

# High-Risk Offensive

Sex Workers, Activists and Scientists Wrangle Over Testing A Pill That May Stop HIV

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“Always be prepared,” the Boy Scout motto, may someday serve as the sex worker’s mantra if PREP, or pre-exposure prophylaxis, proves effective. A daily HIV med taken by high-risk neggies, it holds hope as a cheap and easy virus blocker. But right now, politics is trumping science: Long-awaited tests have been hampered by protests over research methods, shutting down trials of the leading PREP contender, Gilead’s nuke, Viread. If it works, Viread could be used by millions unable to negotiate condoms. With so much at stake, feuding activists, funders, scientists and officials met in Seattle in May to try to hammer out their differences. “It didn’t make sense to be shouting at each other,” says Gregg Gonsalves, director of treatment and prevention advocacy at Gay Men’s Health Crisis, which helped plan the meeting.

Researchers have long theorized that if an HIV med given within days of exposure could prevent infection, taking it before exposure might work, too. But there’s a conflict of interest in running prevention tests: Ethics dictate that subjects get the best counseling and care available, but in order to determine that the drug stops HIV, some subjects must risk exposure. “You only know if prevention technologies work if you have infections,” says Mitchell Warren, head of the AIDS Vaccine Advocacy Coalition. Stuck on these scientific and moral hooks, PREP trials took until 2004 to launch.

And the trouble only mounted. No sooner were sex workers in Cambodia enrolled than they began organizing against what they said was a lack of informed consent, hinting that participants were mere guinea pigs of researchers interested in better trial data. Activists jumped on the bandwagon, too, blasting funders for failing to offer lifelong meds to subjects who got infected.

In a Cameroon trial, ACT UP Paris raised its own red flags. “The screening and consent forms were in English,” says ACT UP Paris’ Fabrice Pilorgé (some Cameroonians speak French). “Another problem was that they wouldn’t provide the female condom.” In the Thai trial, drug-using participants were denied free needles. Well-organized protests at Bangkok’s 2004 global AIDS confab grabbed headlines, causing Cambodia to pull out and Cameroon to suspend tests. “I was furious,” says Gonsalves. “Is that a victory—to shut down research?”

But in Seattle, some common ground was reportedly reached. “It’s safe to say nobody left that meeting against the research itself,” says Warren. Gonsalves agrees. “Research is important,” he

says. “But it’s also important that it’s done ethically.” Meanwhile, trials proceed in San Francisco, Atlanta and six foreign countries, while UNAIDS plans its own talks on the ethics of prevention studies. As for Cambodian prostitutes, they take their risks as they come, PREP-lessly.

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