

cbas Newsletter

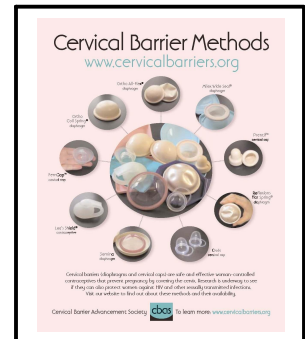
published by the Cervical Barrier Advancement Society

CBAS Newsletter: Volume 1, Number 2

November 2004

CBAS poster!

The Cervical Barrier Advancement Society announces its new poster. The poster is available for download at the CBAS website: www.cervicalbarriers.org. In addition, CBAS members and others who are interested can receive full size copies of the poster by emailing info@cervicalbarriers.org with a shipping address and the number of posters you would like.



Cervical Barriers Featured in *American Sexuality Magazine* as Potential HIV/STI Prevention Methods

A recent issue of *American Sexuality Magazine*, features an article entitled "Cervical Barrier Methods: Expanding Women's Options for HIV/STI Prevention" (Volume 2, Issue 5). This article highlights the urgent need for expanding HIV/STI prevention options for women, and discusses research on cervical barriers as potential prevention methods.

The diaphragm, a cervical barrier method that has long been used as a contraceptive, is being investigated as a potential candidate for a female-controlled HIV/STI prevention method. Observational studies suggest that the diaphragm may offer some protection against chlamydia, gonorrhea, pelvic inflammatory disease (PID), and cervical cancer, but more research is needed to translate these findings into clinical

recommendations. Several factors make the cervix biologically more vulnerable to HIV/STIs than other areas of the female reproductive system.

First, the delicate lining of the cervix is more easily damaged than the thicker cell lining of the vagina. Secondly, recent evidence suggests that the cervix has a concentration of cells with HIV receptors, increasing its vulnerability to HIV infection. Finally, the cervix is the entryway to the upper genital tract, so covering the cervix also protects these areas from infection.

If current research shows that the diaphragm can reduce the risk of HIV and other STIs, women may soon have an alternative prevention method which protects against both pregnancy and HIV/STIs. The article can be accessed online at <http://nsrc.sfsu.edu>.

Lack of Access to Contraception Results in Disproportionate Number of HIV Cases among Women in Developing Countries, UNFPA Report Says

According to a report released on September 15, 2004 by the UNFPA titled "The State of World Population 2004," about 350 million people in developing countries lack access to contraception, which has resulted in a disproportionate number of women being affected by HIV/AIDS. Ten years after the International Conference on Population and Development (ICPD) in Cairo, which set the goal of improving family planning pregnancies, funding for contraceptive access from the international community has dropped in half.

In 2003, there were 52 million unwanted pregnancies worldwide. According to the report, the world population is expected to grow from 6.4 billion in 2004 to 8.9 billion by 2050, with the 50 most resource-poor countries tripling in population. Moreover, the report emphasizes that continued gender-based discrimination and violence has made women especially vulnerable to HIV infection. To read the full UNFPA report, go to: <http://www.unfpa.org/swp/swpmain.htm>.

AIDS Activists Join Together and Demand “I Want My M-T-V!”

Leading HIV/AIDS advocates from the often disparate fields of microbicides, treatment access, and vaccine research came together at the International AIDS Conference in Bangkok in July 2004 to develop a comprehensive, rights-based approach to global HIV/AIDS advocacy.

Experts in all three areas from 12 countries gave unanimous support for a joint Statement of Commitment and released a 12-point Action Plan, which has as its goal “the full realization of the human right to the highest attainable standard of health for all people living with and affected by HIV/AIDS.” Based on the recognition of the synergy between prevention, treatment, and care, the new plan, called MTV (for microbicides, treatment, and vaccines), focuses equal attention on both short-term and long-term strategies.

According to the MTV Statement of Commitment, “Treatment strategies will not succeed if prevention efforts are failing, as there will always be more people requiring treatment. Prevention strategies will not succeed if treatments are not accessible. Where treatments are accessible, the nexus between AIDS and death is broken. Hope is generated and stigma is reduced. As a result, people are more willing to come forward for testing and are more likely to access prevention services.”

The statement addresses the immediate need for expanded access to treatment, prevention, and care, while also targeting the need to accelerate research for the longer-term initiative. Communities must be mobilized to this end, providing an effective foundation for the introduction of new products and tools as they become available. Please consider endorsing the MTV Statement of Commitment. To endorse the statement, email Richard Elliott at relliott@aidslaw.ca. To download the Statement of Commitment, go to the Canadian HIV/AIDS Legal Network website:

www.aidslaw.ca/Maincontent/issues/vaccines.htm

Amphora, First Sexual Lubricant Approved by FDA as Potential Microbicide; Softcup® trials underway

Instead, Inc. is now marketing Amphora (also known as Acidform), a sexual lubricant that has been shown (in pre-clinical and early clinical testing) to be an effective spermicide, and, in the test tube, to inactivate the pathogens causing chlamydia, gonorrhea, herpes, and HIV. The Global Campaign for Microbicides emphasizes that Amphora must be marketed only as a sexual lubricant until it has been proven effective as a microbicide. Clinical trials on the effectiveness of Amphora as a contraceptive microbicide used in conjunction with the Instead, Inc. Softcup® began in fall 2004, and data are expected within six months. The Softcup®, which is currently sold throughout Canada, the US and Europe as a feminine hygiene product that collects, rather than absorbs, menstrual flow, has been approved for use as a contraceptive, when used with a spermicide, by the Russian Academy of Medical Sciences, and is currently marketed as an over-the-counter disposable contraceptive diaphragm in the Russian Federation.

Lea's Shield Update

The Lea's Shield® contraceptive is a silicone barrier with a removal loop and valve for the passage of menstrual fluid and cervical secretions. It comes in one size and is approved for up to 48 hours of continuous use. Planned Parenthood has updated their website on cervical barriers to include information on the Lea's Shield and will be prescribing and distributing the Lea's Shield in the US. The Lea's Shield also now has a website: www.leasshield.com.



Nonoxynol-9 Fact Sheet Now Available

A fact sheet has been produced by researchers from Ibis Reproductive Health and the Reproductive Health Technologies Project, which presents current data on the safety and efficacy of the spermicide nonoxynol-9 (N-9) for contraception and prevention of HIV and other sexually transmitted infections. The Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO) agree on the following recommendations:

- *N-9 is a safe, effective contraceptive option for women at low risk for HIV/STIs who do not use the product more than once a day*
- *N-9 should not be used to prevent HIV/STIs*
- *N-9 should not be used rectally*

There is a need to expand OTC contraceptive options available to women, including the development of microbicides and alternative spermicides. You can download the fact sheet from www.cervicalbarriers.org.

Cervical Barriers at International AIDS Conference 2004

The XV International AIDS Conference 2004 (Bangkok, July 11-16) brought together almost 20,000 delegates from over 150 countries from every facet of the international HIV community, including scientists, caregivers, community, and clinicians, to address how to advance access to science, prevention, treatment, and resources for all people around the world, under the theme "Access for All." For more information, go to: www.aids2004.org.

The conference featured a unified program integrating science, community and leadership. It included plenary sessions, community outreach initiatives, presentations, satellite meetings, cultural workshops, and poster sessions. The partner organizations in the MIRA trial of the diaphragm for HIV prevention made several presentations at the conference that were focused specifically on research involving diaphragms:

- 1) Watadzaushe C, Montgomery E, Chidanyika A, Kamba M, Chihota E, Meehan A, Padian N, Chipato T. Community involvement and response to a new HIV prevention technology in Zimbabwe.
- 2) Meehan A, Chidanyika A, Naidoo S, Dider L, Ramjee G, Chipato T, Dinat N, Blanchard K, MIRA team and Padian N. Prevalence & risk factors for HIV infection in Zimbabwean and South African women: Preliminary analysis of the MIRA trial screening population.
- 3) Van der Straten A, Montgomery E, Lee M, Chipato T, Ramjee G, Blanchard K, Padian N. Diaphragm insertion skills among South African and Zimbabwean women in a HIV prevention trial.
- 4) Lince N. Removing regulatory barriers to widespread use of the diaphragm as a potential HIV prevention method.

Recent Publications Address Acceptability of Cervical Barriers, Providers' Perspectives

A number of recent publications have presented results from clinical trials on cervical barrier acceptability and family planning providers' perspectives. S. Marie Harvey, director of the Research Program on Women's Health, and her colleagues have published a study on factors influencing women's likelihood to continue using the diaphragm and exploring the implications on diaphragm acceptability. In another article, Harvey's team highlights the need for further research on acceptability among potential users and among providers, in order for the diaphragm to be widely used to prevent pregnancy and, if warranted, also STIs. Several recently-published articles on diaphragm acceptability are listed here:

- 1) Harvey SM, Bird ST, Maher JE, Beckman LJ. Who continues using the diaphragm and who doesn't: implications for the acceptability of female-controlled HIV prevention methods. *Women's Health Issues* 2003;13(5):185-193.
- 2) Harvey SM, Bird ST, Branch MR. A new look at an old method: the diaphragm. *Perspectives on Sexual and Reproductive Health* 2003;35(6):270-273. www.guttmacher.org/pubs/journals/3527003.html
- 3) Bird ST, Harvey SM, Maher JE, Beckman LJ. Acceptability of an existing, female-controlled contraceptive method that could potentially protect against HIV: a comparison of diaphragm users and other method users. *Women's Health Issues* 2004;14(3):85-93.
- 4) Maher JE, Harvey SM, Bird ST, Stevens VJ, Beckman LJ. Acceptability of the vaginal diaphragm among current users. *Perspectives on Sexual and Reproductive Health* 2004;36(2):64-71. www.guttmacher.org/pubs/journals/3606404.html

Safe Sex Is Good Sex – A Lesson for HIV Prevention

A thought-provoking new development in HIV prevention emerged at the International AIDS Conference in 2004, in a session called "Can we have safer sex if we don't know how to have good sex?" This launched The Pleasure Project, an educational resource promoting safe sex to men and women. Discussions and presentations included the use of the Kama Sutra to advocate for creative monogamy, sex positive resources for gay men and HIV positive women, incorporation of the female condom use into commercial sex work, and promotion of sexual lubricant alongside condoms in Asia. The Pleasure Project avoids negativity, promoting safer sex by focusing instead on the prime motivators for having sex: desire and pleasure. Evidence suggests that positive incentives provide the most effective way to get people to want to have safer sex. For more information, visit The Pleasure Project's website at www.the-pleasure-project.org.

Regulatory Barriers to Diaphragm Use for HIV Prevention

Naomi Lince, Ibis Reproductive Health, gave a presentation on legal and regulatory barriers to widespread use of the diaphragm as a potential HIV prevention method at the International Conference on AIDS, held in July 2004 in Bangkok Thailand. The diaphragm is currently approved for use in many family planning programs, and if proven effective in reducing HIV and/or STI transmission through clinical research, demand will certainly increase. Structures exist in many countries today which could serve to coordinate regulation of medical devices such as the diaphragm, but for this to occur without impeding access unnecessarily, legislation and regulation must be evidence-based, updated in a timely fashion, and adequately enforced.

The full presentation can be accessed at www.cervicalbarriers.org.

UPCOMING EVENTS

Event: Conference on Young People's Sexual and Reproductive Health Needs: Progress, Achievements, and Ways Forward

Date: 2-4 December, 2004

Location: New Delhi, India

Website: www.cortindia.com

Description: The conference will address the sexual and reproductive health needs of young people, including global and regional experience; innovative intervention models; the role of the public and private sector in delivering reproductive health services; experience and challenges of outreach; evidences, implications, and possible interventions for coercive sex; and a panel presentation by young people.

Event: African Health and Illness Conference

Date: 25-27 March, 2005

Location: University of Texas at Austin

Website: www.utexas.edu/conferences/africa

Contact information: Matthew Heaton, mattheaton@mail.utexas.edu

Description: The conference will encompass a wide range of disciplines and perspectives, and themes will include: ailments and treatments; psychosocial affects and effects; war and trauma; the body and space; famine and other un/natural disasters; local, national and global politics; epidemiology; health as a profession; autobiographies of health and welfare.

Event: Population Association of America Annual Meeting

Date: 31 March-2 April 2005

Location: Philadelphia, PA

Website: <http://paa2005.princeton.edu>

Contact information: stephanie@popassoc.org

Description: Themes include: Fertility, Family Planning, and Reproductive Health; Marriage, Family, and Households; Children and Youth; Health and Mortality; Race, Ethnicity and Gender; Migration and Urbanization; Economy, Labor Force, Education and Inequality; Population and Development; Population and Aging; Applied Demography.

Event: AIDS Impact Conference

Date: 4-7 April 2005

Location: Cape Town, South Africa

Website: www.sahara.org.za,

www.aidsimpact.net

Contact information: organiser@aidsimpact.net

Description: AIDS Impact focuses on the psychosocial impact of the latest medical advances in HIV treatment, addressing the changing interaction between the biological, psychological, and social effects of the infection.

Event: National HIV/AIDS Update Conference

Date: 10-13 April 2005

Location: Oakland, CA

Website: www.amfar.org/cgi-bin/iowa/nauc/index.html

Contact information:

robert.giannasca@amfar.org

Description: The National HIV/AIDS Update Conference presents the latest information on critical prevention, treatment, and care issues, aiming to translate research advances into practical strategies to help end the AIDS pandemic and improve the lives of people living with HIV/AIDS.

Event: Global Health Council Conference

Date: 31 May-3 June 2005

Location: Washington, DC

Website: www.globalhealth.org/conference

Contact information:

conference@globalhealth.org

Description: The Global Health Council Conference will address delivery of systems of health care, disease prevention, and health promotion that have an impact on the principal killers and contributors to the unacceptable global burden of disease: diseases that affect children and young people, women's reproductive health, HIV/AIDS, other major infectious diseases, and emerging global health threats.