

<b>For web-appendix</b>
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## **Interview with Peter Piot: Additional questions and answers**

*STI: Should ISSTD and IUSTI seek more media attention?*

Peter Piot: I think you're right, but this is a pretty technical conference. It is an illustration of the fact that STIs are not a top political concern or a concern of public opinion. Even for AIDS there is a decline in interest in reporting, particularly in the West.

*STI: Would you suggest looking for more media coverage for the next ISSTD/BASHH meeting in London in 2009?*

Peter Piot: A very proactive media approach can help to generate more media attention. That's what we do with the World AIDS Conferences. But that's not all. You need to have a story to tell. I think the story here for me is all the controversies and the very interesting progress on the human papilloma virus vaccine. That's the main breakthrough of the last decade. If I look at it from the outside, that's what I would have promoted as a top story. It saves women from dying from cervical cancer.

*STI: You have been so successful in negotiating lower prices for antiretroviral drugs for low income countries. Can UNAIDS play a role in making the HPV vaccine broadly available in developing countries?*

Peter Piot: We do have some experience and we can of course share it, but UNICEF and GAVI are the agencies with the greatest experience in terms of price reductions and making goods, and in particular vaccines, broadly available in developing countries.

*STI: Are price negotiations going on for the newer drugs?*

Peter Piot: Yes, we are working on it. The Clinton Foundation is extremely active in this field. I really appreciate this. When we initially negotiated price reductions for the first line treatment, we were basically alone. People were just watching. They wondered how this would go. Stockholders were afraid about rates. We have been able to demonstrate that the pharmaceutical industry is still good business even with lower prices of antiretroviral drugs. Fortunately – it sounds a bit cynical – HIV/AIDS is also a problem in the industrialised world, in the rich market.

There are a few million people who need antiretroviral therapy there. That's where the money can be made. Tiered pricing we call it. If AIDS only occurred in Africa, I don't think we would be where we stand now. We realise that we will continuously need new drugs. That means huge investments for pharmaceutical industry.

*STI: Last week there was an International AIDS Society conference in Sydney. Do you suggest conducting these meetings jointly?*

Peter Piot: I think it would be a good idea to conduct these meetings jointly now and then. Not all the time. The IAS conferences have a much larger audience and a different scope. That would be overwhelming. HIV therapy would dominate. That's why it is good to have separate meetings and sometimes it needs to be overlapping. On the other hand, during this conference there is much interest in HIV. Many papers on HIV are submitted. Interventions like herpes simplex suppression get much attention.

*STI: What are the respective roles of international players like UNAIDS and governments?*

Peter Piot: There is no way we can solve a local problem. Our job is on several levels. The first level is to identify policies: What works? What doesn't work? The normative guidance if you want. The second level is where a global action gives an added value. The price negotiations of antiretrovirals are a good example. Negotiating lower prices is far more difficult if you are a small country. If you are a big country, or if you are South Africa with 5 million HIV-positive people, that's different. Thirdly, in countries themselves our principle is that we are there to support the local efforts, but we don't substitute them. Frankly, that is what often happens with international organisations. They are doing it themselves. We saw it with the WHO programme, with GPA, the Global Programme on AIDS. Once it closed there was nothing left. We really want to stimulate local programmes that are sustainable on the long run.

We are present now in slightly over eighty countries. These are the stakeholders. Traditionally the UN works with governments only, but sometimes we are confronted with governments not really keen on taking action. In these cases we work with civil society. We don't only work with the government, but also with church groups, NGOs, activists.

*STI: You are planning a '2031 global vision on AIDS'. Can the 'Scenarios for Africa 2025' experience contribute?*

Peter Piot: Absolutely. What are our plans with the 2031 project? Writing the report is one thing. Then we will do the marketing of the report. We want to influence what is going on. In the meantime we want to stimulate a public debate and publish issue papers.