



CAPRISA

CENTRE FOR THE AIDS PROGRAMME OF RESEARCH IN SOUTH AFRICA



CAPRISA IS A UNAIDS COLLABORATING CENTRE FOR HIV PREVENTION RESEARCH

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In this issue...

Our front page story provides a summary of Professor Salim Abdool Karim's keynote address at M2012 on the lessons learned from the tenofovir gel trials.

The impact of social constraints to TB healthcare is the subject of CAPRISA's regular research coverage on page 2.

Women in Pietermaritzburg exercise their constitutional right to march to appeal for post-trial access to tenofovir.



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Lessons learned from tenofovir gel trials

In his keynote address at the Microbicides 2012 Conference, Professor Salim Abdool Karim gives insights on how the lessons learned from the landmark CAPRISA 004 trial will put HIV research in good stead going forward.

Two years after the momentous announcement of the CAPRISA 004 tenofovir gel trials, Professor Salim Abdool Karim shared his key learnings with delegates during his keynote address at the M2012 Conference in Sydney.

"We have learned several lessons from CAPRISA 004 about conducting large HIV prevention trials, about women's risk factors for HIV infection and the correlates of HIV protection.

"Our experiences with CAPRISA 004 and results of other HIV prevention trials have shown the need for dogged persistence, the need to develop diverse approaches and to be prepared for surprising results."

Amongst some of the challenges faced during the trial, he highlighted the essential rule of promoting and measuring adherence. He stated that active engagement in communities was the key to achieving better adherence, and as a consequence better results, during trials.

According to the Professor, a turning point had been reached in terms of scientific developments, bringing us one step closer to



Professor Salim Abdool Karim shares his experiences from the 004 trial with delegates at the M2012 opening session.

the objective of zero new infections.

"We're in a better place now than we've ever been in the fight to find new ways to prevent HIV among young women. And we know that we can change the trajectory of the epidemic if we can change the HIV incidence rates in young women".

See page 2 for CAPRISA papers presented at M2012.



Social challenges in TB/HIV coinfecting limit access to proper healthcare

In the research paper entitled: *Social constraints to TB/HIV healthcare: Accounts from co-infected patients in South Africa*, the authors concluded that a contextualized understanding of the social challenges associated with TB/HIV healthcare is needed to inform more patient-sensitive and socially responsive interventions against the co-epidemic.

The CAPRISA researchers highlighted how social inequalities can affect health decisions around disclosure, adherence, and retention in medical care.

Interviews were conducted with TB-HIV co-infected adult patients who were part of a larger study. The emerging themes highlighted critical sociomedical constraints to TB/HIV care in relation to patients' income and employment, eligibility for social assistance and antiretroviral treatment, fears around illness disclosure, social and material support, and treatment adherence.



Patients at the CAPRISA eThekwinic clinic receive counselling and information about their TB treatment.

Patients' healthcare experiences were bound by their poor access to essential resources, multiple life responsibilities, disparate gender roles, limits within the healthcare system, and the stigmatising social symbolism of their illness.

The implications of this study for health care included a need for:

- Consideration of the individual socio-economic circumstances of TB/HIV co-infected patients;

- More sensitive employer support during a patient's leave of absence;
- Improved government-based social assistance for vulnerable patients in the informal labour market.
- Expedited access to antiretroviral treatment, regardless of CD4 counts, in line with current World Health Organization recommendations for TB and HIV co-treatment.
- Dissemination of up-to-date guidelines for TB and HIV co-treatment patients and health care workers in TB, HIV and primary healthcare clinics.

For further reading see:



Daftary A, Padayatchi N. Social constraints to TB/HIV healthcare: Accounts from coinfecting patients in South Africa. AIDS Care 2012.

DOI: 10.1080/09540121.2012.672719

Continued from page 1

M 2012
CAPRISA PAPERS PRESENTED AT M2012

POSTER PRESENTATIONS

Design challenges in clinical trials assessing the effectiveness of pre-exposure prophylaxis or microbicides in preventing HIV infection (#77) - *Ms Anneke Grobler*

Baseline prevalence of Human Papilloma Virus infection in women participating in the CAPRISA 004 Tenofovir gel trial in KwaZulu-Natal, South Africa (#136) - *Dr Ayesha Kharsany*

ORAL PRESENTATIONS

Biological mechanisms and efficacy (Session 5) - *Prof Salim Abdool Karim*

Use of computerised dispensing in the VOICE (MTN 003) trial (Session 26) - *Ms Bhavna Maharaj*

1% tenofovir gel use in chronic hepatitis B virus carriers: results from the CAPRISA 004 trial (Session 45) - *Ms Cheryl Baxter*

Baseline renal abnormalities in MTN-003-CAPRISA eThekwinic CRS: public health implications for future rollout of tenofovir-based PrEP (Session 45) - *Ms Anushka Naidoo*

Hepatitis B virus prevalence: implications for a tenofovir-based HIV prevention strategy (Session 50) - *Dr Gonasagrie Nair*



CAPRISA M2012 delegates. Left to right: Wendy Mkhize, Bhavna Maharaj (back), Judith Annakie-Eriksen, Ayesha Kharsany (back), Leila Mansoor, Gonasagrie Nair, Anushka Naidoo, Anneke Grobler, Cheryl Baxter



Women march for access to HIV-prevention gel

On Thursday 26 April 2012 about 500 women took to the streets in Pietermaritzburg, South Africa, to bring attention to the challenges being faced by South African women to reduce their HIV risk. They demanded access to the HIV prevention gel for previous research participants who wish to have access to it. The march, which was organised by Zimnandi Zonke, a local NGO in KwaZulu-Natal, handed over a memorandum to CA-



PRISA researchers that calls for access to the HIV prevention gel they believe reduces the risk of contracting HIV.

World TB Day outreach to patients and learners

On Monday 26 April, the **Prince Cyril Zulu Communicable Disease Clinic** (PCZCDC) hosted an awareness day for its patients to mark World Tuberculosis Day.

Dignitaries representing provincial and local government, the clinic, research partners and the community were in attendance at the busy clinic to observe this important day in the wellness calendar.

Whilst assuring patients of their continued support to provide treatment interventions, the main speakers also appealed to patients to help remove the stigma attached to TB by speaking openly about the illness.

They were also encouraged to seek

medical help quickly and to ensure that they complete their treatment programmes, though arduous. Testimonies were also given by two former TB patients who had diligently adhered to their course of treatment and had been cured of TB.

Stop TB in my lifetime was the slogan adopted for CAPRISA's community outreach event at **Siyabonga High School** in Durban.

The 1500 learners watched a presentation of different forms of edutainment, including poetry, drama, traditional dancing and choral music, which helped to convey important messages about recognising TB symptoms, having check-ups, treatment adherence,



Dr Nesri Padayatchi at PCZCDC

Cured TB patient, Ms Hazel Msweli



Siyabonga School learners wearing "Stop TB in my lifetime t-shirts

Dr Hankins joins AIGHD

The Amsterdam Institute for Global Health and Development (AIGHD) announced the appointment of Dr Catherine Hankins as Deputy Director, Science.

Amongst her new responsibilities are overseeing HIV prevention research, scientific knowledge translation, participation in programme evaluation and policy development.



Gates Foundation visits CAPRISA



Left to right: Dr Trevor Mundel, president for Global Health at the Bill and Melinda Gates Foundation (BMGF), Mr David Allen, BMGF's South Africa representative, and CAPRISA's Dr Nesri Padayatchi during a tour of CAPRISA's eThekweni Clinic in Durban.

Desh Archary, PhD

In April, Deseree Archary earned her PhD with her study on *Neutralising antibody responses and viral evolution in a longitudinal cohort of HIV subtype C-infected antiretroviral-naïve individuals*.

Dr Archary is a post-doctoral investigator at CAPRISA.





UNIVERSITY of the WESTERN CAPE



THE AURUM INSTITUTE

CAPRISA is an official research institute of the University of KwaZulu-Natal and Columbia University.

CAPRISA was established in 2002 through a CIPRA grant from the NIH, as a multi-institutional collaboration, incorporated as an independent non-profit AIDS Research Organization

Registration Number: 2002/024027/08

Research papers published in 2012

- 5# Sista ND, **Abdool Karim Q**, Hinson S, Donnell D, Eshleman, Vermund SH. Development of an international network for clinical research: Experience of the HIV Prevention Trials Network HPTN. *Clinical Investigation*. 12/2011; 1:1609-1618
- 6 **Kharsany AMB**, Mlotshwa M, **Frohlich JA**, Yende zuma N, **Samsunder N**, **Abdool Karim SS**, **Abdool Karim Q**. HIV prevalence among high school learners—Opportunities for schools-based HIV testing programmes and sexual reproductive health services. *BMC Public Health* 2012, 12:231 doi:10.1186/1471-2458-12-231
- 7 Pahuja M, **Grobler A**, Glesby MJ, Karim F, Parker G, Gumede S, **Naidoo K**. Effects of a reduced dose of stavudine on the incidence and severity of peripheral neuropathy in HIV-infected adults in South Africa. *Antivir Ther*. 2012 Mar 13. doi: 10.3851/IMP2087. [Epub ahead of print]
- 8 **Gengiah TN**, **Baxter, Mansoor LE**, **Kharsany ABM**, **Abdool Karim SS**. A drug evaluation of 1% tenofovir gel and tenofovir disoproxil fumarate tablets for the prevention of HIV infection. *Expert Opin. Investig. Drugs* (2012) (Early Online):1-21
- 9 Latka MH, fielding K, Gray GE, Bekker L-G, Nchabeleng M, **Mlisana K**, Nielson T, Rou S, Mkhize B, Mathebula M, Naicker N, de Bruyn G, Kublin J, Churchyard GJ, on behalf of the HVTN 503. Phambili study team. Pregnancy incidence and correlates during the HVTN 503 Phambili HIV Vaccine Trial Conducted among South African women. *PLoS One* 7(4): e31387. doi:10.1371/journal.pone.0031387.
- 10 Daftary A, **Padayatchi N**. Social constraints to TB/HIV healthcare: Accounts from coinfecting patients in South Africa, *AIDS Care* 2012. DOI: 10.1080/09540121.2012.672719

continued from previous newsletter

Scientific Reviews

Abstracts submitted for review		Manuscripts submitted for review		Ancillary studies submitted for review	
Total#	Cumulative [^]	Total#	Cumulative [^]	Total#	Cumulative [^]
6	278	2	212	4	33

for month, [^] since committee initiation

Conference & Workshop Reminders

Conference	Dates	Deadlines		
		Abstracts	Registration	Website
3rd SA TB Conference	12-15 Jun 2012	20 Jan 2012	18 May 2012	http://www.tbconference.co.za/
AIDS 2012	22-27 Jul 2012	15 Feb 2012	3 May 2012	http://www.aids2012.org
Tuberculosis 2012	11-15 Sept 2012	15 June 2012	15 June 2012	http://www.pasteur.fr/infosci/conf/sb/tuberculosis2012/index.html