

# Letter from the chair

## Optimism, reality, and the price of progress.

The challenges before us are as daunting as ever.

For instance, there is still massive denial that anal intercourse happens among heterosexuals. Consequently, an important driver in the global HIV epidemic remains invisible. This silence allows for people to entertain dangerous misconceptions from "anal intercourse is less risky than vaginal intercourse" to "you can't get HIV from anal intercourse."

It is also increasingly clear that gay men and other men who have sex with men (MSM) in the West are not the only ones suffering high rates of HIV infection. Gay men in Africa and other regions of the developing world are also disproportionately impacted—and are more often than not completely ignored in national AIDS strategies. Consequently, very few of them receive any prevention or care services. Human rights abuses against these men are rising.

Many gay men and other MSM in these areas don't even have decent access to water-based lubricants. How can we talk about rectal microbicides (RMs) in a context where men are using petroleum jelly, hand cream, butter, or motor oil as lubricants? Before RMs, we need water-based lubes—it sounds so simple, doesn't it?

Speaking of lubricants, it's concerning that regulatory authorities don't generally require rectal safety testing of sexual lubricants before they end up in purses, on nightstands, and in some of our most sensitive areas. Consequently, it is unclear which products are safest to use.

Despite these concerns, and others we discuss in this report, there are reasons for optimism. We are, in fact, working to address everything I just mentioned. We're not even close to getting to where we need to be, but we're on our way, and that's a good thing. Initial testing of lubricants for rectal safety has begun. And the RM field is maturing. We have one Phase I trial down, one in process, and one on tap. We've come a long way, baby.

At long last, the field has gone beyond simply testing vaginal products for rectal safety. We're no longer an adjunct; what we're talking about now is the efficacy of microbicides formulated specifically for rectal use. It's breathtaking, considering that just a few years ago "efficacy" and "rectal microbicides" uttered in the same sentence would have been cause for a fair amount of collective eye rolling.

But discussing efficacy with a twinkle in our eyes is not enough; we need to start preparing for late-stage (Phase IIb, III) clinical trials now, beyond the escalation of funding that will be required. We need a Global Rectal Microbicide Development Plan—a map by which stakeholders can set priorities for research and coordinate efforts across a full range of scientific activities, from discovery through Phase

III. In this era of limited resources and competing priorities, every dollar committed to RMs needs to be spent smartly and strategically. IRMA is ideally situated to lead the creation of such a plan.

Because our global footprint is so large, and our advocacy network has become a global powerhouse, it may surprise people to know that IRMA is not an organisation with lots of staff and commensurate funding. In fact, it's a project of the AIDS Foundation of Chicago, with a *portion* of one staff person—me. Without the in-kind efforts of our Steering Committee, other IRMA members, and allies, we couldn't exist. We are grateful to AVAC—Global Advocacy for HIV Prevention, Broadway CARES/Equity Fights AIDS, and the Elton John AIDS Foundation for their ongoing support and guidance, but honestly, it's not enough. If we are to continue uniting AIDS advocates, scientists, and policymakers around the globe in efforts to confront institutional and socio-cultural stigma, and denial; if we are to provide the necessary leadership to increase and diversify resources for RM research and development activities; if we are going to push for lubricant safety and keep shining a light on the role of anal intercourse in the pandemic, our work must be valued and supported.

Therefore, we call on the philanthropic community, including foundations and companies who support HIV/AIDS activities, LGBT health, and human rights, to follow the visionary leadership of our current funders and help sustain our ambitious agenda.

"For tomorrow belongs to the people who prepare for it today," goes an African proverb. Help us lay the groundwork for a tomorrow, somewhere in the not-too-distant future, when safe, effective, and acceptable RMs are accessible to anyone who needs them.

Yes you can.



Jim Pickett



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