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P15-22. Potential synergies between HIV vaccines, microbicides and pre-exposure prophylaxis

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Background

The Canadian HIV Vaccine Initiative (CHVI) is a five-year initiative between the Government of Canada and the Bill & Melinda Gates Foundation, and represents a significant Canadian contribution to the Global HIV Vaccine Enterprise. The CHVI is part of Canada's long-term and comprehensive approach to addressing HIV/AIDS at home and abroad, including the development of new prevention technologies (NPTs). In support of this, the CHVI explored the close relationship between HIV vaccines, microbicides and pre-exposure prophylaxis (PrEP).

Methods

A discussion paper was commissioned to identify potential linkages and opportunities for collaborative efforts among the three NPTs in the context of the CHVI's four program areas: discovery and social research; clinical trial capacity building and networks; pilot-scale manufacturing facility for clinical trial lots; policy and regulatory issues, and; community and social dimensions. Information was gathered through document review of academic and grey literature.

Results

There are many common issues/challenges to advancing the development of new NPTs and significant opportunities for collaborative efforts among these NPT fields, including sustainability of funding and clinical trial capacity. The report also noted the importance of positioning HIV vaccines as part of an overall prevention strategy, and that taking advantage of synergies between NPTs

could provide the best opportunity to advance the NPT development agenda.

Conclusion

It is not known which technology will be available first or the timelines for availability. However, it is increasingly recognized by Canadian and global HIV stakeholders that NPTs need to be part of a comprehensive HIV prevention agenda to increase the chances of successfully responding to the HIV/AIDS epidemic in the future. Canada has recognized the importance of including NPTs in a broad HIV prevention framework currently in development.