

State of the ART: HIV Cure – where are we now and where are we going?

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Outline

- Is HIV cure possible?
 - HIV persistence
- Cure Strategies
- Ethical and social considerations

A Case of Cure

The Berlin Patient

Off ART	6 years
Treatment	CCR5-/- bone marrow transplant
Mechanism	Make cells Resistant to HIV
Lesson	Eliminate CCR5+/- cells

Transient but Encouraging HIV Remission

	Two Boston Patients ^{1,2}	The Mississippi Child ³
Treatment	CCR5+/ bone marrow transplant	Early ART
Off ART	3 months and 7 months	2.5 years
Lesson	Delayed viral rebound is achievable But unknown biomarkers for HIV remission	

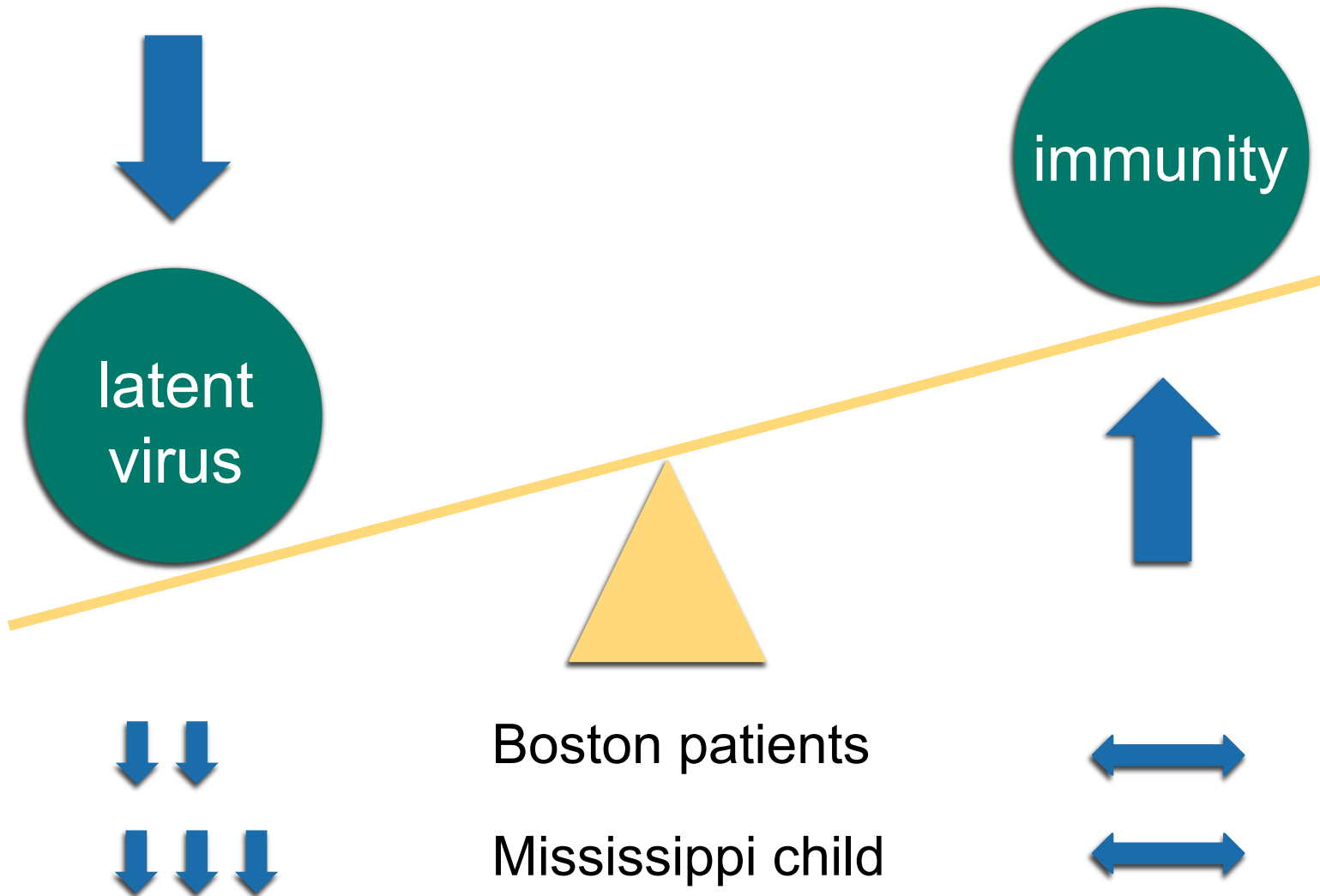
¹Henrich T, JID 2013; ²Annals Internal Medicine 2014; ³Persaud D, NEJM 2014

Challenges to Eradication

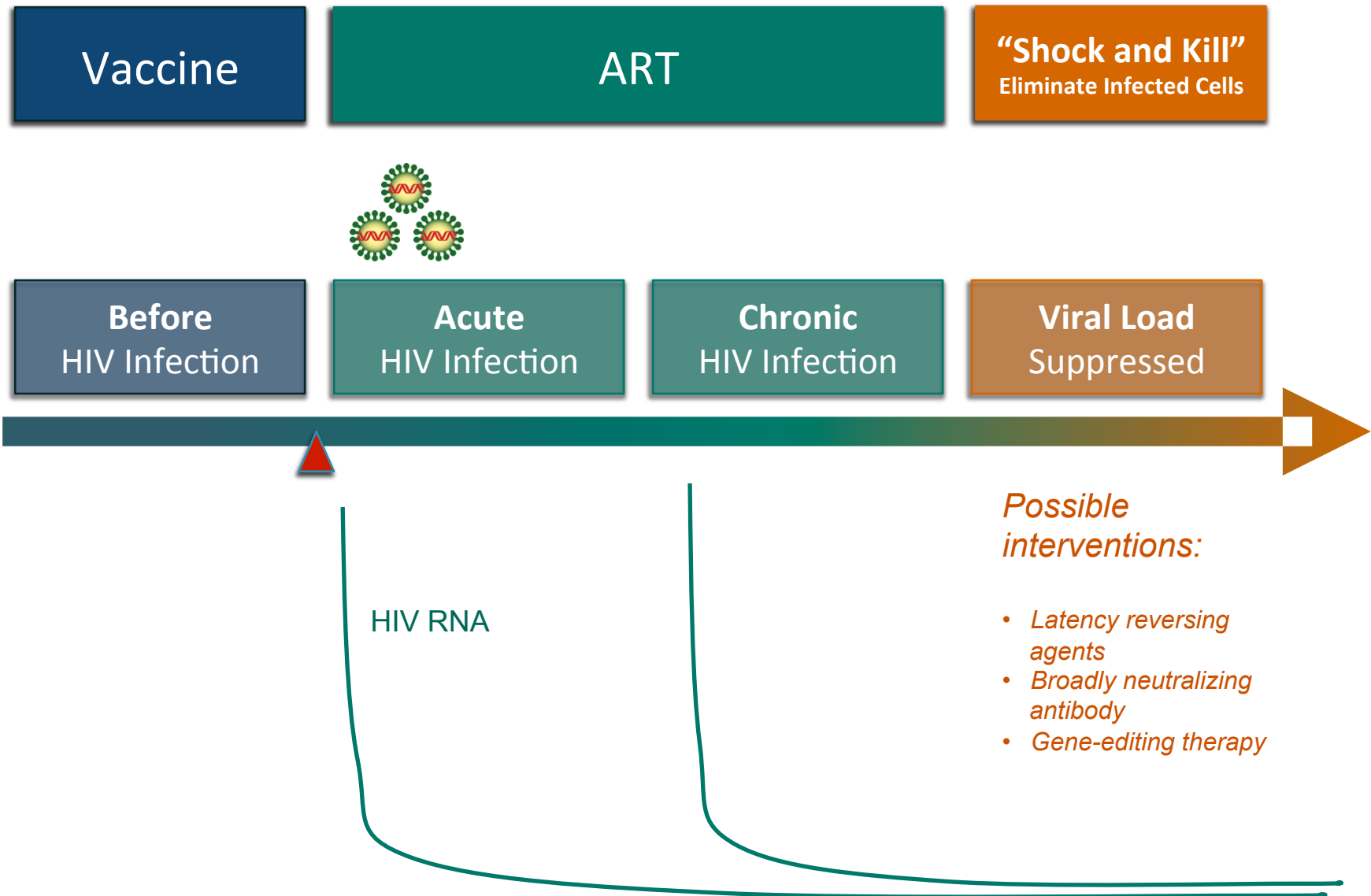
- HIV persistence
 - HIV can exist in a resting state where it persists, even in patients on suppressive antiretroviral therapy

- Accurately measuring the reservoir
 - Inability to detect all of the HIV that can replicate (called replication competent virus)
 - No definitive way to measure if HIV is eradicated

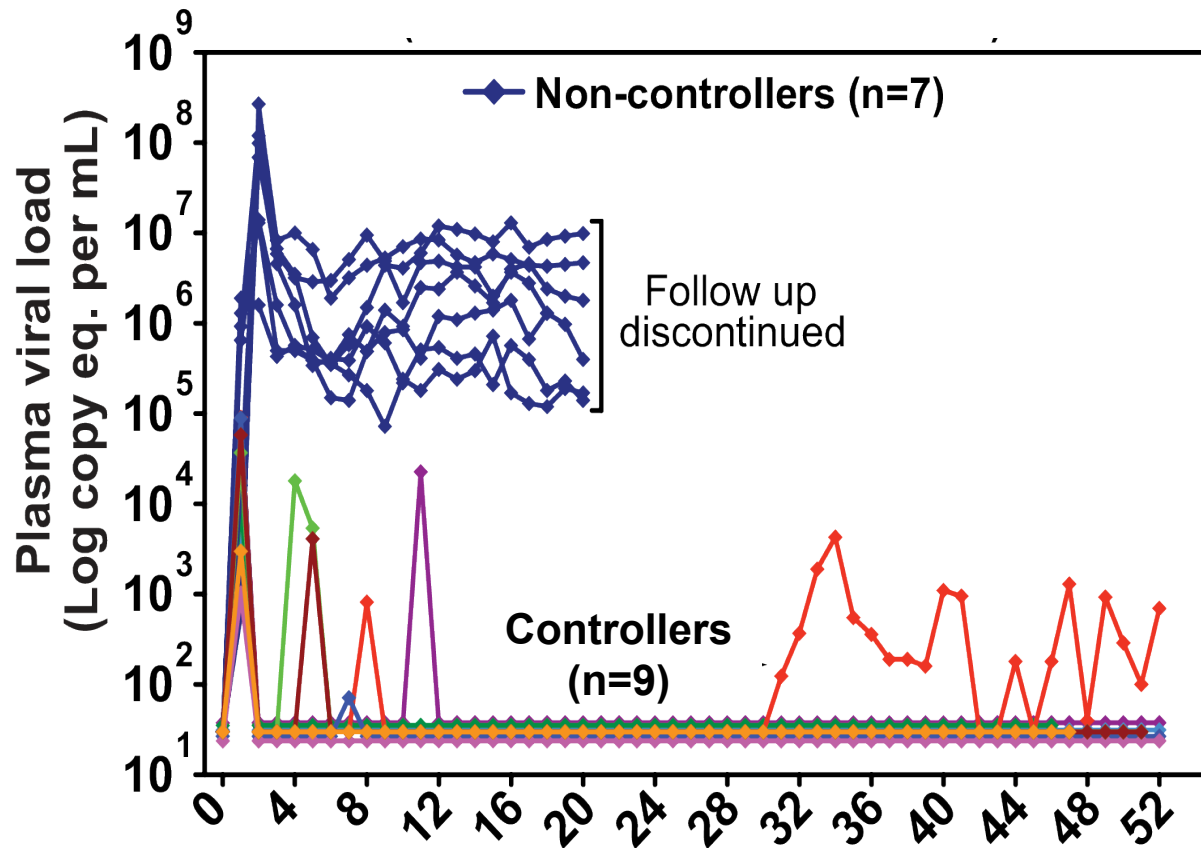
Reservoir and Immunity



Strategies to Eliminate HIV Persistence



Novel vaccine given before exposure may aid in viral control: SIV/macacaque model



No protection
but
Virus
eradicated in
50%

VISCONTI Cohort of Post-Treatment Controllers



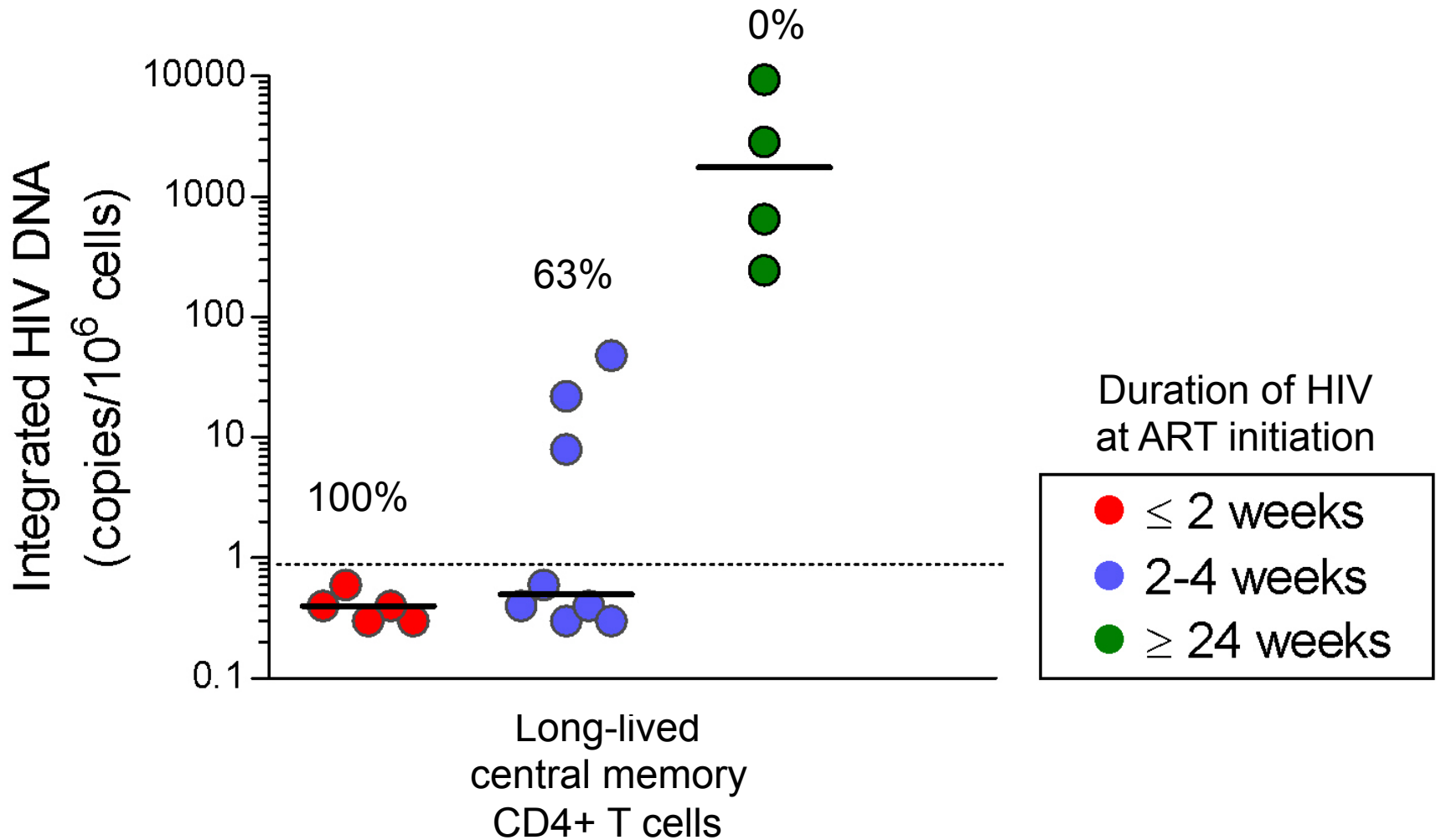
Why are these patients able to control HIV without ART?

**HIV reservoir amount
and location?**

- ✓ **Low HIV DNA**
- ✓ **In shorter-lived CD4 cells**

Early ART limits persistence of HIV reservoir

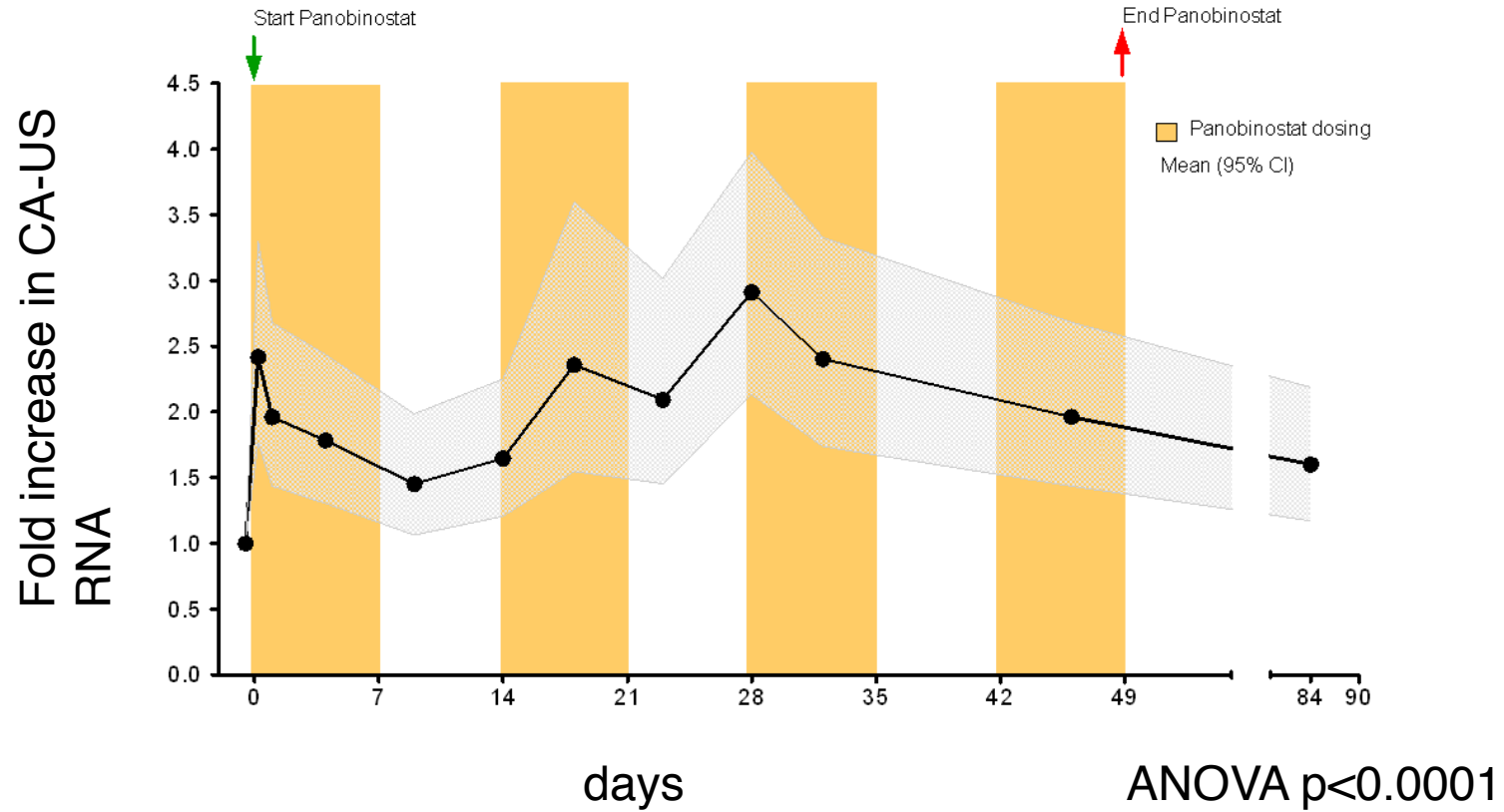
(RV254/SEARCH010)



Shocked but not Killed

HDACi Panobinostat

n=16

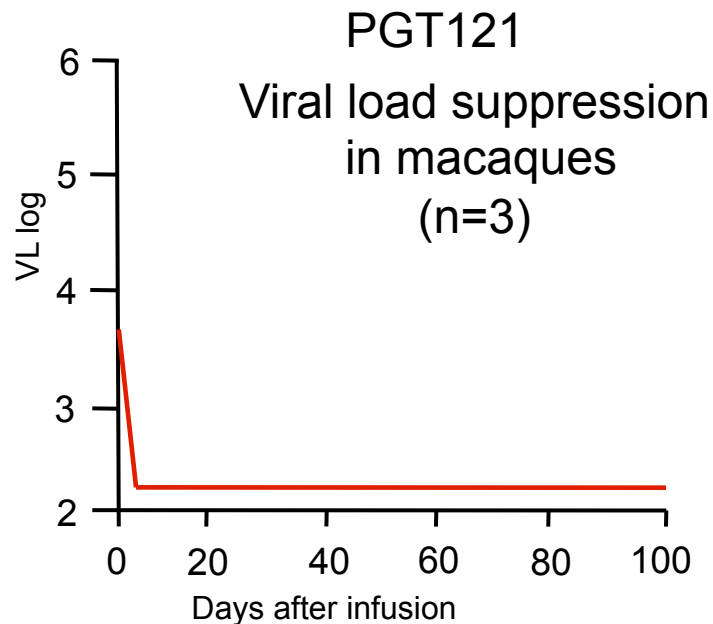
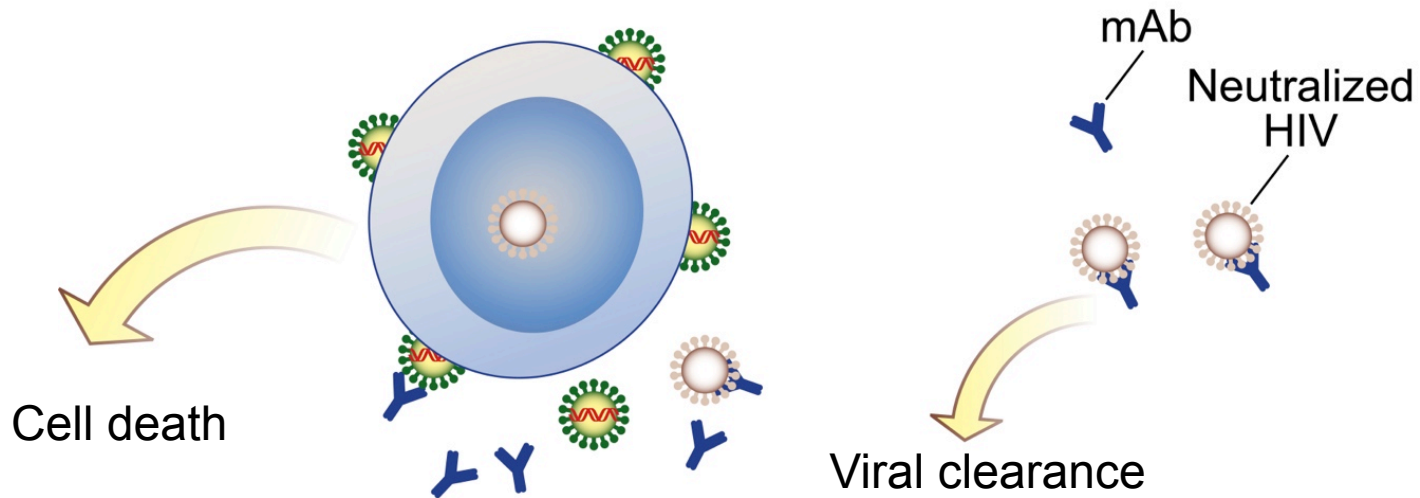


Goal: Force the hidden HIV "out into the open" and expose them to the immune system to eradicate them

Result: Replication competent virus did not decline

Broadly Neutralizing Antibody

(bNABs) neutralize multiple HIV-1 viral strains

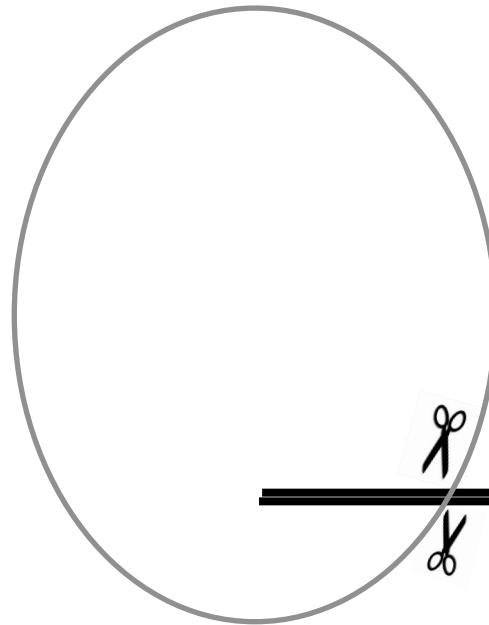
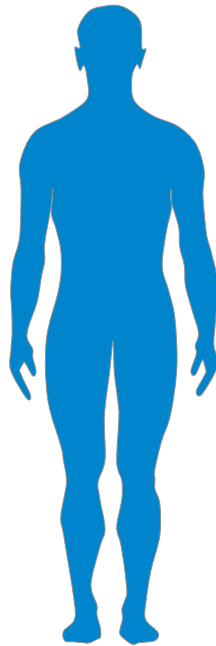


Barouch DH, Nature 2013

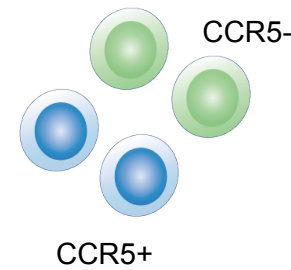
- > 30 antibodies identified
- Human studies
 - VRC01: RV397/398 in acute HIV
 - 3BNC117, 10-1074, PGT121

Gene therapy to eliminate CCR5

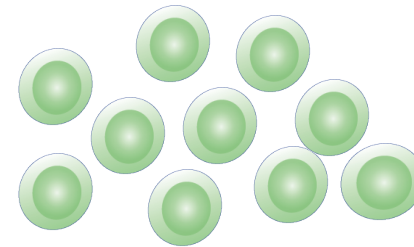
Leukapheresis
CD4+ T-cell isolation



Re-infuse



ZFN cut
CCR5 gene



Examples of strategies currently in human studies

MINIMIZE RESERVOIR
Limit reservoir with early treatment
Antiretroviral therapy
Broadly neutralizing antibodies

SHOCK
Reactivating latently-infected cells
Inhibit histone deacetylase
Inhibit bromodomain extraterminal
Activate toll-like receptors
Activate protein kinase C

KILL
Viral clearance by the immune system
Broadly neutralizing antibodies
Therapeutic HIV vaccines
Anti programmed cell death (PD)1
Anti PD ligand 1

Combination Cure

HIV RESISTANT CELLS
Transfusing cells without CCR5 gene
Gene-editing therapy
Bone marrow or cord blood transplantation

HIV Cure and Cure Research: Social and Ethical Considerations

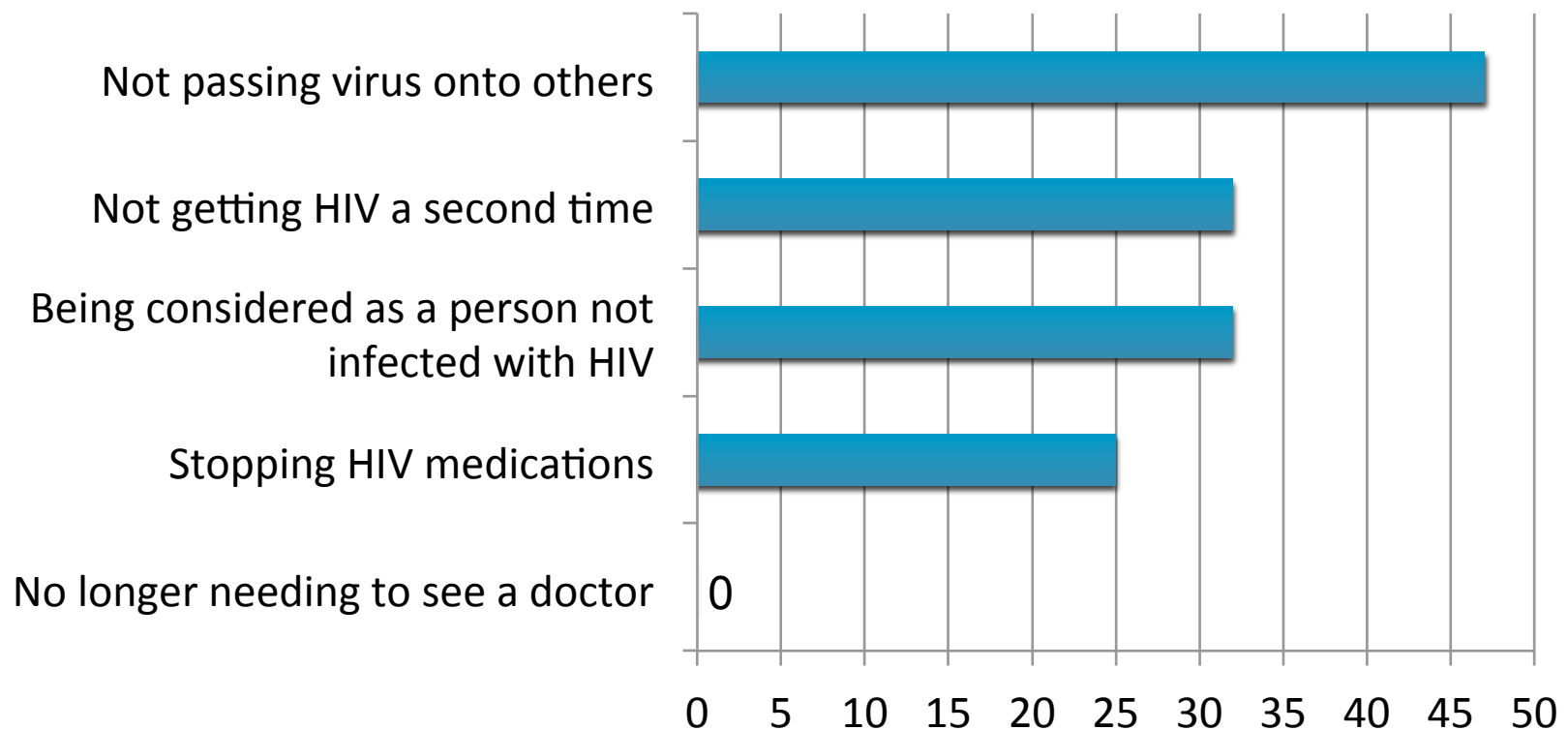
Societal and Individual Expectation

- Eradicated = normal or free of disease or healed
- Long-term adverse consequences of HIV
 - New normal
- Long-term monitoring of viral load
- Stigma and discrimination
- When to call someone “cured”?¹
 - Best measure of reservoir is not known
 - HIV remission
 - $VS_{LLD}OT_{time}$ = Viral Suppression Off ART

¹Forum Cure Project (V. Miller)

Australian Participants' Priorities on Outcomes of Cure Research

20 participants with chronic HIV infection in vorinostat (HDACi) trial



Ethics of HIV cure

- Ideal candidates are persons who are well with viral suppression
- Potentially toxic interventions
- ART interruption
- Cost and accessibility

What might the future look like?

Preventive HIV Vaccine

- Prevent infection
- Modulate immunity to limit viral reservoir

**Early Diagnosis
Early Treatment**

- Limit HIV reservoir and replication

Novel Therapy

- Eliminate all cells capable of producing HIV

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