



PRESS RELEASE

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The Wistar Institute Wins \$15M+ NIH Investment to Advance HIV Cure Research Strategies

Grants funding positions Philadelphia as an anchor for HIV cure research—advancing combination strategies aimed at durable, drug-free remission.

PHILADELPHIA — (Sept. 9, 2026) — More than 40 million people worldwide live with HIV and depend on daily antiretroviral therapy to stay alive. Federal funding is a major driver advancing the research needed to develop new therapy strategies toward a cure. Today, [The Wistar Institute](#) announces the National Institutes of Health (NIH) has awarded two major grants totaling more than \$15M to [Luis J. Montaner, D.V.M., D.Phil.](#), director of Wistar's [HIV Cure and Viral Diseases Center](#).

One award is a 2-year, **\$11.2 million award** to the **BEAT-HIV Martin Delaney Collaboratory** ([BEAT-HIV.org](#)), a leading consortium of top U.S. researchers codirected by **Montaner**, executive vice president and Herbert Kean, M.D., Family Professor; [James L. Riley, Ph.D.](#), professor at Perelman School of Medicine at the University of Pennsylvania; and [Robert F. Siliciano, M.D., Ph.D.](#), professor at Johns Hopkins University School of Medicine. Building on five-year grants awarded in 2016 and 2021, the new funding extends support through 2028.

Since 2016, BEAT-HIV has grown into one of the largest HIV cure-directed research Collaboratory groups now totaling over 100 leading investigators across government, industry, academic, and nonprofit partners, contributing to new scientific standards through distinctive, novel research and new clinical trials in these four areas:

1. Reservoir eradication: finding where HIV hides, or persists, and understanding how to measure it in the body

BEAT-HIV research contributed to a new standard wherein the persistent virus is measured in people living with HIV after antiretroviral therapy and identifies key HIV reservoir features in the lymphoid tissue and the gut tissue.



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2. Antibody and immunotherapy strategies to stimulate the immune system in the absence of antiretroviral therapy (ART)

Research showed the individual's own response against the virus— autologous neutralizing antibody response—could provide a level of virus control opening strategies once deemed not feasible against the virus not yet controlled.

3. Natural Killer (NK), CAR T cell and gene therapy 'killer cell' strategies to achieve HIV eradication

The team identified the most promising approaches: gene-engineered CAR T cells, or NK cells modified to hunt viral reservoirs; CD8 T cell-targeted lipid nanoparticles used as a drug delivery system to guide immune cells to specific areas where HIV hides; and novel “shock and kill” approaches to force dormant HIV out of hiding so CAR T cells can eliminate it.

Two clinical trials targeting HIV were also completed in the first grant cycle from 2016-2021 in humans: James Riley used CAR T cells to attempt to eradicate HIV, and Luis Montaner used broadly neutralizing antibodies with immunotherapy to test control of HIV. Both trials informed how to optimize strategies leading to a third Philadelphia clinical trial testing DNA-launched, HIV-resistant CAR T cells to eliminate HIV-infected cells with engineered T cells boosted to drive their expansion—a strategy borrowed from CAR T success in cancer.

4. Collaborative model connecting community advisory board, nonprofits and scientists

BEAT-HIV established a Community Engagement Group (CEG) to enhance research literacy and involvement by giving stakeholders and patients a greater voice in clinical trial design and outcomes.

The second NIH grant is an R01 research project grant totaling **\$4.3 million** over five years to engineer next generation immunotherapies to target HIV's viral reservoirs. This R01 is an outgrowth of the BEAT-HIV Collaboratory, which is focused on HIV reservoirs and viral control together with gene therapy strategies. The R01 extends the NK cell and gene therapy research programs. It follows a \$17 million award and recent launch of the iCure Consortium to develop individualized HIV “cure regimens” to wipe out the viral reservoir and achieve durable drug-free remission.

A central obstacle to curing HIV is the virus' ability to hide in latent, long-lasting reservoirs that antiretroviral therapy (ART) cannot eradicate. Because HIV is actively replicating in cells and creating new HIV ‘progeny’, in this R01 extension, Montaner and team will test multiple, novel strategies to super-charge NK cells, improving their ability to identify and kill infected cells producing the virus, with the most powerful option moved forward to human clinical trial.

“For the millions of people worldwide who rely on lifelong treatment, the next chapter of HIV cure research is about translating a decade of discovery into the breakthroughs that could finally make an HIV cure possible,” said **Montaner**. “Thanks to these two grants, we continue a steady course towards



a future HIV cure—I am confident we will get there as we continue reshaping medicine, adding innovative new science to the research toolkit of advances that will not only benefit HIV, but also have direct applications to other cancers and diseases.”

ABOUT THE WISTAR INSTITUTE

The Wistar Institute is the nation's first independent nonprofit institution devoted exclusively to foundational biomedical research and training. Since 1972, the Institute has held National Cancer Institute (NCI)-designated Cancer Center status. Through a culture and commitment to biomedical collaboration and innovation, Wistar science leads to breakthrough early-stage discoveries and life science sector start-ups. Wistar scientists are dedicated to solving some of the world's most challenging problems in the field of cancer and immunology, advancing human health through early-stage discovery and training the next generation of biomedical researchers. wistar.org.