HIV vaccines: good news or bad? Elisabeth Pisani. 

The paper reviewed on the preceding page has received much media attention, and has featured in Elisabeth Pisani’s blog, ‘Sex and Science’. I felt it could be helpful to Journal readers if I also made my own views about it. The HIV vaccine paper that were detailed in that blog.

Dr Pisani’s blog focuses mainly on specific aspects of the HIV vaccine trial paper approaches taken to statistical analysis, observed variation in vaccine efficacy (VE) in some subgroups (such as high-risk individuals), and the public health perspective.

Three analyses undertaken in the paper are termed Real World [Intention to Treat (ITT)], Ideal World (per protocol) and Tidied-up World (modified ITT). Dr Pisani states that the Real World analysis is most useful to public health policymakers, which is usually correct. However, in this case it would mean wilful acceptance of a misleading estimate of VE, because in this analysis the two groups compared included unequal numbers of individuals who had already become infected before vaccination commenced, and for whom infection could not be prevented. That said, this is precisely the sort of divergence for the filler – the estimates obtained by the three analyses are strikingly similar, a VE of around 26% to 31%.

Would a vaccine of such efficacy be of clinical use? Would it provide solace to Dr Pisani. However, a more circumspect view is that the study just does not have the power to test the association between risk group (or age group) and VE (as the authors in fact state).

In the light of the concerning expressed in this blog regarding the VE for the high-risk group, it seems that perhaps the authors should have provided a clear ‘public health warning’ along with the subgroup table.

Having raised concerns about various aspects of the research and its reporting – these mainly founded on the uncertainty inherent to some degree or other, in (all) research results, and on the cumbersome and counter-intuitive nature of the hypothético-deductive reasoning required – Dr Pisani goes on to conclude that the trial is a ‘province for science’, if not yet for public health. It is salutary to recognise a distinction between the ‘science’ stage, and the ‘public health’ stage of vaccine development and implementation, but such ‘science’ needs to remember that its driving force is the imperative for a future public health application. Dr Pisani was astute in highlighting in her blog that the report of the trial did not pay sufficient attention to the public health perspective of its findings.

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References

6 March 2010
Title: Northern Interbranch Spring Update. Venue: Tankersley Manor, Tankersley, Barnsley S75 3DQ. UK. Details: Topics include female genital mutilation, an update on the changes to the latest UKMEC Guidelines, a review of the evidence for the safe use of Depo-Provera in different client groups, followed by workshops reviewing complex or difficult case studies of clients using LARC. Accreditation: FSRH applied for. Information: Dr Jenny Manuel, 28 The Spinney, Morden, London SE7 6SP, UK. E-mail: Jennifer.manuel@nhs.net.

11–12 March 2010
Title: BMS – FSRH Menopause Special Skills Module. Venue: Holiday Inn, Birmingham City Centre, UK. Details: This course is practical and interactive in design, based on the workshop style of the FSRH Diplome course. It is aimed at doctors but would equally be suitable for specialist nurses who work regularly to provide women’s health advice and management. It intends to equip the clinician to work within a menopause clinic or primary care environment. Further training would be required to lead a specialist service. Accreditation: FSRH accredited, 13 hours CME. Information: Mike Gray, Crescetis, Egloserme, St Erme, Truro, Cornwall TR4 9BW, UK. Tel: +44 (0) 1872 242192. Fax: +44 -(0) 1872 242197. E-mail: info@crescetis.com. Website: www.crescetis.co.uk.

19–20 April 2010
Title: Letter of Competence in Medical Education (LocMed). Venue: Welsh Institute for Women’s Health, Cardiff Medecine, Heath Park, Cardiff, UK. Details: Applications are invited from Diplomates of the Faculty of Sexual and Reproductive Healthcare who are actively involved in contraception and reproductive healthcare, equivalent to 100 sessions in the past year. Accreditation: FSRH accredited, 13 hours CME. Information: Mike Gray, Crescetis, Egloserme, St Erme, Truro, Cornwall TR4 9BW, UK. Tel: +44 (0) 1872 242192. Fax: +44 -(0) 1872 242197. E-mail: info@crescetis.com. Website: www.crescetis.co.uk.

19–22 May 2010
Title: 11th Congress of the European Society of Contraception and Reproductive Health on “Culture, Communication, Contraception”. Venue: World Forum Convention Centre, The Hague, The Netherlands. Details: The title of the congress reflects that contraceptive and reproductive health care in multicultural Europe must address the different needs of different individuals in different situations. There is a growing requirement for preventive strategies that take into account the specific cultural, subcultural, economic, ethnic and religious characteristics of subpopulations within the European Community. It is the diversity of multicultural Europe that challenges our creativity to provide new solutions, new methods and innovative approaches. Accreditation: a maximum of 15 European CME credits. Information: Dr Mitja Ministrovic, ESC Central Office, Opařanešeweg 3, 1740 Ternat, Belgium. Tel: +32 2 582 08 52. Fax: +32 2 582 55 15. E-mail: congress@contraception-esc.com. Website: www.contraception-esc.com/the Hague.htm.

9 July 2010
Title: Abortion Care Theory Course. Venue: Hexham General Hospital, Hexham, Northumberland, UK. Details: One-day theory course for the Certificate in Abortion Care of the Faculty of Sexual and Reproductive Healthcare. Information: Mr M Mansour, Holtburn, 6 Well Road, Newmachar, Aberdeen and Ne14 4QW, UK. Tel: +44 (0) 1661 843675. E-mail: m.mansour@nhs.net.

7–8 October 2010
Title: BMS – FSRH Menopause Special Skills Module. Venue: Crown Plaza Hotel, Leeds, UK. Details: This course is practical and interactive in design, based on the workshop style of the FSRH Diplome course. It is aimed at doctors but would equally be suitable for specialist nurses who work regularly to provide women’s health advice and management. It intends to equip the clinician to work within a menopause clinic or primary care environment. Further training would be required to lead a specialist service. Accreditation: FSRH accredited, 13 hours CME. Information: Mike Gray (see 11–12 March 2010 entry).

25–26 November 2010
Title: BMS – FSRH Menopause Special Skills Module. Venue: Holiday Inn, Southampton, UK. Details: This course is practical and interactive in design, based on the workshop style of the FSRH Diplome course. It is aimed at doctors but would equally be suitable for specialist nurses who work regularly to provide women’s health advice and management. It intends to equip the clinician to work within a menopause clinic or primary care environment. Further training would be required to lead a specialist service. Accreditation: FSRH accredited, 13 hours CME. Information: Mike Gray (see 11–12 March 2010 entry).

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