

Senator Chris Van Hollen  
United States Senate  
Washington DC  
March 1, 2017

Dear Senator Van Hollen,

We are writing to express our belief in the importance of NIH funded HIV/AIDS research. We are nurses, members of the Association of Nurses in AIDS Care (ANAC) and Maryland residents. ANAC is a professional nursing membership organization that represents nurses around the globe involved in HIV treatment, prevention and research. ANAC has chapters throughout the US, including the Baltimore based Chesapeake Chapter with members who work at Johns Hopkins, University of Maryland, City and State Health Departments and other health centers and clinics. We have witnessed the tremendous impact that medical advances, borne out of NIH research have made in the lives of our patients and other people living with HIV. This impact has improved the survival, well-being and quality of life for patients in Maryland, throughout the United States and indeed, throughout the world.

We must continue to support NIH funded clinical and bench research that will improve our understanding of the disease and optimize HIV prevention and treatment approaches. We have made much progress in the past 30 years, and we are at the critical juncture of being able to decrease new HIV infections and improve healthy outcomes for people living with HIV, thanks to research. The many accomplishments of NIH funded HIV/AIDS research includes the development of numerous drugs for HIV treatment (known as anti-retrovirals or ART) and is too extensive to fully recount here, but a few important examples include:

- PACTG 076: The landmark study that showed that ART drugs that treat HIV can be used to interrupt mother to child transmission of HIV. This virtually stopped pediatric AIDS in the United States and has significantly decreased the perinatal spread of HIV in many countries, including South Africa.
- HPTN 052: Demonstrated that effective ART treatment not only improves the health of the person on treatment, but also prevents the sexual transmission of HIV to their partner. This became the basis for Treatment as Prevention, an approach that is being scaled up across the US and will contribute to decreased infections.
- IPREX: Demonstrated that the use of ART by HIV negative men who have sex with men would significantly lower their risk for HIV acquisition. This strategy known as PrEP (Pre-exposure Prophylaxis for HIV prevention) has been studied in other populations and is now being scaled up across the US.

However, strict adherence to ART regimens is necessary for treatment & prevention, yet difficult to achieve for many people. Non-adherence increases the risk of ART resistance and treatment and prevention failure. Therefore, continued research on better long-acting biomedical prevention agents, optimizing treatment regimens, strategies to destroy the body's reservoir of latent HIV and an effective HIV vaccine for large scale prevention is critical. We must continue to build on the past investments in HIV research and leverage those resources to finally achieve comprehensive prevention, including an HIV vaccine and ultimately a cure for HIV.

Current NIH HIV research efforts that include long acting prevention and care approaches, innovative approaches such as mono-clonal antibodies that neutralize HIV virus and a functional HIV cure will continue the arc of science and data driven efficient research results that will end the HIV epidemic. But we're not there yet. We must continue the quality and pace of research over the next decade, our patients deserve no less.

Sincerely,

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