At Opening of XVIII International AIDS Conference, Scientific, Community and Political Leaders Applaud Recent Progress Toward Universal Access and Urge Continued Momentum to “Finish What We’ve Started”

Protection of Human Rights, Widespread Use of Evidence-based Interventions and Sustained Financing Highlighted as the Three Pillars of Success

18 July 2010 [Vienna, Austria]—Encouraged by recent progress but wary of signs of possible retrenchment, an estimated 20,000 participants from more than 185 countries have assembled in Vienna for the start of the XVIII International AIDS Conference (AIDS 2010) today. Under the theme of Rights Here, Right Now, experts described the state of the epidemic, noting the central role of human right protections to success, and outlined the critical choices facing world leaders in the year ahead.

“For the first time since the development of lifesaving treatments for HIV there is evidence of game-changing scenarios demonstrating that sustained and widespread access to antiretroviral treatment can save lives and help reverse the epidemic,” said Dr. Julio Montaner, AIDS 2010 Chair, President of the International AIDS Society and Director of the B.C. Centre for Excellence in HIV/AIDS in Vancouver, Canada. “At this promising moment, we must stay the course.”

Vienna was chosen as the host city for AIDS 2010 in part due to its proximity to Eastern Europe and Central Asia (EECA), a region with a growing epidemic fueled primarily by injecting drug use. Conference delegates will examine the epidemic in EECA, as well as in all other regions. Home to two-thirds of all people living with HIV and AIDS, Southern Africa remains the most heavily affected region globally.

In a strong show of local support, Austrian President Heinz Fischer and Minister of Health Alois Stöger welcomed delegates. Other speakers included: South African Deputy President Kgalema Motlanthe; European Union Commissioner of Health and Consumer Policy John Dalli; and community representatives Vladimir Zhovtyak and Alexandra (Sasha) Volgina, from Ukraine and Russia, respectively. Youth activist Rachel Arinii Judhistari from Indonesia, UNAIDS Executive Director Michel Sidibé and singer/songwriter/activist and UNAIDS International Goodwill Ambassador Annie Lennox also addressed delegates. While at AIDS 2010, Ms. Lennox will headline a march and rally on human rights on Tuesday, 20 July: www.hivhumanrightsnow.org).

“In the past five years, the coverage of HIV treatment in low- and middle-income countries has increased tenfold to now reach five million people,” said Dr. Brigitte Schmied, AIDS 2010 Local Co-
Chair and President of the Austrian AIDS Society. “Just ten years after AIDS 2000 in Durban, we have shown the sceptics that universal access is achievable; that this is a goal we can and must reach,” she said. “Holding ourselves and our political leaders accountable for this goal, especially as the next Global Fund replenishment approaches, is our continued challenge in the months ahead.”

Vienna Declaration: Leading with Science, not Ideology
The launch of the Vienna Declaration in the lead up to the conference emphasizes the importance of responding to AIDS with evidence-based policies and programmes. The official conference declaration calls for the reorientation of drug policy from the “War on Drugs” approach to an evidence-based approach that recognizes the human rights and medical needs of those who use illicit drugs. The current approach has impeded efforts to prevent HIV through the use of interventions such as needle and syringe programmes and opioid substitution therapy. Access to these interventions is limited despite evidence demonstrating their effectiveness. Nobel Laureates and world leaders in science, medicine, economics, and from civil society have already endorsed the declaration, as have hundreds of organizations and the former Presidents of Colombia, Brazil, and Mexico. Individual and organizational endorsements may be made online at: www.viennadeclaration.com.

Evidence also makes clear that the success of HIV scale-up demands that strong human rights protections be in place for those most vulnerable to HIV, including women and girls, displaced populations, men who have sex with men, sex workers and youth.

Today’s Opening Session included three presentations on the state of the epidemic:

HIV Epidemiology – Progress, Challenges and Human Rights Implications
Examining the existing knowledge on the course of the epidemic as it links to human rights concerns, Dr. Yves Souteyrand (France) of the World Health Organization stated that addressing human rights violations among vulnerable populations is essential for the future success of the global response. The HIV epidemic has stabilized globally, with annual numbers of deaths declining from 2.2 million in 2004 to 2 million in 2008, mostly due to impressive scale up of HIV treatment. However, HIV is still not under control, leading to around 2.7 million new infections each year.

New infections are particularly high in some key populations all over the world, such as migrants, men who have sex with men, and people who inject drugs. Social marginalization, discrimination and even criminalization suffered by these groups have prevented production of robust epidemiological knowledge. Often, even when the knowledge exists, decision-makers continually fail to act.

Human Rights and the Response
In her presentation on the state of human rights in the epidemic, Paula Akugizibwe (South Africa) of AIDS and Rights Alliance of Southern Africa noted that the greatest barriers to achieving universal access are social, economic and political challenges. In order to accelerate progress and achieve sustained success, there is an urgent need for the HIV response to be based on concrete human rights principles. Key steps include ending laws that criminalize HIV transmission and marginalize people living with HIV, sexual minorities and sex workers. Such laws entrench stigma and preclude access to much-needed HIV interventions.

Current funding threats, which are beginning to have a destructive impact on health systems in low-income countries, have important human rights implications. The recent backtracking by donors on funding commitments to universal access and the failure of many low-income countries to demonstrate commitment to domestic financing of HIV treatment, highlight the volatility of health responses driven by political and financial expediency rather than respect for the right to health. The ongoing failure to mount a rights-based scale-up will not only violate the right to health and life of millions, but will destabilize health and socio-economic systems, requiring a belated response at a much greater cost.
Strategies for a Cure
Dr. Sharon Lewin (Australia) of the Alfred Hospital, Monash University and Burnet Institute outlined the multiple barriers to curing HIV, and examined potential avenues for achieving either a functional cure (long-term control of HIV in the absence of combination antiretroviral therapy) or a sterilizing cure (elimination of all HIV-infected cells). The major challenges include residual viral replication in patients receiving combination antiretroviral therapy (cART) and HIV’s ability to sequester itself in anatomical reservoirs. The most significant barrier, however, is the establishment of a latent or “silent” infection in resting CD4+ T-cells. According to Lewin, recent advances in understanding which cells are latently infected and how latency is established and maintained may one day lead to interventions that could potentially reverse latent infection.

Studies of patients who can naturally control HIV have demonstrated that a functional cure may be possible with the most consistent finding among these patients being a potent immune response to HIV. One potential approach to achieving a sterilizing cure includes the very early initiation of cART in combination with agents that can reverse latent infection. Drugs such as histone deacetylase inhibitors, currently used and licensed for the treatment of some cancers, and cytokines such as IL-7 or prostratin, show very promising results in vitro. She emphasized the urgent need for clinical trials for some of these more promising agents.

AIDS 2010 Scientific Programme
AIDS 2010 received more than 10,650 abstract submissions, 6,128 of which were accepted for presentation and/or inclusion in the CD-ROM. All accepted abstracts are available through the conference website.

Join the Conversation
For the first time, AIDS 2010 organizers are engaging delegates and those following the conference remotely through the use of social networking tools, including Facebook (/aids2010.com), Twitter (@aids2010) and an official conference blog (http://blog.aids2010.org) that features a variety of posts from guest bloggers and conference organizers.

Visit www.aids2010.org for more programme information and comprehensive online coverage.

About the AIDS 2010 Organizers
AIDS 2010 is convened by the IAS, the world’s leading independent association of HIV professionals, in partnership with a number of international, regional and local partners. International partners for AIDS 2010 include:
- Joint United Nations Programme on HIV/AIDS (UNAIDS), including its co-sponsors, the World Health Organization (WHO) and the United Nations Office on Drugs and Crime (UNODC)
- International Council of AIDS Service Organizations (ICASO)
- Global Network of People Living with HIV/AIDS (GNP+)/International Community of Women Living with HIV/AIDS (ICW)
- World YWCA
- Caribbean Vulnerable Communities Coalition (CVC)

Local and regional partners for AIDS 2010 include local scientific leadership and:
- City of Vienna
- Government of Austria
- Aids Hilfe Wien
- Austrian AIDS Society
- East European & Central Asian Union of PLWH (ECUO)
- European AIDS Clinical Society (EACS)
- European Commission

MEDIA CONTACTS:
Regina Aragon (Rome) 
International AIDS Society 
Regina.Aragon@gmail.com
+43 699 172 85 713

Christian Strohmann (Vienna)
AIDS 2010
Christian.Strohmann@aids2010.org
+43 699 181 73002

Scott Sanders (DC)
High Noon Communications
scott@highnooncommunications.com
+43 699 172 84 833