

Domestic AIDS programs got none of the necessary increases in funding when the U.S. Senate voted on the appropriations bill Sept. 10. It marked the end of broad bipartisan support for AIDS programs in general and the AIDS Drug Assistance Program in particular that had survived for more than a decade.

Sen. Charles Schumer, D-N.Y., offered an amendment to the House/Labor Health and Human Services appropriations bill that would have added \$214.8 million to ADAP. It was ruled out of order by the chair because it would exceed discretionary spending caps already set by the Senate. A motion to overrule the chair was defeated by a largely party-line vote of 44-53.

Sen. Richard Durbin, D-Ill., offered an amendment to increase funding for international AIDS efforts, and that was defeated in a similar manner.

"The crisis started building two years ago and now is in full bloom," said Jules Levin, executive director of the National AIDS Treatment Advocacy Project. "ADAP has been underfunded, and states have been unable to continue providing access to HIV treatment at the same levels as before."

Many states have made it harder to qualify for the program; cut back on the number of drugs that are covered or delayed adding newly approved drugs; or established waiting lists. Three HIV-positive people recently died while on an ADAP waiting list in West Virginia, and an estimated 1,200 people will be on those lists by the end of the year.

AIDS FUNDING STAGNATES

Meanwhile, House Democrats protest tightened CDC review of prevention materials

by Bob Roehr

Terje Anderson, National Association of People with AIDS executive director, said the Senate has heard this from its constituents "but refuses to increase ADAP and Ryan White CARE Act funding by even the \$100 million that the president proposed." He was "extremely disappointed."

David Munar, AIDS Foundation of Chicago associate director, lamented, "The Senate is honestly considering giving the Bush administration an additional \$87 billion for a questionable war and foreign occupation but can't seem to find a way to make \$400 million available to care for its own citizens in need."

AIDS advocates hold out a small glimmer of hope that they will be able to get at least some of the necessary money when the House and



AIDS funding amendments proposed by Democratic Sens. Charles Schumer of New York (left) and Richard Durbin of Illinois were defeated in party-line votes



Senate meet in conference to resolve differences between the two versions of the appropriations bill.

On the other side of the Capitol, three ranking Democrats in the U.S. House of Representatives have written the Bush administration protesting changes in the way that HIV prevention materials are reviewed by the Centers for Disease Control and Prevention prior to their use.

Those changes have "caused concerns among state HIV/AIDS directors," wrote Democratic Leader Nancy Pelosi of California, Deputy Leader Steny Hoyer of Maryland and Henry Waxman of California, the ranking member of the committee, to Health Secretary Tommy Thompson in their Sept. 11 letter.

Under guidelines established in 1992, after long discussion, local Program Review Panels screen materials for their appropriateness for the targeted audience. The panels also must make sure they comply with a federal law requiring that they are not "designed to promote or encourage, directly, homosexual or heterosexual activity or intravenous substance abuse"; point out the harmful effects of such activities; and address the benefits of abstaining from all of them.

The authors charged that the CDC has added another layer of bureaucracy by requiring "a certification that accountable state or local health officials independently review" the materials. The terminology of the requirement is not defined, and the CDC is offering no additional funds for the added burden at a time when most states face a severe budget crunch.

They asked Thompson to reconsider the changes and "to make any future changes only after thorough analysis and full consultation with the stakeholder groups and Congress."

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National Institute of Allergy and Infectious Diseases director Anthony Fauci called for "a moral commitment...to a vision and a strategic plan to help accelerate the development of an HIV vaccine" in his plenary address to the AIDS Vaccine 2003 conference held in New York City from Sept. 18 to 21.

The concepts of what has become known as the "Global Enterprise" were first launched in an article last June in the magazine *Science* by two dozen authors, including Fauci. Further discussion ensued at an August meeting in Airlie, Va., and during the next six months working groups will develop a strategic plan for the Enterprise.

Fauci said key principles are a commitment to working together as a global community; "to ensure transparency and systematic communications platforms"; common laboratory standards to allow comparability between efforts and their integration into the larger scheme of research;

GLOBAL ENTERPRISE

Conference envisions HIV vaccine research by Bob Roehr

and identifying and meeting human and physical infrastructure needs.

Participation in the Enterprise "is not by subscription, it is by community," said Jose Esparza, director of HIV vaccine activities with the World Health Organization.

"The real challenge is to change our behavior," added Larry Corey, a University of Washington researcher who is principal investigator for the international HIV Vaccine Trials Network, which is supported financially by the National Institutes of Health.

Fauci called developing an HIV vaccine "clearly the most important and indeed the most difficult and problematic challenge in AIDS research." In searching for correlates of protection, "We are looking for something that isn't there."

Many people both within and outside the research community believe HIV vaccine research has been fragmented and disjointed. Work in the lab and in monkey studies has been done to differing standards and has used different assays or measuring tools, making it often impossible to compare the results and reach broader conclusions. "We have these clinical networks—let's make sure these trials are compatible with each other so that we don't waste time and resources," Fauci said.

The National Institute of Allergy and Infectious Diseases received a mandate from Health Secretary Tommy Thompson to coordinate all HIV vaccine research funded by the U.S. government. It now is coordinating efforts by the Centers for Disease Control and Prevention and

by the U.S. military so that each retains its individual identity and strengths but is conducting research to common standards and operating procedures.

Perhaps the most expensive element of research is the ability to conduct Phase III clinical trials that prove a vaccine works. The National Institutes of Health are working with academic and organizational partners in developing countries to create that capacity.

"Industry is an absolutely essential partner" for Fauci, and "taking away some of the risk" for industry in this area is part of NIH's mandate. But he also made clear, "If they want to utilize the many facilities that we have, we would like them to do it in a way that the knowledge that is gained is going to be helpful to the field."

"A trial could fail to get you a vaccine," he explained, "but it could allow you to learn a lot about what you are going to do" in future iterations. "That is why transparency and harmonization and common laboratory parameters are so important."

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