIV is even more treatable, preventable and, ultimately, curable – and eventually to one in which we can end the epidemic through a robustly funded science-based agenda. Your commitment brings us closer to that day, and we extend our thanks to you.

Sincerely,

AIDS Action Baltimore  
AIDS Foundation of Chicago  
AIDSUnited  
amfAR  
AVAC  
Elizabeth Glaser Pediatric AIDS Foundation  
HIV Medicine Association  
Housing Works  
IRMA  
International AIDS Vaccine Initiative  
National Alliance of State and Territorial AIDS Directors  
NMAC  
The AIDS Institute  
Treatment Action Group