Fear of a Vax Planet

Our POZ correspondent decides to enter a VaxGen trial and faces a flood of emotions.

October 1, 1999 By Timothy Burton

Destiny, it seemed, had called me to watch television. There I sat last April with my mother and two nieces when a segment came on the local news about a Phase III AIDS vaccine trial, sponsored by VaxGen, opening in nearby Washington, DC. The report, which profiled a local volunteer, lasted no more than two minutes. But by the time the screen flashed a phone number for interested volunteers (especially people of color), I felt like the newscaster was speaking directly to me.

“I’m going to do it,” I declared matter-of-factly. “I’m going to volunteer.”

Over the newscaster’s voice, I heard my nieces take a collective gasp. “Oh my God, do you have AIDS, Uncle Timmy?” asked the 21-year-old.

No, I told her, I’m HIV negative. That’s why I should do the study. They need people like me to test vaccines.

“You mean, they’re going to give you AIDS?” asked the 16-year-old.

Again I said no. From what I knew of AIDSvax, I would be given a synthetic protein, designed in a lab to imitate one on the outer surface of HIV, to induce antibodies against the virus. My blood would be tested over the course of three years to check the vaccine’s efficacy.

While my nieces peppered me with questions for 15 minutes, my mother sat as silent as the Sphinx. Later she cornered me in the kitchen. “I’m not going to lie,” she said. “I’m scared.”

Scared. That’s how I and so many people I know have felt since the epidemic started. We have been drowning in fear -- fear that we would one day become HIV positive or that we’d soon fall sick and succumb to an inevitable, painful death. Recently this fear has lessened its grip, at least in the United States. Yet many in the gay community, not to mention in Africa and Asia, persist in the hope that something will arrive to dismantle that fear altogether. For the moment, many are pinning their red ribbons on an AIDS vaccine.

After years of inaction and political red tape, a fire now burns stronger to discover a vaccine -- and researchers need a corps of volunteers to act as human test tubes. What dawned on me, as I gazed at the television screen, was that I was an ideal candidate: a healthy, sexually active

African-American gay male. Being a sexually active gay man, I stand a chance of being exposed to the virus, as I will likely have partners who are positive. And being African-American rates high because scientific trials are often slim on volunteers whose skin tone isn't pink.

Of the 60-plus vaccine trial sites across this self-proclaimed melting pot of a country, Washington, DC (African-American population, 65 percent) has the highest proportion of people of color participating: 15 percent. Even with strong recruitment efforts here, African-Americans still fear this trial, feeling the emotional aftereffects of the Tuskegee experiment (which studied, over decades, the effects of untreated syphilis on African-American men). What can ease such fear? Responsible trial design, certainly, including detailed informed consent. But also courage. The courage to come forth and say, "It's time for me to help my brothers."

What makes me an ideal candidate is, above all, that I so desperately want to do something. I'm tired of watching AIDS become less of an "issue" in this country, while infection rates remain so high among young people, women and African-Americans. (My nieces fall into all of these categories.) I'm tired of being told the fight is over. This trial, I realized, would be my way of saying to deceased lovers, to those who have just seroconverted and to longtime survivors, "You are not forgotten."

After an initial screening and HIV test -- during which I battled doubts that I'd leaped before I'd looked -- I called a friend. He mentioned that after moving to a different state, the price of his AIDS meds had increased. He worried whether he could still afford them. Unsure of how to respond, I blurted out that I was planning to be a part of an AIDS vaccine trial. He was silent for a moment, and then, haltingly, he said, "Thank you." After a bit a soft noise rose through the receiver. Is that static? I wondered. Or is he crying? Slightly embarrassed, I let the moment stand between us before I said, "You're welcome."

I found out some days later that I had been accepted into the trial, the 150th volunteer of 300 sought for DC. So far, I've undergone three vaccinations. Another is slated for September, and then I'll get one every six months until January 2002. Only 70 percent of us will receive the vaccine; the others, placebo. None of us -- researchers or volunteers -- will know who has received what until the trial is complete.

Even if I'm receiving the placebo, it doesn't matter. I feel as if I'm giving something back to the communities of which I am a part, helping to rid people of their fear. I'm thrilled to be in this trial. It reminds me that we sometimes have to swim through fear to get to our islands of joy.

Pick a Winner

Contestants in the race for a vaccine

Live-attenuated virus Uses live but weakened HIV, which may prep the immune system to better respond when exposed to the real thing. Fear over safety has delayed human tests.

Whole-killed virus Jonas Salk's concept -- inactivated HIV, unable to replicate -- has stopped

polio, flu and typhoid fever. Holds promise for restoring CD4 cells in people with HIV.

Recombinant proteins Uses an HIV surface protein (gp120 or gp160) to activate antibodies. VaxGen's AIDSvax, using gp120, is in Phase III human trials. Expensive to make, and appears ineffective.

Pseudo-virions Here the body is exposed to HIV-like particles produced by other viruses infected with pieces of HIV DNA. Safer than live-attenuated or whole-killed HIV. In phase I studies at Therion.

Naked DNA Pieces of HIV DNA are injected directly into muscles to make the body's cells produce HIV proteins, sparking immune response. Phase I trials under way or starting soon by the feds, Chiron, Merck and Wyeth Lederle. Safe, stable and cheap to make.

Peptides Exposes the body to short portions of HIV proteins, called "peptides." Cel-Sci, United Biomedical and Wyeth Lederle have tested synthetic peptides in small human studies. Supersafe, but may have little effect.

Live vectors Researchers place HIV proteins or genes into harmless microbes. Infected cells then produce HIV proteins, eliciting immune responses. Pasteur Merieux Connaught's Alvac soon to start Phase III. Decent potential as a booster.

Fusion Competent Vaccines Creates antibodies against a part of HIV's gp120 protein exposed only as the virus tries to enter a cell. An antibody response that could work, if vaccine safety is resolved.

Dendritic Cell Vaccines Uses specialized immune cells that digest invaders like HIV and present bits of HIV to T-cells, kicking off a broad T-cell immune response. New science, huge potential.

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