

**International AIDS Society:
2nd IAS Conference on HIV Pathogenesis and Treatment
Anthony Fauci, director of NIAID
July 13, 2003**

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LARRY LEVITT: This is Larry Levitt from www.kaisernetwork.org, and I'm here with Anthony Fauci who heads the National Institute of Allergy Infectious Diseases in the U.S. Dr. Fauci thanks for joining us.

DR. ANTHONY FAUCI: Good to be here.

LARRY LEVITT: You're in the session of the eighth conference here in Paris this week on the last 20 years of the science of HIV, calling it the declining public health and medical challenge of our generation. Could you discuss what makes HIV such a challenge, from a scientific perspective, and how you characterize the progress we've made over the last 20 years.

DR. ANTHONY FAUCI: Well it's challenging from a public health and a scientific vantage point because it is truly one of the most devastating epidemics in history. Over 60,000,000 people have been infected, more than 20,000,000 have died. We have (unintelligible) people living with HIV AIDS, and the potential for an even greater explosion of this terrible disease is there, and real. We went from having no appreciation whatever of what this was. This is an example of a brand new disease with a virus, with all practical purposes, had no impact on the human civilization until the first recognition of the places in 1981, and then retrospectively realizing that this was probably going on a bit before then.

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And so we started from baseline, we started from nothing. We didn't know what the disease was. We didn't know what the agent was. And what's happened, over the 20 plus years and the 20 years since the discovery of the agent, has been an enormous triumph of science from discovering the new agent, developing a diagnostic test, understand pathogenesis, developing therapies with the one major challenge still waiting. There are a number of other challenges, but the one compelling challenge is to develop an HIV vaccine that's safe and effective. Despite all of these great scientific advances, we still have a way to go of translating the science to the people who need it. And that's a lot of what the discussion is at this meeting here in Paris, and meetings in the past, particularly (unintelligible) in (unintelligible) had an international meeting, and observed in South Africa a few years ago where it became clear that the people who needed the benefits of the science the most were not getting it, particularly in the arena of therapy. That's our big social, as well as public health, challenge for the future.

LARRY LEVITT: And there have been, as you discussed these challenges, there have been a variety of challenges, technical, clinical challenges, not to mention political and economic challenges. As what you well know as well as anyone, President Bush has launched a global age initiative, and just returned from (unintelligible) trip to Africa.

DR. ANTHONY FAUCI: Right.

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LARRY LEVITT: As someone kind of involved in this discussion, what are your hopes for Bush Administration initiatives?

DR. ANTHONY FAUCI: Well I think it's very clear that the President, President Bush, has really effected a groundbreaking initiative in putting an enormous amount of money in to a program that is directed at HIV AIDS in developing nations, those nations in Sub-Saharan Africa, and (unintelligible) Caribbean nations. The amount is unprecedented. Fifteen billion dollars over five years. The hope is that that in and out of itself will have, and it certainly will have, a major impact on the treatment, prevention, and care of HIV in those nations. But also that it will leverage the contribution of a number of other developed nations, as well as developing nations themselves.

(Unintelligible) some time ago made an assessment, or an estimate, that it would require about \$10 billion dollars per year to really have a significant impact and control the HIV epidemic globally. And the cost \$10 billion dollar per year for five years for a total of \$50 billion dollars. They also suggested that the United States share of that should be somewhere around 30 percent. And it's interesting that the number that the President decided upon would give about \$3 billion per year for five years, which is about, just about that percentage. So we're hoping with the leadership that's

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been shown by President Bush, and hopefully with the approval with the appropriations with our Congress, to get that \$15 billion dollars rolling so that other countries will then come in with a much increased amount of support for the Global AIDS programs, either in bilateral (unintelligible), or to the Global AID fund, whichever suits their particular program.

LARRY LEVITT: With any initiative that's large there's bound to be challenges and obstacles that it encounters happen. What kind of obstacles do you see for the--

DR. ANTHONY FAUCI: [Interposing] Well rather than obstacles I would say they were challenges more than a known obstacle. And of the things that we have to address, and I think that the President's proposal has that in mind, that we need to make sure that when we do these programs, or effect these programs in developing nations, that we're sensitive to the situation as it exists in a country. So rather than trying to parachute a western world program in to a developing nation, that we'll make use of the already existing infrastructure, however low tech that is, and build upon that to have a program that is designed by, and worked on by African and Caribbean people, and to use the resources to withstand upon that rather than to try and create something that's not suited to the nation involved. We don't want to make a mistake of imposing our standards of how things would get done, or our ideas, as opposed to finding out what works in the country. That's going

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to be a challenge because in some of the countries, in many of them, the infrastructure needs to be expanded upon. In a number of countries like Uganda, programs are already working. There have been more than 5,000 to 7,000 people treated in Uganda by programs that were designed by Ugandans. We'd like to see that that kind of philosophy is driving the program in other nations also at work. I think that's probably the biggest challenge.

LARRY LEVITT: Uganda's been cited as a model, by many in the AIDS community, as a model. Have you heard about their local initiatives at the conference that seem to show--

DR. ANTHONY FAUCI: [Interposing] Well yeah, certainly. But there are programs in Rwanda. There are programs in Tanzania. There are programs in Haiti that are quite good. (Unintelligible) got off to a start where they stumbled a bit early on, but now they seem to be getting back on track in the independent program that they started. So I think that each and every country, to a greater or lesser degree, has the framework, or the potential, to have a successful program. And that's what we're hoping for.

LARRY LEVITT: Finally returning to the science for a bit, I won't ask you to predict the next 20 years of AIDS science, but this conference reconvenes again in two years in Rio De Janeiro. Can you look in to the future and assess where we might be in two years?

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DR. ANTHONY FAUCI: Well hopefully we'll have more candidates in to clinical trial for a vaccine. The science of vaccinology is fundamental basic research, but it also comes down to getting information for the clinical trial process. You can only get so much information at the basic level, and then you have to empirically test some of the candidates you have. So hopefully what we'll see in the next two years, in anticipation of the next conference two years from now, is a number of candidates that have gone from either pre-clinical interest human trial, early human trials, in to advanced human trials. Hopefully we'll have other concepts for drugs. For example, we have now are discussing at this meeting the new target of fusion, and fusion inhibitors, with the drug Fuzion. Hopefully we'll have drugs against, that will block binding by the CCR5 we set for CHCR4, and hopefully the pre-clinical or early clinical programs on the (unintelligible) inhibitor will come to maturation and fruition so that we could talk about yet again, new drugs against novel targets that we haven't used before.

LARRY LEVITT: Okay. Dr. Fauci thanks for taking time to--

DR. ANTHONY FAUCI: [Interposing] You're quite welcome. It's good to be here.

[END OF RECORDING]