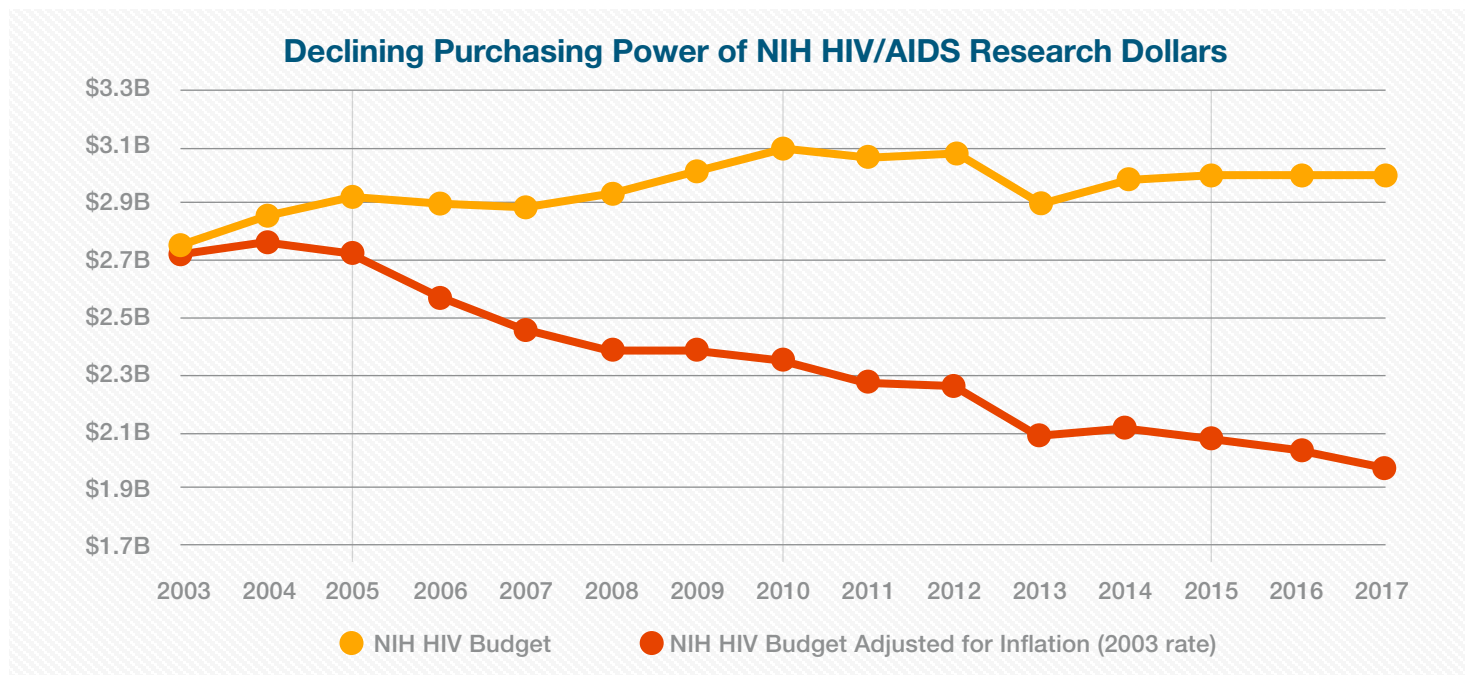


Small Increase, Big Impact: Investing in HIV/AIDS Research Could Fund the World's Next Medical Breakthrough

In 2016, funding for the National Institutes of Health (NIH) was increased by \$2 billion, and the President proposed a further increase of \$825 million for 2017. amfAR applauds this commitment to biomedical research, which will improve the health of our nation and the world. However, HIV research continues to be flat-funded at 2015 levels. As the cost of biomedical research increases with inflation, the purchasing power of NIH HIV research dollars decreases dramatically, as shown below. An increase in HIV research funding in line with the increase in total NIH funding would mean an additional \$76.6 million for HIV research in 2017. As the second figure illustrates, the impact of such an increase could be profound.

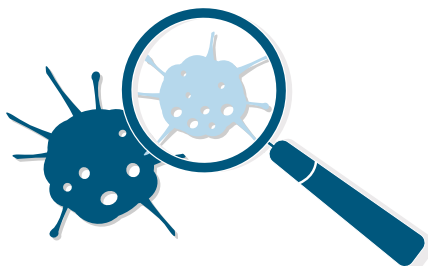


Recently two NIH-funded HIV clinical trials were named medical “breakthrough of the year” by *Time* magazine and *Science*. In 2010 the iPrEx study found that taking pre-exposure prophylaxis (PrEP) could prevent HIV acquisition, and in 2011 a trial called HPTN 052 proved that consistently taking antiretroviral treatment could prevent the transmission of HIV.

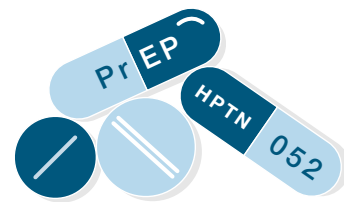
An increase of **\$76.6 million** in its HIV/AIDS research budget could allow the NIH to:



Fund **180 HIV/AIDS studies** in 2017 that could significantly advance HIV prevention, treatment or cure research



Fund 51 clinical trials of interventions aimed at **curing HIV**



Fund a **breakthrough prevention trial** such as HPTN 052 or the iPrEx study