“Shock and Kill” HIV Cure Study Moving to the Clinic

“Shock and kill” strategies are moving from the research lab to the clinic, in efforts to find an effective, well-tolerated cure for HIV. Only one person, Timothy Ray Brown, who is known as the “Berlin patient,” has ever been cured of HIV.

At this point in time, the goal of HIV cure research is to force HIV into “remission.” In this scenario, the person might still have HIV present in their body but would maintain an undetectable viral load without antiretrovirals, would not have to worry about transmission, and would not suffer from HIV-associated inflammation. Once this is achieved, researchers might then be able to work toward a sterilizing HIV cure—or one that completely eliminates every HIV infected cell from a person’s body.

Steve Deeks, MD, UCSF School of Medicine professor, reported at the 2016 HIV Cure Summit that his team is moving forward with a study of a TLR-7 agonist (GS9620), which should begin in early 2017.

In theory, TLR-7 agonists may help cure HIV by targeting, or “shocking” CD4 cells that are part of the viral reservoir. In the normal course of infection, these cells are able to “hide” from the body’s immune system. TLR-7 agonists may help bring these cells out of latency, making them visible to the immune system which can target and kill them.

Read more HIV cure research from the 2016 amfAR HIV Cure Summit on www.betablog.org.

When We Rise: Interview with AIDS Activist Cleve Jones

By Chris Richey

Cleve Jones is an American human rights activist, author and lecturer whose work has spanned more than three decades. In addition to co-founding San Francisco AIDS Foundation, he founded the NAMES Project AIDS Memorial Quilt. In November this year, Hachette Book Group published Jones’ memoir, When We Rise. ABC is currently producing a TV mini-series inspired by Jones’ book.

This month, I had the opportunity to sit down with Jones to pick his brain about sex in San Francisco before AIDS, founding San Francisco AIDS Foundation, and how activists can take action with an incoming Donald Trump administration.

**Chris Richey:** Thank you for taking the time to sit down with me.

**Cleve Jones:** Of course! Happy to do it.

On November 9, 2016, the day after the election, many of us woke up terrified and fearful about our future. That day, I marched with you and many others in solidarity against hate and intolerance. But we also marched because we were, and are, scared. The fear of this administration is real. Have you ever seen anything like this in all your years of organizing and fighting for equality and social justice?

I’m sad to say, I think this may be the greatest and most terrifying challenge of our lifetime. I fear I won’t live long enough to see the damage of this election rectified. Those of us that care about equality and saving the planet, we cannot afford to be divided from each other, and what I have been repeating almost every day since the election is that if our capacity for empathy is limited by our gender or sexual orientation or skin color, we are doomed. We need real empathy. We need real solidarity. We need to have each other’s backs. I’m sick to death of the identity politics, which at their core seek to divide us up and deny us of any possibility of empathy and rob us of the power of solidarity.

What are some things the larger LGBTQ community can do so that we better incorporate issues of race and immigration into our efforts moving forward and affirm our diverse community?

[I’ll] a little bit more than posting comments online, [it’s] putting words into action. Being there, showing up. Organizing is more than clicking ‘like’ or posting on social media and there is a place for that. We have to stand together. My heroes, the people who mentored me and inspired me, saw what we were doing as part of a larger, broader, deeper struggle for peace and for social justice. You could not fight back against homophobia if you were not also fighting back against racism and war and poverty—these were all inextricably linked.

Read the full article on: http://betablog.org/rise-exclusive-interview-aids-activist-author-cleve-jones/
Clinical Research Opportunities

Studies are listed with brief descriptions only. Additional inclusion and exclusion criteria may apply. For more information, please contact the study site directly.

Bridge HIV
San Francisco Department of Public Health
25 Van Ness, Suite 100
San Francisco, CA 94102

- Antibody Mediated Prevention (AMP): The AMP Study is a groundbreaking new research study that tests the idea of giving people antibodies to see if they will protect people from getting infected with HIV. Must be HIV negative, healthy and age 18–50. May be a male or transgender person who has sex with men. Compensation up to $100/visit. Visit www.PowerToPreventHIV.org or call 415-437-7485.

- HIV vaccine study: Study evaluating the safety and dosage of HIV vaccines. Must be HIV negative, healthy and age 18–50. May be male, female, or transgender. Compensation is $50–$75/visit. Visit www.PowerToPreventHIV.org or call 415-437-7485. You cannot get HIV from the study vaccine.

- Pre-exposure prophylaxis (PrEP) study: Study testing the safety of a pill and a long-acting injectable (a shot). Must be HIV negative and age 18+. May be a man or transgender woman who has sex with men. Visit www.PowerToPreventHIV.org or call 415-437-7485.

- Health tech study for men: Bridge HIV is looking for young men who have sex with men between 18-35 years old to participate in interviews to provide feedback on a new mobile app. If eligible, you will be compensated up to $75 per visit. Please call or text us at 415-385-3973 to enroll today! All information is kept strictly confidential.

- HOME HIV testing study for men: Bridge HIV is looking for younger men who have sex with me, 18-35 years old, to participate in a new research study focused on at-home HIV testing. If eligible, you may be compensated up to $175 for participating in the study. Please call or text us at 415-385-3973 or visit www.HelpFightHIV.org to enroll today! All information is kept strictly confidential. NS

East Bay AIDS Center (EBAC)
3100 Summit Street, 2nd Floor
Oakland, CA 94609
http://www.altabatessummit.org/clinical/aids_scvs.html
510-869-8400

- HPTN 083: A Phase 2b/3 double blind safety and efficacy study of injectable cabotegravir compared to daily oral tenofovir disoproxil fumarate/emtricitabine (TDF/FTC), for PrEP in HIV-uninfected cisgender men and transgender women who have sex with men; $20 for the screening visit, $75 for the enrollment visit, and $50 per follow-up visit.

- GS-US-412-2055: Phase 3, randomized, double-blind study to evaluate the safety and efficacy of emtricitabine and tenofovir alafenamide (F/TAF) fixed-dose combination once daily for PrEP in men and transgender women who have sex with men and are at risk of HIV infection. Study lasts 144 weeks with 17 visits. Study participants compensated per study visit.

Kaiser Clinical Trials Unit
4141 Geary Boulevard, Suite 219
San Francisco, CA 94118
Miki.mettinger@kp.org, 415-833-3223
brooke.anderson@kp.org, 415/833-3487

- TMB-311: A phase 3, multi-center, expanded access study of Ibalizumab plus an optimized background regimen in treatment-experienced patients infected with multi-drug resistant HIV-1.

- MK-1439-024. Study to evaluate a switch to MK-1439A in HIV+ people virologically suppressed on a ritonavir-boosted PI and two NRTIs. $75/visit.

Metropolis Medical Group
815 Hyde Street, Suite 301
San Francisco, CA 94109
www.metropolismedical.net
415-292-5477 ext. 487

- Studies provide free blood workup, study drugs, and compensation between $500-$1000.

- Flair Study (GSK 1265744): Study for people with HIV who have never been treated before (“treatment naive”).

ABBREVIATIONS

NS New study, or changes to an existing study
ARV Antiretroviral
> Greater than
< Less than
VL Viral Load
PI Protease Inhibitor
II Integrase Inhibitor
NRTI Nucleoside/Nucleotide Analog

Treatment will be provided with an all injectable regimen (i.e. no pills), with monthly injection of rilpivirine and the investigational integrase inhibitor cabotegravir. Injections are given in the clinic. The study is started with a lead-in pill regimen for 5 months. Long term evaluation of efficacy, safety, and tolerability. Compensation is $75 per study visit.

Atlas Study (GSK 201585): Switch from any standard HIV pill regimen to an injectable regimen for the treatment of HIV. Monthly injection of rilpivirine and the investigational integrase inhibitor cabotegravir for ongoing suppression of HIV. Injections are given in the clinic. Participants need to be on their 1st or 2nd HIV regimen and not have resistance to any medications provided. Long term evaluation of efficacy, safety, & tolerability. $75 per study visit.

- Gemini-Study (GSK 204861): HIV treatment study for people with HIV never treated for their HIV infection looking into the efficacy, safety, and tolerability of a regimen of two drug regimen, dolutegravir and lamivudine for the treatment of HIV. Compensation is $75 per study visit.

- Sword: Switch study to a “nuc-sparing” regimen, containing Tivicay and Edurant, once/day. People with HIV qualify, if they are on their first or second HIV treatment and have an undetectable viral load. $75 per study visit, this study will be ongoing for 3 years and provide HIV medications.

- Turquoise Study (TMC114FID3013): Switch study for people with HIV and undetectable viral load on a boosted protease inhibitor regimen (i.e. Prezista/Norvir or Reyataz/Norvir) and Truvada. People will be randomized to either switch to an investigational one-tablet-a-day regimen containing darunavir, cobicistat, emtricitabine.
and tenofovir alafenamide (TAF) or go on darunavir/cobicistat and Truvada. $75 per study visit.

- Amber Study (TMC114IFD3013): People with HIV, but never been treated (“treatment-naive”) and detectable viral load will start with an HIV regimen of Reyataz/Norvir, and Truvada or an investigational one-tablet-a-day regimen containing darunavir, cobicistat, emtricitabine and tenofovir alafenamide (TAF). $75 per study visit.

- Are you a high risk male, or transgender female who is HIV negative and having unprotected sex? If so you may be eligible to participate in a Phase 3 study to evaluate the safety and efficacy of F/TAF fixed-dose combination once daily for pre-exposure prophylaxis in men and transgender women who have sex with men and are at risk of HIV-1 infection. Volunteers receive $50 per visit, free PrEP, labs, STD testing, ECGs and medical care for up to 3 years from a leading board certified HIV specialist in San Francisco. Please call (415) 397-0700 or email us today info@studyops.com.

- M2.0: A study testing whether taking a medication (mirtazapine) reduces meth use in men who have sex with men. Study includes weekly substance use/risk reduction counseling. Eligible participants are compensated up to $595 over the course of the study. To see if you are eligible, please call us at 415.437.6333. Email: m2study@sfdph.org; www.m2study.org

- Say When: A study for gay and bisexual men testing whether a medication (oral naltrexone) taken on an as-needed basis can help to reduce alcohol use. This study is open to people HIV-positive or HIV-negative. Eligible participants are compensated up to $664 over the course of the study. To see if you are eligible, please call us at 415.437.6333. Email: say.when@sfdph.org; www.saywhensf.org

- Bye-C: A study that is open for all people who are Hep-C positive and have never had treatment. We are exploring two different dosing regimens (daily observed treatment and unobserved dosing 20/10) with the medication Harvoni, which has a 92-100% cure rate for the virus. Call us at: 415-437-6325. NS

- UCSF study of healthy HIV-infected subjects who are not on therapy: The Jay Levy lab is looking for HIV-infected individuals who are healthy and not on therapy to be part of a research project examining their natural immune response against HIV. Those interested will be interviewed by phone and then seen by Dr. Levy and his group. Please send an email to Bao.Sit@ucsf.edu.

- HIVTR-CCRS: Enrolling HIV-infected adults on combination antiretroviral therapy who need a kidney transplant. At the time of their kidney transplant, study participants will be randomly assigned to receive either MVC or placebo as an addition to their CART regimen. MVC is a CCR5 inhibitor and may improve kidney function after a kidney transplant. Call 415-476-2575 or email Alissa.Danford@ucsf.edu; https://clinicaltrials.gov/ct2/show/NCT02741323/

- STOP-CO: A Study to assess safety, tolerability, and efficacy of Sofosbuvir and Ledipasvir for Hepatitis C treatment in HIV/HCV coinfected subjects pre- or post-liver transplant. An interferon-free treatment for hep C with a high cure rate. Study drug will be provided free of charge. Call 415-514-6454 or email Rodney.Rogers@ucsf.edu; https://clinicaltrials.gov/ct2/show/NCT02533934

- HIV2HIV Hope: Enrolling people with HIV who are listed for kidney or liver transplant, and who would like to have the option to be offered an organ from a donor who is also HIV+, which can expedite the time to transplant since organs from HIV+ donors are not allowed in people who are not HIV+. Email Alissa.Danford@UCSF.edu.
UCSF Memory and Aging Center
HIV Research Group
675 Nelson Rising Lane
San Francisco, CA 94158
415-476-1688
HIVOver60@memory.ucsf.edu

• UCSF HIV Elders Study: A study examining Mindfulness Based Stress Reduction (MBSR) to alleviate symptoms of attention, executive functioning, stress, and anxiety in people ≥ age 60 with HIV. Study includes an 8-week MBSR course, cognitive testing, blood draw, and MRI; follow-up for 1 year. Must demonstrate mild-moderate cognitive impairment & controlled viral load. Other criteria apply. Compensation is $15-$50 per study visit. Visit our website at http://www.hivelders.weebly.com.

UCSF/San Francisco General Hospital
1001 Potrero Ave, Building 5, Rom 5G1
San Francisco, CA 94110
danny.li@ucsf.edu / jongkun.park@ucsf.edu
415-206-5801 and 415-206-5461

• CKB Study: Clinical trial to see the impact of canakinumab on inflammation reduction and improvement in heart health in people ≥ 40 with HIV. This medication has been used safely in people with inflammatory diseases for 4 years in the U.S. Seeking HIV+ men & women with undetectable viral load, CD4 >400, and documented cardiovascular disease or at least one risk factor. Study is 9 months with 12 visits. $25 - $100 per study procedure.

UCSF, Anal Neoplasia Clinic
1701 Divisadero Street, Suite 480
San Francisco, CA 94115

• Anal cancer rates are rising among people living with HIV. The ANCHOR study’s goal is to find the best way to prevent anal cancer among HIV+ men and women ≥ 35 years old. Study visits are every 6 months for at least 5 years. Participants are compensated $100 per visit. For more info go to anchorstudy.org or call 415-353-7443.

UCSF, Mount Zion, ANCRE Clinic
1701 Divisadero Street, Suite 480
San Francisco, CA 94115
Cristina Brickman, MD, Marya Krogstad, RN
(415) 353-7527, marya.krogstad@ucsf.edu

• Multikine Anal Wart Study: A study to evaluate an investigational treatment for anal warts. You may be eligible if you are an adult with HIV and anal warts. Subjects will receive injections of Multikine, a research drug composed of natural cytokines, to the affected area. Compensation for time and travel provided.

• AMC 088: A randomized, open label phase III study of treatment of high-grade anal squamous intraepithelial lesions (HSIL) in HIV+ men and women. This study will compare the efficacy between 2 different self-applied creams (Imiquimod cream vs. Efudex cream vs. observation only.) Observation group offered randomization to a treatment group at week 24 if HSIL persists. Study lasts less than 1 year with 7 - 11 visits. Compensation provided. Contact Rachel Silverstein at 415-353-7443 or rachel.silverstein@ucsf.edu

Zuckerberg San Francisco General,
Positive Health Program
995 Potrero Ave, Building 80, 4th Floor
San Francisco, CA 94110

• HIPSTER (HIV Imaging - PET/MRI Scans To Evaluate Reservoirs): Studies using scanning techniques to learn how & where HIV persists in the body. 1-2 screening visits & 1 visit for PET/MRI scan. Visits include blood draws and questionnaires. Enrolling HIV+ with good venous access, CD4>300, and documented undetectable VL for >12 mos. Other criteria apply. Compensation provided. Call 415-476-4082, x139, or x104; email Rebecca.Hoh@ucsf.edu or Viva.Tai@ucsf.edu NS

• DARE: A group of studies learning how & where HIV persists in the body. Multiple visits to measure HIV viral reservoirs; may include blood draws, leukapheresis, and tissue biopsies. Enrolling either 1) newly infected or 2) those not taking ART or 3) continuously ART-suppressed >12 months. Compensation provided. Call 415-476-4082, x139, or x104; email Rebecca.Hoh@ucsf.edu or Viva.Tai@ucsf.edu

• Flu Vaccine Study: an observational study assessing immune response to standard flu vaccine in HIV+ and HIV-negatives. 3-5 visits for blood draws and questionnaire. Enrolling those age 40-65 and either 1) HIV+ with documented undetectable VL for >2 years on continuous ARV or 2) HIV-negative. Other criteria apply. Seasonal flu vaccine & compensation provided. Call 415-476-4082 x155; email Heather.Hartig@ucsf.edu NS

• GALT Study: assessing HIV damage to the immune system in gut-associated lymphoid tissue. Study involves a screening visit, rectal biopsy, and blood draws. Enrolling HIV+ and HIV-negative. Not taking immunomodulators or blood-thinning medications. No history of inflammatory bowel disease or colon cancer. Other criteria apply. Compensation provided. Call 415-476-4082 x140; Montha.Pao@ucsf.edu NS

• Leukapheresis study: collection of white blood cells to determine how much HIV is in different types of cells. 1-2 screening visits and a 3-4 hour white blood cell collection. Enrolling HIV-positives and HIV-negatives. CD4 count >300 with excellent venous access. Other criteria apply. Compensation provided. Call 415-476-4082 x139; Rebecca.Hoh@ucsf.edu NS

• Lymph node biopsy study: A study to measure and analyze HIV viral reservoir in lymph nodes. Study involves 1-2 screening visits, a lymph node biopsy and blood draws. Enrolling HIV-positives and HIV-negatives. Other criteria apply. Compensation provided. Call 415-476-4082, ext 144; Marian. Kerbleski@ucsf.edu NS

• SCOPE Study: Observational study recruiting the following groups (1) natural controllers (HIV+ with VL <10,000 copies/mL & not taking ARVs), (2) individuals not taking ARV, (3) ARV-suppressed at least 12 months, or (4) HIV-negative controls. Study involves interviews & blood draws 2-3 times per year. Compensation provided. Call 415-476-4082 x140 or x 155; email Montha.Pao@ucsf.edu or Heather. Hartig@ucsf.edu

• Treat Acute: a study providing rapid antiretroviral treatment for recent HIV infection. Must be 18 years or older, within 4 months of estimated HIV infection date, and ART-naïve (prior PrEP use okay). Other criteria apply. Contact (415) 476-9296 x 325; Lisa. Harms@ucsf.edu NS