Vaccine works in monkeys

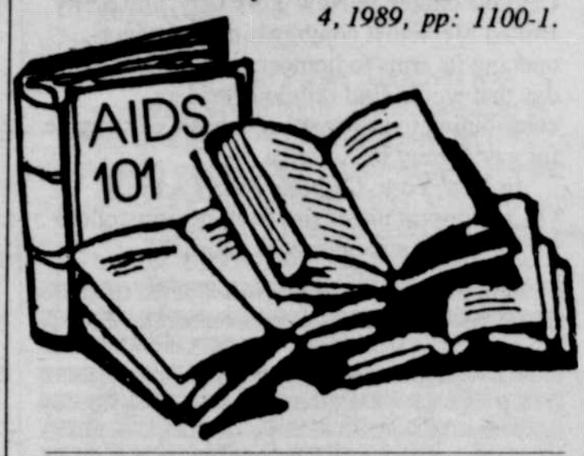
A vaccine made from killed SIV, the AIDS virus for monkeys, protected eight out of nine monkeys from later infection with SIV. Researchers at Tulane University injected monkeys with vaccine and repeated the injections one month, two months, and 13 months later. Next the researchers tried to infect the monkeys by injecting them with concentrated solutions of SIV. Usually monkeys infected with SIV develop AIDS and die within seven months. But all of the vaccinated monkeys were alive one year after they were injected with concentrated SIV, and eight of the nine monkeys remained uninfected. These scientists hope to develop a vaccine made from killed HIV that will work with humans.

Reference: *M. Murphy-Corb and others. A formalin-inactivated whole SIV vaccine confers protection in macaques.* Science. *December 8, 1989, pp: 1293-97.*

New treatment for KS in the mouth

Gay men with Kaposi Sarcoma sores in their mouths benefited from a drug called vinblastine injected directly into the sores, say Canadian doctors. If left untreated, KS sores may cause pain, bleeding, and difficulty swallowing. This new treatment causes fewer side effects than the usual treatment.

Reference: *J. Epstein and C. Scully. Intralesional Vinblastine for oral Kaposi Sarcoma in HIV infections.* Lancet. *November 4, 1989, pp: 1100-1.*



BY JEFFREY ZURLINDEN

AZT study continues in Europe

Last summer the NIH ended an AZT study ahead of schedule because preliminary results showed that HIV-infected people without ARC or AIDS benefited from taking AZT. European scientists conducting a similar study are not so sure. Although AZT will be available to volunteers in the European study who want it, the study will continue. These European researchers believe that more time is needed to demonstrate a true benefit when otherwise healthy HIV-infected people take AZT. They also fear that the improvements seen with AZT may be temporary and deprive the HIV-infected person of greater future benefits from AZT.

Reference: *J. Cherfas. AZT still on trial.* Science. *November 17, 1989, p: 882.*

Gonorrhea increasing in gay men

Public health officials from Seattle, Washington report that the number of gay men with gonorrhea has tripled in the last year. Although the number of men with gonorrhea remains small compared to ten years ago, it could mean that fewer gay men are playing safe and using condoms. Rectal gonorrhea and HIV are spread in the same way; and in the past, increases in the number of men with rectal gonorrhea heralded increases in the number of men infected with HIV.

Reference: *CDC. Trends in gonorrhea in homosexually active men in King County, Washington, 1989.* MMWR. *November 10, 1989, pp: 762-4.*

AZT-resistant HIV

Researchers have long known that the drug AZT does not stop some strains of HIV. Now scientists at the Wellcome Research Labs have discovered the changes in HIV that protect the virus from AZT. They hope to develop new and simpler blood tests that will determine if HIV-infected people taking AZT become resistant. Using current methods, it is almost impossible to know if strains of HIV are resistant to AZT.

Reference: *B. Larder and S. Kemp. Multiple mutations in HIV-1 reverse transcriptase confer high-level resistance to AZT.* Science. *December 1, 1989, pp: 1155-57.*

Researchers shed light on HIV enzyme

To reproduce, HIV needs an enzyme called protease. Protease from HIV has now been pictured in great detail by scientists in London. A detailed understanding of the structure of protease will lead to drugs that inhibit protease and stop HIV from reproducing. Meanwhile, researchers in the United States are studying the interaction of protease and potential inhibitors. These researchers hope to design drugs that treat HIV-infections.

Reference: *L. Risto and others. X-ray analysis of HIV-1 protienase at 2.7 A resolution confirms structural homology among retroviral enzymes.* Nature. *November 16, 1989, pp: 299-302. M. Miller and others. Structure of complex of synthetic HIV-1 protease with substrate-based inhibitor at 2.3 A resolution.* Science. *December 1, 1989, pp: 1149-51.*

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