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Scientists, NIH in conflict over precious HIV samples

The US National Institutes of Health (NIH) is refusing to fund grants that directly compete with the aims of its own HIV vaccine project: that's the allegation of a group of AIDS researchers who say they are being effectively forced to collaborate with the Center for HIV-AIDS Vaccine Immunology (CHAVI), the NIH's \$350 million scheme.

"A lot of people are being told to link up with CHAVI or you'll lose your funding. I mean, that's not the way to do science," says one insider who requested anonymity.

At issue are samples of 'acute infection', collected from individuals in the first weeks after HIV infection. Among CHAVI's goals is understanding how the body responds to infection during that time, which could help design an effective vaccine.

Last year, CHAVI approached research teams all over the world, asking them to share their collections of acute infection samples. But the request confused scientists, many of whom complained that it was unclear what they could expect in return for their contribution (*Nat. Med.* 12, 865; 2006).

Some consortia, including South Africa's CAPRISA and the University of North Carolina, agreed to share their samples. Last year, the group also organized EuroCHAVI, which pooled 600 samples from Europe and Australia.

But many others came away with the impression that they would have to give away their samples, with nothing to show for it in return—and, naturally, declined the request.

"We thought, no way. We have invested in these cohorts for 20 years, this is something we want to do ourselves," says Hanneke Schuitemaker, a researcher at the University of Amsterdam's Academic Medical Centre.

Schuitemaker's project has support from the Dutch government and, in the end, she says, she may collaborate with CHAVI. "But it was funny to see how surprised they were at the negative reaction," she says. "They must realize what they're asking for."

Part of the problem, some researchers say, is that CHAVI was launched in 2005 without already having any samples in hand (*Nat. Med.* 11, 588; 2005), and now needs them to justify its hefty coffers to Congress.

"I can understand why CHAVI needs control of the samples," says Bruce Walker, professor of medicine at Harvard University. "I can also understand why people are so reluctant to give them away, particularly at a time when people are not sure of their own survivability." Walker, who declined to share his acute infection samples, has an NIH grant that's up for review in May, but is hoping to raise money from the Gates Foundation.

Julie Overbaugh's team at the Fred

Hutchinson Cancer Research Center has been collecting samples in Kenya for more than 12 years. She also declined CHAVI's request. Although may have to write multiple grants to keep her project afloat, she says, members of her team need the samples for their own research.

"For those of us who work with

graduate students, if we just say [CHAVI] have the money, we'll give them the samples, how do we train our grad students?" Overbaugh asks.

Others are in even more dire straits.

A dozen members of Doug Richman's lab at the University of California in San Diego have spent more than a decade collecting nearly 120,000 specimens from 500 participants. The large NIH grant that supports the project is up for review in May. If it's not funded, Richman says, he may be forced to give up his samples, something he initially declined to do.

"If I'm in a collaborative relationship, I'm happy to share, but it's the first time that someone has asked me for specimens in which the agreement is not collaborative," says Richman. "I haven't been given the opportunity to have intellectual input so I didn't feel comfortable sharing."

Duke University researcher Barton Haynes, who leads CHAVI, says these researchers' perception is the result of a misunderstanding.

"I am sorry if this was the impression given during some discussions," Haynes says. "We learned, we got better at having these discussions. I'm certainly sorry if the impression is remaining that that's the only way CHAVI would work."

Haynes says those who have contributed samples so far are "full participants and full collaborators, both intellectually and for authorship." The investigators also all receive support from CHAVI for the work, he adds.

Even beyond the few researchers directly affected by the fracas over acute infection samples, CHAVI has created a bitter divide among HIV vaccine researchers. Much of the criticism against the project is given anonymously—for fear, the scientists say, of retaliation from the NIH.

But the idea that the NIH will not fund grants that compete with CHAVI is completely unfounded, says Carl Diffenbach, acting director of the NIH's division of AIDS.

"Funding is tight, we're all in agreement on that," Diffenbach says. "That's the nature of peer review. It has nothing to do with CHAVI, period."

Apoorva Mandavilli, Whistler



Sore spot: The NIH is being accused of forcing scientists to give up their samples of acute HIV infection.