The Way We Live Now: David Ho

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It’s important to step back and look at the big picture. There’s no denying that hospital beds in North America and Europe have emptied and mortality rates have gone down. You can focus on the 20 percent who have not necessarily benefited or the 80 percent who have, whichever you want. Several new protease drugs are coming along now. We shouldn’t resist developing them; what is important now is that these new drugs be easier to deal with.

We’re looking for drugs that will attack different steps in the viral life cycle. We hope to get integrase inhibitors, as well as viral-entry (fusion) inhibitors -- though few people are talking about it, we’ll see substantial progress the next year. Ultimately, these new drugs will be quite important to those whose bodies have been failed by protease combos.

Since ’96, there’s been a dramatic shift in emphasis to vaccine research. I think that’s quite appropriate because vaccines will benefit the larger world population, 90 percent of whom have no access to expensive drugs. But it’s going to take at least five to 10 years to find something promising. That’s not to say that resources should be shifted from treatment efforts. After all, drug development efforts over the past years have had a real impact for a lot of people -- that’s why we’ve seen a five-fold decrease in mortality among U.S. patients. But it’s become increasingly clear that something must be done to benefit the whole world, and a vaccine can do this.

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