10th ANNUAL DEPARTMENT OF PATHOLOGY YOUNG INVESTIGATORS’ DAY
POSTER SESSION

Thursday, April 17th, 2008
TURNER CONCOURSE
REGISTRATION FORM

Applicant’s Name: _Aaron Tobian________ Degree: __M.D., Ph.D._

Applicant’s Division: ____________________________________________________

Faculty Preceptor: _Thomas Quinn______________________________________
(Must hold a primary appointment in Pathology)

Appointment Category: ___X_House Staff _____Clin Fellow _____Research Fellow
____Medical Student ____Graduate Student (Program: __________)

Register for: _____ Clinical Research _X__Translational Research _____Basic Research

Full Poster Title * __ Male Circumcision Prevents Acquisition of Herpes Simplex Virus type 2 (HSV-2) Infection in HIV-Negative Men in Rakai, Uganda__

Where has the work been presented?
Meeting Name   __Conference on Retroviruses and Opportunistic Infections___
Meeting Date   ___February 3-6, 2008________________________________

Not Previously Presented ___________ _________________________________________

Where is this work being published? ________________________________________________
Journal Name, Volume, Page, Date  _________________________________________________

In Preparation (Y/N) - Where? ____________________________________________________

Author(s) (First & Last)  ____________________________________________________

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*INCLUDE A ONE-PAGE ABSTRACT (including title and all authors) OF THE WORK
YOU WILL BE PRESENTING

***************************************************************************
E-mail COMPLETED Registration form and abstract to:
Stacey Morgan (smorgan9@jhmi.edu) on or before
Friday, March 14th, 2008

If you have questions or problems regarding your submission, please
contact Stacey Morgan via e-mail (smorgan9@jhmi.edu)
Male Circumcision Prevents Acquisition of Herpes Simplex Virus type 2 (HSV-2) Infection in HIV-Negative Men in Rakai, Uganda

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Abstract

Background: Three recent clinical trials have demonstrated that male circumcision significantly reduces HIV acquisition and the occurrence of genital ulcer disease. The objective of this study was to assess the efficacy of male circumcision for the prevention of herpes simplex virus type 2 (HSV-2) genital infections.

Methods: 6,396 uncircumcised men aged 15-49 were previously enrolled into two trials of male circumcision for HIV and STI prevention, in Rakai, Uganda. Of these individuals, 3,393 were HIV and HSV-2 antibody negative. 1,684 were previously randomized to receive immediate circumcision and 1,709 to receive circumcision 24 months later. HSV-2 and HIV testing, physical examination and interviews were conducted at baseline and at 6, 12, and 24 months.

Results: Baseline and follow-up characteristics of men in the intervention and control groups were similar at enrollment. In the intention-to-treat analysis, HSV-2 incidence was 4.13 cases per 100 person-years in the intervention group compared with 5.65 cases per 100 person-years in the control group. The efficacy of intervention was 27% (95% CI 7-42; p=0.011) by intention-to-treat analysis. HSV-2 incidence was lower in the intervention group than the control group in almost all sociodemographic, behavioral, and sexually transmitted disease symptom subgroups. The incidence of HIV was 0.77% among men who remained HSV-2 negative during the trial and increased to 3.57% among men who acquired HSV-2 during the trial (p <0.001).

Conclusions: Male circumcision significantly reduced HSV-2 acquisition, and this effect may influence the protective effect of circumcision on HIV acquisition and clinical genital ulcer disease.