



The Need for Microbicides

Current HIV prevention options are not enough. Women and girls increasingly bear the burden of the HIV/AIDS epidemic, with more than 15.4 million women now living with the disease across the globe.ⁱ Being female, married and poor are often the most significant risk factors for acquiring the infection. The “ABC” approach (Abstinence, Being faithful and using Condoms) has proven to be an impractical prevention method for many women.

Abstinence is unrealistic for married women and for those who face sexual aggression on a regular basis. Being faithful and using condoms, although effective, require the consent of a male partner, which in many situations may not always be forthcoming. Furthermore, using condoms or abstaining prevents women from bearing children. For many women, particularly in resource-poor countries, their ability to bear children determines their status in society and within their marriage. In sub-Saharan Africa, nearly six in 10 women and girls are living with HIV.ⁱⁱ

New female-initiated prevention options like microbicides are urgently needed. Vaginal microbicides are being developed to reduce the transmission of HIV to women during sex with a male partner. These products would give women a new way to protect themselves from HIV, one that would empower women to protect their own health. They could take the form of vaginal gels, rings, tablets and films that would release the active ingredient gradually over time. Microbicides would attack the virus at multiple points in its life cycle, from the moment the virus enters the vagina during intercourse.

Vaginal microbicides would be a vital part of a comprehensive HIV prevention strategy. Vaginal microbicides would complement other prevention methods such as behaviour change, abstinence, male and female condoms, treatment of sexually transmitted infections and male circumcision, and other potential methods such as oral prophylaxis and HIV vaccines.

Microbicide candidates are currently in clinical trials. One early-generation microbicide candidate remains in a large efficacy trial, with results expected by the end 2009. A newer generation of antiretroviral (ARV)-based microbicides is also being tested in a variety of safety and efficacy trials. Those next generation microbicides are based on the same ARV drugs being used successfully in treatment and to prevent mother-to-child transmission of HIV.

The microbicide field has a global constituency. Microbicide research and development is funded by many countries including Australia, Belgium, Brazil, Canada, China, Denmark, France, Germany, India, Ireland, Italy, the Netherlands, Norway, South Africa, Spain, Sweden, the United Kingdom and the United States (the European Commission is also a funder).ⁱⁱⁱ Many countries also host microbicide trials or have plans to do so, including Belgium, Germany, the Netherlands, the United Kingdom, Australia, Dominican Republic, India, Kenya, Malawi, Tanzania, Thailand, Rwanda, South Africa, Uganda, Zambia, Zimbabwe and the United States.^{iv}

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ⁱ UNAIDS/WHO “Aids Epidemic Update,” December 2007

ⁱⁱ UNAIDS/WHO “2008 Report on the global AIDS epidemic,” July 2008

ⁱⁱⁱ HIV Vaccine and Microbicide Resource Tracking Working Group “Building a Comprehensive Response,” Nov 2007.

^{iv} Alliance for Microbicide Development “Microbicide Candidates in Ongoing Clinical Trials,” April 2008.

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