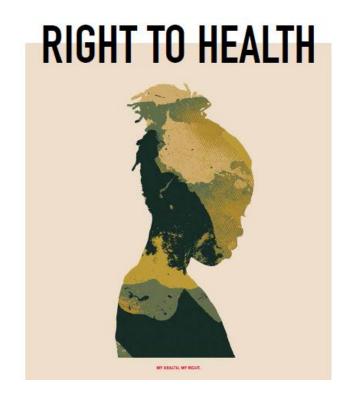
Women and HIV Cure Research





Monica Gandhi MD, MPH
Professor of Medicine, UCSF
Medical director, "Ward 86" HIV
Clinic, San Francisco General
Hospital

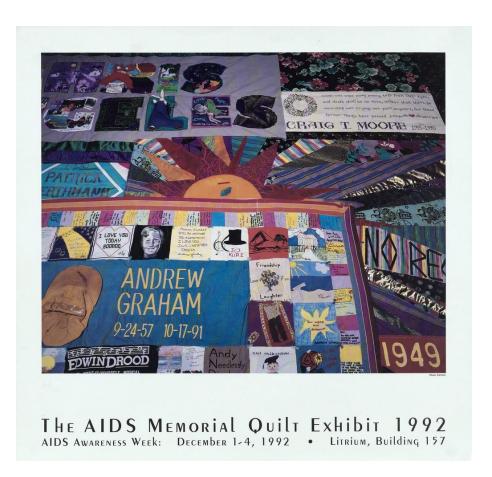
Director, UCSF Center for AIDS Research (CFAR)

Saturday, March 8, 2025
San Francisco AIDS Foundation
940 Howard Street
San Francisco, CA 94103



Objectives of talk

- HIV epidemic in women
- Women and men are not the same
- Under-representation of women in trials including cure
- How to address

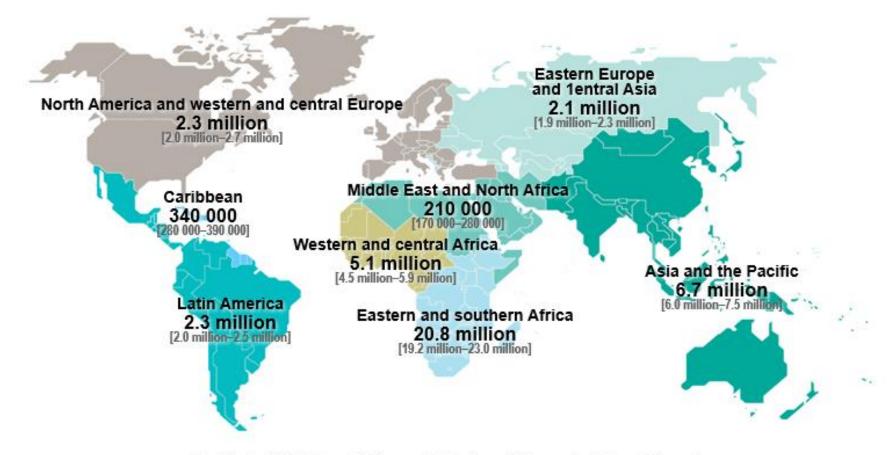




What percentage of the HIV infections worldwide are in women?

- 1. 25%
- 2. 35%
- 3. 40%
- 4. 53%
- 5. 60%

Adults and children estimated to be living with HIV | 2023



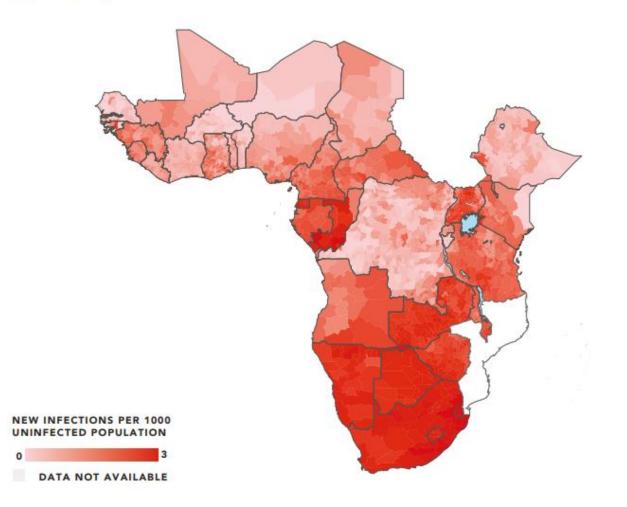
Total: 39.9 million [36.1 million-44.6 million]

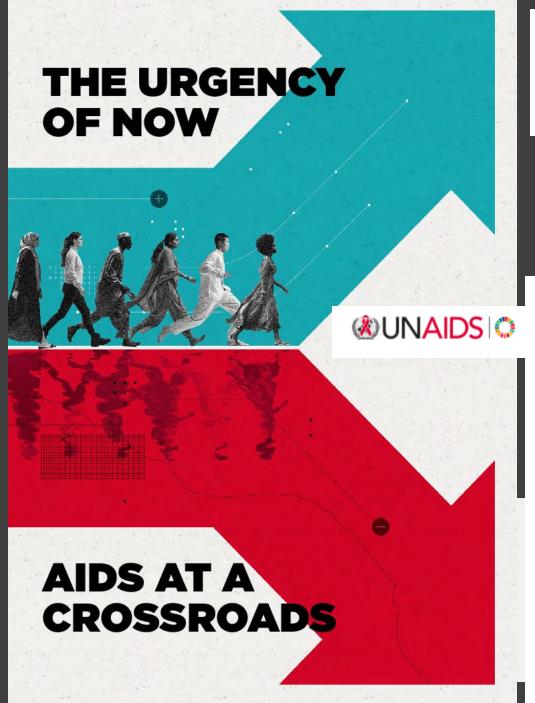




Every three minutes in 2023, an adolescent girl or young woman was newly infected with HIV

FIGURE 0.7 HIV incidence among adolescent girls and young women (aged 15–24 years), subnational levels, sub-Saharan Africa, 2021





Is HIV epidemic control by 2030 realistic?

THE LANCET

Chris Beyrer, Georgia D Tomaras, Huub C Gelderblom, Glenda E Gray, Holly E Janes, Linda-Gail Bekker, Gregorio Millett, Giuseppe Pan Susan Buchbinder. Lawrence Corev

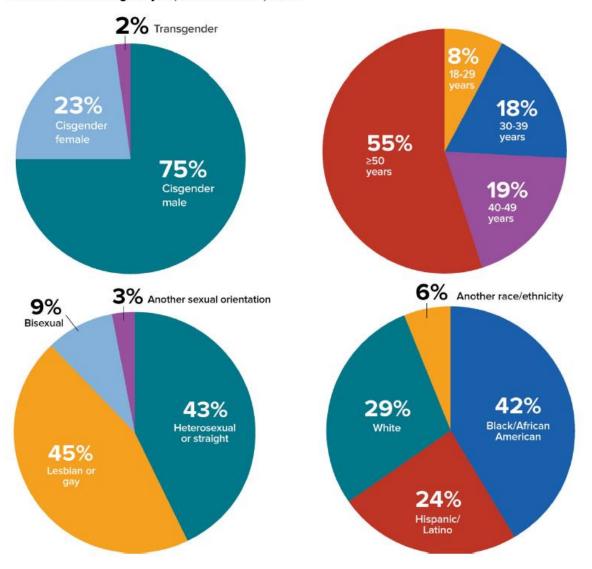
"HIV doesn't cause AIDS (it is poppers)" has been resurfacing but major threat to control...so is cutting off funding

UNAIDS update 2024 (AIDS at a Crossroads):

- 39.9 million people with HIV (highest) not counting Russia so probably >40 million
- 1.3 million new infections last year unchanged from 2022 update
- 630K deaths last year unchanged from 2022 update
- 43.3 million deaths total from beginning of epidemic and 88.4 HIV infections
- Only 77% on ART (72% suppressed)
- Stigma, rise of anti-LGBTQ sentiment, 8% loss of funding from 2020-23 playing roles

Women remain at around one-quarter of cases in the U.S.

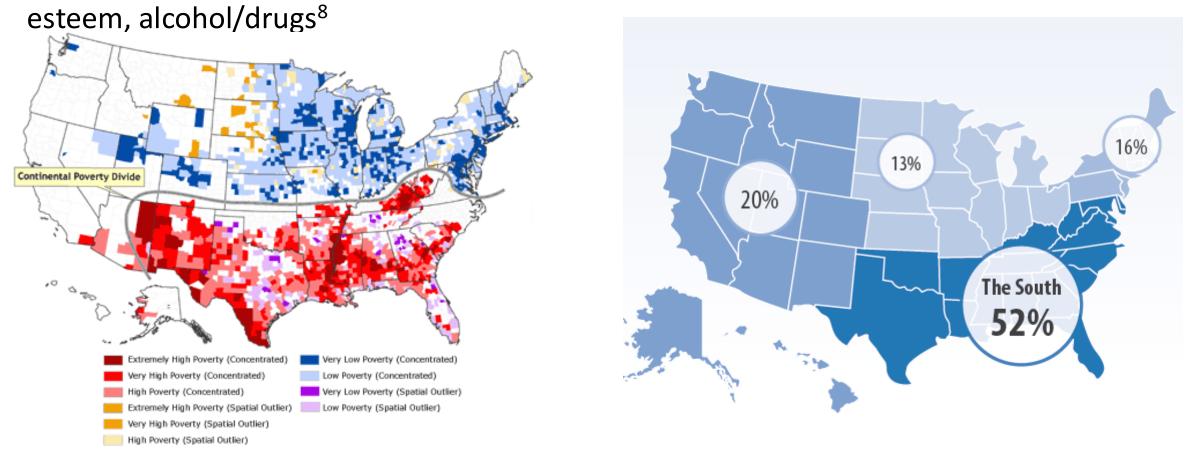
Figure 2. Distribution of gender, age, sexual orientation, and race/ethnicity among adults with diagnosed Medical Monitoring Project, United States, 2020





Risks in U.S. women cluster with poverty, disempowerment

• HIV in women clusters with poverty^{1,2}; interpersonal violence³; incarceration⁴⁻⁷; self-



¹Amidora. STDs 2006; ²CDC Surveillance 2011; ³Wyatt. Am J Public Health 2002; ⁴Doherty. JAIDS 2009; ⁵Doherty. Am J Public Health 2007; ⁶Adimora. Am J Public Health 2007; ⁷Khan. J Urban Health 2009; ⁸Forna. J Natl Med Assoc. 2006

Women are different than men – different prevention modalities for instance

WHO recommends the dapivirine vaginal ring as a new choice for HIV prevention for women at substantial risk of HIV infection

26 January 2021 | Departmental news | Reading time: 2 min (644 words)

Notably, intermittent PrEP (2:1:1, on demand) with TDF/FTC and daily TAF/FTC to date only approved for men



Vews

About HIV

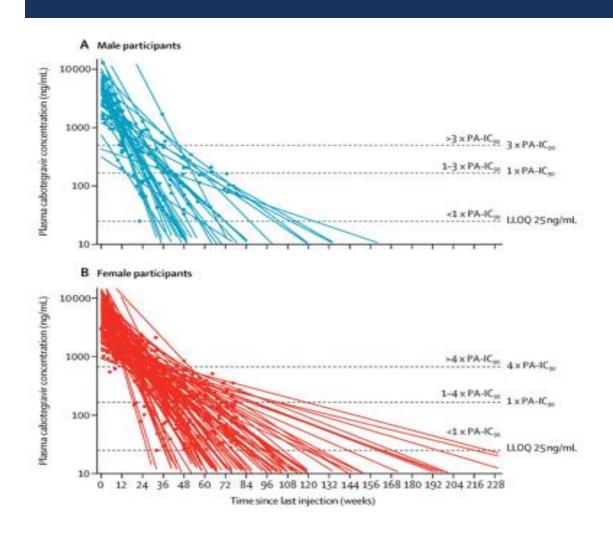
Vaginal rings & topical PrEP

US regulator's decision on vaginal ring denies choice to women who need HIV prevention

Roger Pebody | 6 September 2022 | Estimated reading time 5 minutes



CABOTEGRAVIR LA TAIL IS LONGER IN WOMEN THAN MEN- DIFFERENCE IN PHARMACOKINETICS



 Median time to undetectable cabotegravir is longer in women at 66.3 weeks (range 17.7 to 182) when compared to 42.7 weeks (range 20.4 to 134) in men



Landovitz R. Lancet HIV. June 2020





Twice-Yearly Lenacapavir or Daily F/TAF for HIV Prevention in Cisgender Women

L.-G. Bekker, M. Das, Q. Abdool Karim, K. Ahmed, J. Batting, W. Brumskine, K. Gill, I. Harkoo, M. Jaggernath, G. Kigozi, N. Kiwanuka, P. Kotze, L. Lebina, C.E. Louw, M. Malahleha, M. Manentsa, L.E. Mansoor, D. Moodley, V. Naicker, L. Naidoo, M. Naidoo, G. Nair, N. Ndlovu, T. Palanee-Phillips, R. Panchia, S. Pillay, D. Potloane, P. Selepe, N. Singh, Y. Singh, E. Spooner, A.M. Ward, Z. Zwane, R. Ebrahimi, Y. Zhao, A. Kintu, C. Deaton, C.C. Carter, J.M. Baeten, and F. Matovu Kiweewa, for the PURPOSE 1 Study Team*

ABSTRACT

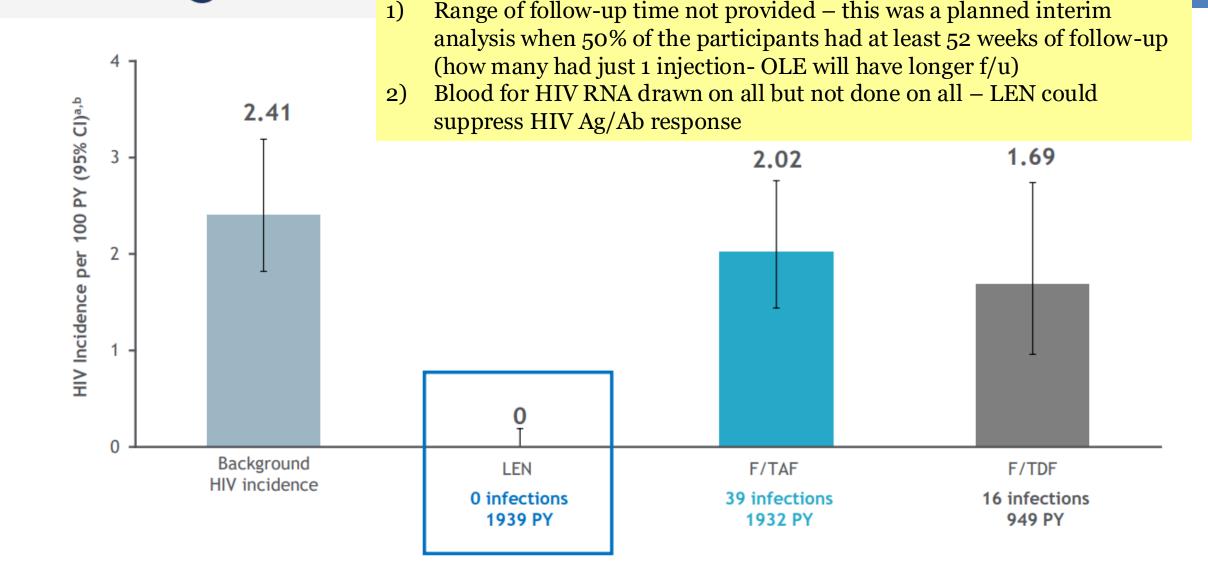
BACKGROUNI

Twice-Yearly Lenacapavir or Daily Oral Emtricitabine/Tenofovir Alafenamide for HIV Prevention in Cisgender Women: Interim Analysis Results from the PURPOSE 1 Study

Linda-Gail Bekker, MBChB, PhD, on behalf of the PURPOSE 1 Study Team
The Desmond Tutu HIV Centre, University of Cape Town, Cape Town, South Africa

Zero HIV Infections in Cisgender Women receiving LEN

Two caveats:





September 12, 2024

Gilead's Twice-Yearly Lenacapavir for HIV Prevention Reduced HIV Infections by 96% and Demonstrated Superiority to Daily Truvada[®] in Second Pivotal Phase 3 Trial

- 99.9% of Participants Did Not Acquire HIV Infection in the Lenacapavir Group, with 2 Incident
 Cases Among 2,180 Participants –
- PURPOSE 2 Trial Results for Cisgender Men and Gender-Diverse People Add to the Body of Evidence for the Investigational Use of Lenacapavir for HIV Prevention –
- Gilead Stopped the Blinded Phase of the Trial at Interim Analysis and Will Offer Open-I abel

 Lenacapavir to All Participants -

February 18, 2025

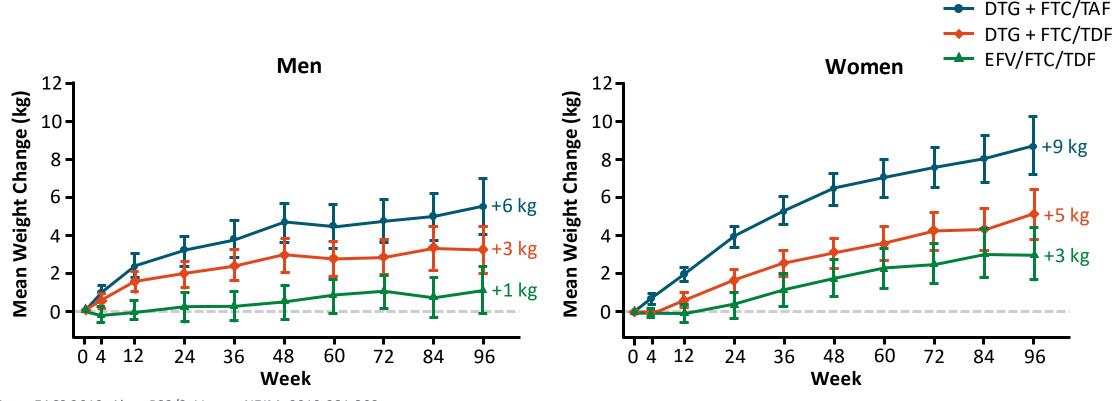
U.S. FDA Accepts Gilead's New Drug Applications for Twice-Yearly Lenacapavir for HIV Prevention Under Priority Review ORIGINAL ARTICLE

Twice-Yearly Lenacapavir for HIV Prevention in Men and Gender-Diverse Persons

C.F. Kelley, M. Acevedo-Quiñones, A.L. Agwu, A. Avihingsanon, P. Benson, J. Blumenthal, C. Brinson, C. Brites, P. Cahn, V.D. Cantos, J. Clark, M. Clement, C. Creticos, G. Crofoot, R.S. Diaz, S. Doblecki-Lewis, J.A. Gallardo-Cartagena, A. Gaux R. Grinsstein, S. Hassler, L.C. Hingings, T. Hodge, R. Kaplan, A. Gaux R. Grinsstein, S. Hassler, L.C. Hingings, T. Hodge, R. Kaplan, R. Grinsstein, S. Hassler, L.C. Hingings, T. Hodge, R. Kaplan, R. Grinsstein, S. Hassler, L.C. Hingings, T. Hodge, R. Kaplan, R. Grinsstein, S. Hassler, L.C. Hingings, T. Hodge, R. Kaplan, R. Grinsstein, S. Hassler, L.C. Hingings, T. Hodge, R. Kaplan, R. Grinsstein, R. Grin

Women are different than men in terms of weight changes on INSTIs (ADVANCE study: Mean Weight Change by Sex up to 96 weeks)

 Greater weight increase with DTG vs EFV, with TAF vs TDF; plateau in weight gain after Week 48 observed in men but not in wome



McCann. EACS 2019. Abstr PS3/3. Venter. NEJM. 2019;381:803.



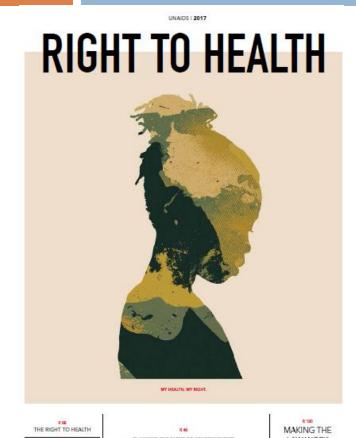
Price point Gilead puts on LEN will determine a lot for Medicaid formulary in US

The Guardian

HIV drug could be made for just \$40 a year for every patient

Generic version of a drug already on the market, which can suppress and prevent HIV, would still yield 30% profit if the current price was slashed, researchers say

Half of all HIV infections globally are in women yet...



- Women still underrepresented in clinical trials of new HIV medications
 - Elvitegravir¹ and Bictegravir² (latter published 2017) both with <15% women in pivotal start studies
- Only 8.3% of participants enrolled in cure studies are women³
- When women are at the table to plan trials (e.g. important GRACE study⁴), women are enrolled

U.S. Department of Health and Human Services
Food and Drug Administration
Center for Drug Evaluation and Research (CDER)
Center for Biologics Evaluation and Research (CBER)

Designing Drug Trials: Considerations for Pregnant Women

April 2018 Clinical/Medical Revision 1

Jeanne S. Sheffield,¹ David Siegel,² Mark Mirochnick,³ R. Phillips Heine,⁴ Christine Nguyen,⁵ Kimberly L. Bergman,⁶ Rada M. Savic,⁷ Jill Long,⁸ Kelly E. Dooley,⁹ and Mirjana Nesin⁸

Pregnant Women:
Scientific and Ethical
Considerations for
Inclusion in Clinical Trials
Guidance for Industry

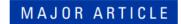
Clinical Infectious Diseases



Women are different than men

- Immune systems actually different clear virus (Hepatitis C) better and before ART, lower HIV viral loads
- Mount stronger immune responses to measles, Hepatitis A, Hepatitis B, and COVID-19 vaccinations
- Sex steroids can influence susceptibility to a range of pathogens (like Chlamydia in the genital tract after progesterone)= implications for transgender women as well and also throughout the menstrual cycle and life cycle

Clinical Infectious Diseases

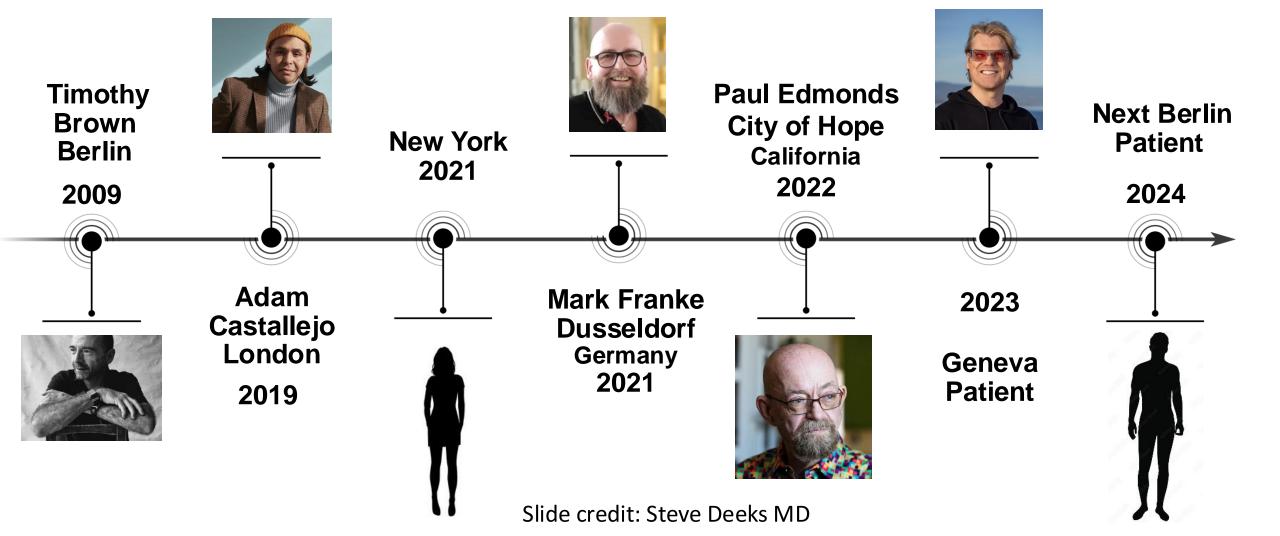






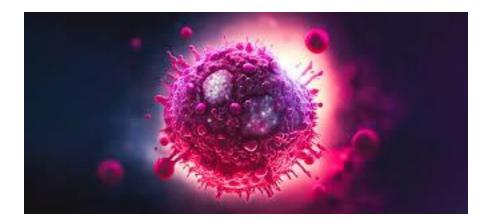


Impact of Tamoxifen on Vorinostat-Induced Human Immunodeficiency Virus Expression in Women on Antiretroviral Therapy: AIDS Clinical Trials Group A5366, The MOXIE Trial We have cured at least seven people with allogenic stem cell transplants, providing some inspiration that this is at least feasible- maybe more in women but still only one



Why do we need a cure in an era of effective ART?

- Human costs
 - Stigma/discrimination
 - Long-term health: Co-morbidities, polypharmacy
 - Multi-drug resistance
 - Life-long adherence to therapy
- Public health costs
 - ART is lifelong and expensive: Total spent on HIV/AIDS: ~ \$50 billion/year
 - Social disruptions affect access (COVID, PEPFAR)
 - Despite massive investments, many not on effective ART (~23% adults, ~43% children)



Slide credit: Steve Deeks MD

The New York Times

These Words Are
Disappearing in the New
Trump Administration

assigned at birth diversify racial identity inequity assigned female at birth diversifying injustice racial inequality assigned male at birth diversity institutional racial justice at risk enhance the diversity intersectional racially barrier enhancing diversity intersectionality racism barriers environmental quality key groups segregation belong equal opportunity key people sense of belonging bias equality key populations biased equitable Latinx sexual preferences biased toward equitableness LGBT sexuality biases equity LGBTO social justice biases towards ethnicity marginalize sociocultural biologically female excluded marginalized socioeconomic exclusion biologically male men who have sex with status BIPOC expression stereotype mental health Black female stereotypes minorities breastfeed + people females systemic minority feminism breastfeed + person systemically most risk chestfeed + people fostering inclusivity they/them MSM chestfeed + person GBV trans multicultural clean energy gender transgender climate crisis gender based transsexual Native American climate science gender based violence trauma non-binary commercial sex worker gender diversity traumatic nonbinary community diversity gender identity tribal oppression gender ideology community equity unconscious bias oppressive confirmation bias gender-affirming care underappreciated orientation cultural competence genders underprivileged people + uterus Gulf of Mexico cultural differences underrepresentation people-centered care cultural heritage hate speech underrepresented person-centered cultural sensitivity health disparity underserved person-centered care culturally appropriate health equity undervalued polarization culturally responsive hispanic minority victim political DEI historically victims pollution DEIA identity vulnerable populations pregnant people DEIAB immigrants women pregnant person DEIJ implicit bias women and pregnant persons underrepresented disabilities implicit biases

Conclusion

- HIV is still a major worldwide epidemic
- Horrible changes in global health funding, threats to NIH funding, language and stigmatizing attacks are threatening progress
- We need a cure
- Women are different than mens
- With more than half of all people with HIV being women, we need to enroll women in clinical trials