

HIV STUDY VACCINES: MYTHS & FACTS

Common misconceptions about HIV study vaccines



MYTH: HIV study vaccines can give people HIV.



FACT: A person **cannot** get HIV from the study vaccines. Scientists make HIV study vaccines so that they look similar to the virus, but they do not contain any real HIV.



MYTH: Vaccines cause autism and aren't safe.



FACT: There is **no link** between childhood vaccination and autism. The British doctor who originally said that vaccines are related to autism lied about his data, and is no longer licensed to practice medicine.



MYTH: Vaccines cause infertility.



FACT: Vaccines **do not** cause infertility. People might have this idea because people who are pregnant or breastfeeding are not always allowed to join vaccine studies. The truth is that we want to be very cautious because we do not know how the experimental products might affect a developing baby. People who join vaccine studies that are able to become pregnant are asked to use birth control and not to get pregnant until after the study.



MYTH: Vaccine researchers want study participants to practice unsafe behaviors so they can see whether the vaccine really works.



FACT: The safety of study participants is the top priority of HIV vaccine researchers and the staff at our study clinics. Trained counselors work with study participants to help them develop a personal plan on how to reduce their risk of exposure to HIV.



MYTH: An HIV vaccine is not necessary because aids is easily treated and controlled, just like diabetes.



FACT: There is **still a need** for a preventive HIV vaccine. Treatment for HIV and AIDS is very effective, but it is no substitute for prevention. Current HIV medications are expensive, and can have side effects. Access to these drugs is not guaranteed in all countries. More people acquire HIV each year than are able to access treatment and necessary medical care. An effective HIV vaccine could help to end HIV globally.



MYTH: An HIV vaccine already exists.



FACT: There is **no licensed** vaccine against HIV or AIDS, but scientists are getting closer than ever before to developing a safe and effective vaccine against HIV.



MYTH: A person must be living with HIV to be in an HIV vaccine study.



FACT: The vaccines being tested by the HVTN are preventive vaccines. They must be tested on volunteers who do not have HIV, because our goal is to protect people from infection.

MYTH: Since pre-exposure prophylaxis (PrEP) is available, an HIV vaccine is no longer necessary.

FACT: People can take antiretroviral medication to lower their chances of acquiring HIV if they are exposed to the virus. The pills Truvada and Descovy have been approved by many regulatory agencies. PrEP is also available in some countries as a Dapivirine vaginal ring or as a long-acting injection of Apretude. However, not everyone will want to use PrEP, just as not everyone wants to use condoms. While PrEP is an important method of HIV prevention, people need many choices for preventing HIV, including vaccines, so that they can find the best method for themselves. Vaccines continue to be the **most effective long-term** way to eliminate a disease.

MYTH: People in developing countries are used to test HIV vaccines.

FACT: Research studies are done around the world and not just in developing countries. To find a vaccine that works in all kinds of people, they must be tested in all kinds of people. This includes groups of people hardest hit by HIV who might benefit the most from a vaccine, such as those who live in developing countries.

MYTH: Joining an HIV vaccine study is like being a guinea pig.

FACT: People can say yes or no about joining a study. Guinea pigs **cannot**. All volunteers must go through a process called informed consent that helps to ensure they understand all of the risks and benefits of being in a study before they are asked to make a decision to join a study.

MYTH: Researchers will sell my blood.

FACT: All of the blood samples that participants give during a study are used in our laboratories to answer the research questions. **The blood is never used in other patients or sold.** With a participant's permission, some extra samples can be saved to use in future research. We do not pay participants for their blood samples, but we do offer them reimbursement for their time and travel to the study clinic.

MYTH: People who aren't at risk don't need an HIV vaccine.

FACT: People with many different characteristics are needed in different phases of vaccine studies to help researchers learn how the vaccines work. A preventive HIV vaccine may also be important for one's children, family members and friends. Even if a person does not have a risk for exposure to HIV today, they can still be part of the effort to find a vaccine that will hopefully save the lives of millions of people worldwide.



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