

There are no translations available.

POSITIFS, unable to get to the conference for financial reasons, this analysis is made from the information provided by the NAM association we thank and Abstracts for the conference online.

This international conference aimed rather than make significant therapeutic advances, to promote and expand the existing antiviral prescription, but with some new molecules, compelling results on the treatment of Hepatitis C, PrEP, but unfortunately no new HIV eradication track out systematic failures explored ways and little progress to alleviate the toxicity of antiviral drugs.

It is amazing that on a plethora of work presented (over 1000 études) by thousands of researchers and invested huge sums, none brings a critical waiting for early response of patients, namely the eradication of the virus or an effective preventive or therapeutic vaccine. Overall, everything happens as if the only goal of the research-driven pharmaceutical lobbies and their national and international political allies was to convince HIV patients taking HAART after the announcement of his HIV status, and keep for life, and for any individual HIV-negative sexually active, make a pre-exposure prophylaxis (PrEP), namely a reduced antiviral treatment (monotherapy) for life!

In the plethora of information floating interest include:

The Pre-exposure prophylaxis PrEP remains little used, despite the propaganda of the lobbies and associations they finance. And only 5% of Americans use. More a case of contamination of a person strictly observing the treatment was introduced (Gus Cairns), which discredits this prophylaxis. This case should encourage authorities and associations fighting against AIDS to promote strongly the condom, which remains the only effective prevention, non-toxic and a very low cost.

A phase 2 trial (Liz Highleyman) demonstrated the feasibility of making the least restrictive treatment for patients with the injection of two antivirals (cabotegravir and rilpivirine) for long life every 4 or 8 weeks. By comparison with daily oral treatment showed comparable efficacy.

Another simple and effective treatment is presented by Cindy L. Vavro with dolutegravir (Abstract 609). It is shown that monotherapy with dolutegravir possible.

A treatment lasting protecting HIV, effective on monkeys, was developed by the American team of Michael Farzan (Abstract 528). This exciting work requires additional studies on product safety among both macaques and humans.

Another trial of a therapeutic vaccine was led by Felipe Garcia team of Barcelona Hospital Clinic. In the tests conducted on forty patients who interrupted their antiretroviral therapy, the vaccine was able to temporarily control the virus replication with a maximum reduction in viral load of more than 90% compared to the initial charge. This result is similar to the response obtained with monotherapy using antiretroviral drugs "that act, they, by inhibiting at different stages of the HIV replication mechanism. This vaccine provides a breakthrough in the fight against AIDS because it avoids temporarily taking daily medication for life, "which causes

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discomfort to the patients due to possible toxic effects in the long term, added to its high economic costs," notes the research team. However, the only vaccine helps reduce viral load for a maximum of one year period after which patients must take anti-retroviral drugs.

We should also mention a study (Keith Alcorn) on the benefits of vaccination with Gardasil to protect from HPV-associated anal cancer. Not only vaccination has no benefit on the risk of cancer, but mostly it exposes the patient to major risks caused by vaccination that the scientific community chooses to ignore (see our website C.103).

Several hundred presentations on patients co-infected HIV / HCV but surprisingly only about twenty patients with access to treatment sofosbuvir / Simeprevir which almost always allows healing. Recall that the labs extort bankrupt health systems of developed countries with high prices leading to a shameful selection of patients with access. Note that some French patients are encouraged to order their treatment in India or Egypt where generics are 100 times cheaper!

Simultaneously with the conference real hope was born with the announcement of a therapeutic vaccine for the startup Biosantech based on a patent of the CNRS (see this site C.104), hope that adds Dr. Prakask eradication treatment superbly ignored by the world of orthodox research (see this site C.92).