



Moving On... and Hitting the Ground Running

November 10, 2012 By [Tim Horn](#)

I should probably start this blog entry with an important and long-overdue preface.

As of October 31, I am no longer the President and Editor-in-Chief of AIDSmeds. Writing that doesn't come easy. Thirteen years after beginning work with Peter Staley to develop and expand and AIDSmeds into what it is today--a comprehensive, easy-to-use educational portal for people living with HIV and their care providers--and four years after becoming its President and Editor-in-Chief, I have decided it's best for me to move on.

I am now the HIV Project Director at the Treatment Action Group (TAG), a New York City-based international research activism group. At TAG I'll be working on a variety of advocacy efforts, including antiretroviral research and the organization's hepatitis/HIV, pathogenesis/cure/prevention and tuberculosis/HIV projects. I'll also be helping lead advocacy for research into various AIDS- and non-AIDS related health complications and the science needed to fully implement the National HIV/AIDS Strategy and the Affordable Care Act.

One week in, it has become abundantly clear how much work there is to do. A personal goal of mine is to bring more people--past, present and future activists (particularly those who don't think of themselves as such)--into TAG's advocacy fold. Thus, it seemed entirely appropriate to hit the ground running with the development of a sign-on letter urging Boehringer Ingelheim Pharmaceuticals to reconsider its decision not to provide its hypertension drug telmisartan (Micardis), free of charge, to the federally funded AIDS Clinical Trials Group (ACTG).

The ACTG needs the drug to move forward with Study A5317, a clinical trial evaluating the effects of telmisartan on fibrotic and inflammatory contributors to "non-AIDS" organ disease in people living with HIV.

[Click here to read and sign the letter online.](#) Deadline for sign-ons is November 29, 2012.

The fact is, if we're going to make headway in terms of preventing and treating serious non-AIDS health complications among people living with HIV, which are very much on the rise and a serious risk to disease-free survival--*not to mention cure the infection once and for all*--we're going to need the full-on cooperation of pharmaceutical companies manufacturing drugs for other diseases that show potential for people living with HIV.

The ACTG is interested in studying telmisartan to better understand the causes and treatment of non-AIDS complications associated with inflammation, such as cardiovascular disease, diabetes and cancers. Because of telmisartan's specific anti-inflammatory effects and potential safety advantages in people

living with HIV, its evaluation is a high priority.

Boehringer Ingelheim has regrettably informed the A5317 team that it is unwilling to provide free or low-cost telmisartan, along with matching placebo, despite its small study population (54 anticipated volunteers) and short duration (48 weeks). The ACTG must therefore pay for the drug at market price, estimated to be \$70,000 for all patients randomized to receive treatment, with additional time and cost expenditures associated with the development of matching placebo.

The A5317 protocol team has made multiple attempts to secure free- or low-cost telmisartan from Boehringer Ingelheim, but to no avail. Whatever the reason--lack of market interest, telmisartan's pending patent expiration and/or the company's lack of an investigator-initiated study program for this drug--it sours Boehringer Ingelheim's long history of cooperation with the HIV/AIDS community and collaboration with researchers.

TAG is therefore encouraging both organizations and individuals to sign on to its letter to Boehringer Ingelheim, requesting that the company reverse its unwillingness to provide telmisartan to the ACTG, so that A5317 may move forward as planned.

Please consider signing on (and staying in the loop as other TAG advocacy initiatives requiring community support are developed). In the meantime, thanks for an amazing 13 years. And may we all see the day, sooner than later, in which sites like AIDSmeds and groups like TAG are no longer needed and can be shut down for good.

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