4th IAS Conference on HIV Pathogenesis, Treatment and Prevention

Roadmap to TB/HIV sessions

Michel Sidibe (UNAIDS)

Sunday, 22 July 2007

12:30-14:30- Parkside Ballroom B - Satellite Panel Discussion SUSA5: HIV/TB Co-infection: Meeting the Challenge

Chairpersons: Diane Havlir, United States and Soumya Swaminathan, India Presentations:

Research Priorities in HIV/TB. Stephen Lawn, South Africa.

MDR and XDR TB. Gerald Friedland, USA

Pediatric populations: what is the research agenda? Mark Cotton, South Africa Update on current & planned clinical trials: where's the momentum? Xavier Blanc, France

Panel discussion: agencies will highlight how their programs provide opportunities to support and/or fund research to address the gaps identified during the previous talks.

Panelists include: Michel Kazatchkine (GFATM)

Debrework Zewdie (World Bank)

Kevin De Cock (WHO) Charles Mgone (EDCTP) Barbara Laughon (NIH) Renee Ridzon (Gates Foundation) Xavier Blanc (ANRS)

Monday, 23 July 2007

07:00 - 08:30 Bayside 204 B - Satellite

MOSA2 Co-infection Immunology and Potential Therapeutics

MOSA201 (07:00) Novel Antibacterials as Potential Tuberculostatics. Valentina Yu, Kazakhstan

11:00-12:30 Bayside Auditorium B - Oral Abstract Session

MOAB1 TB/HIV: Still a Deadly Partnership

Co-Chairs: Gerald Friedland, United States and Jose Miro, Spain

MOAB101 Tuberculosis-associated immune restoration disease is associated with increased PPD-specific T cell responses detected by a whole blood interferon-y release assay. Julian H Elliott, Australia

MOAB102 24-week efficacy and safety of nevirapine: 400 mg versus 600 mg based HAART in HIV-infected patients with active tuberculosis receiving rifampicin. Anchalee Avihingsanon, Thailand

MOAB103 TB co-infection treated at onset of therapy does not affect long-term risk of treatment failure among HIV-1 patients initiating efavirenz (EFV)-based combination antiretroviral treatment (cART). Ketan Patel, India

MOAB104 Incidence of sub-therapeutic tuberculosis drug concentrations and associated treatment outcomes among predominantly HIV-infected tuberculosis patients, Botswana. Sekai Chideva, United States

MOAB105 Mortality associated with TB in HIV positive and negative patients in the HAART era, in Rio de Janeiro, Brazil. Valéria Rolla, Brazil

16:30-18:00 Bayside Auditorium A - Bridging session

MOBS2 Immune Reconstitution Disease: Pathogenesis, Clinical

Presentation and Management

Co-Chairs: Bob Colebunders, Belgium and Nabila Seddiki, Australia

MOBS201 Immune reconstitution post HAART: how important are the gut and lymph nodes? Timothy Schacker, United States

MOBS202 Pathogenesis of mycobacterial IRD. Robert J. Wilkinson, UK

MOBS204 IRD and tuberculosis: clinical presentation, management and future challenges. Stephen Lawn, South Africa

Tuesday, 24 July 2007

16:30-18:00 Parkside Auditorium Bridging session

TUBS2 Paediatric HIV Infection - What's New?

Co-Chairs: Jeffrey T. Safrit, United States and John Ziegler, Australia

TUBS203 (17:10) The challenges in diagnosis and management of HIV-TB co-infection in children. Sam Walters, United Kingdom

16:30-18:00 Bayside Auditorium B - Symposium TUSY1 HIV/TB: An Evolving Epidemic

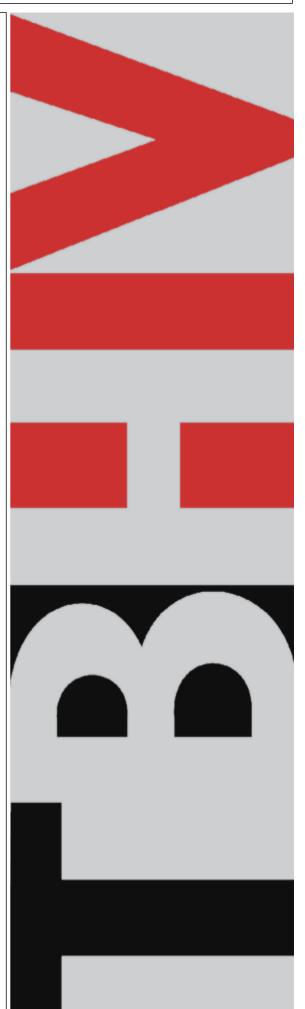
Chairperson: Diane Havlir, United States

TUSY101 Progress in the global HIV/TB epidemic. Haileyesus Getahun, Ethiopia

TUSY102 Diagnostics for TB: application of available technology and tests on the horizon. Mark Perkins, United Kingdom

TUSY103 Antiretroviral therapy and TB: challenges in the clinic. Soumya Swaminathan,

TUSY104 Isoniazid preventive therapy (IPT) in an era of multidrug-resistant tuberculosis (MDR). Alison Grant, United Kingdom



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People living with HIV are dying for better TB drugs, diagnostics and prevention

The Shack and Dialogues

TB/HIV Photographic Exhibition Networking Area – Bayside Terrace

An emotive exhibition portraying, in words and pictures, the double impact that TB and HIV have on people and communities in South Africa and Zambia. The artist, Damien Schumann, displays these striking images in an authentic South African township shack thus capturing the viewer in the context in which these diseases occur. The subjects recount their personal experiences of TB and



HIV in notes handwritten over their photographs. These images and personal testimonies strongly advocate for the urgent need to invest in research to improve the prevention, diagnosis and treatment of TB in people living with HIV.

Some key facts about TB in people living with HIV

- TB is the commonest presenting illness among people receiving antiretroviral treatment both in developed and developing countries.
- 14 million adults are co-infected with TB and HIV 70% of them live in Africa
- ■TB causes at least 11% of total deaths in PLHIV and up to 60% in some countries.
- The last new TB drug was developed more than 40 years ago and we still rely on smear microscopy as the mainstay for TB diagnosis and it was developed over 120 years ago
- Globally, less than 0.5% of PLHIV were screened for TB in 2005
- In some regions of Africa, up to 80% of adult TB patients are HIV-infected

Priority areas for research in TB prevention, diagnosis and treatment for people living with HIV*

Tuberculosis prevention

TB preventive therapy – overcoming the barriers to national scale up of preventive therapy; assessing impact of national programmes; alternatives to six months isoniazid; role in settings with high rates of drug resistance, how best to exclude TB disease; added impact in combination with ART; effectiveness in children.

TB infection control – preventing the transmission of TB (especially drug resistant TB-MDR and XDR TB) in high risk settings such as healthcare facilities, prisons, mines, assessing the role of HIV in transmission of drug resistant TB and the impact of infection control strategies on TB transmission.

Improved TB diagnosis

Faster, simpler and more reliable methods to diagnose TB infection, TB disease (especially for children and for smear-negative and extrapulmonary TB) and TB drug resistance.

• Improved TB treatment and co-treatment with HIV

Shorter, less complex TB treatment regimens (including for MDR and XDR TB) that are compatible with antiretroviral therapy.

Cotrimoxazole preventive therapy

Role of cotrimoxazole preventive therapy in era of increased access to ART; optimal timing and duration; understanding mode of action; ensuring uptake and adherence.

Antiretroviral therapy

Optimal timing for starting ART in HIV positive TB patients, optimal combination regimens to maximize effectiveness and minimize side effects, ensuring adherence to both treatments.

• Immune reconstitution syndrome

Refining clinical definition, diagnosis and management.

· Intensified case finding

Determining the best strategies for intensifying TB case finding in the community and for high risk groups (people living with HIV, contacts); identifying and validating best screening methods

* Adapted from the report of a WHO expert consultation meeting - TB/HIV research priorities in resource-limited settings. Report available at http://whqlibdoc.who.int/hq/2005/WHO_HTM_TB_2005.355.pdf

