

Complementary and traditional medicines

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"Hard" versus "Soft" HIV Cure: an Anthropological investigation of the Cultural Meaning of HIV Cure in China

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Background: As global HIV cure research accelerates, the meaning of "cure" as a concept expands. People may adapt the concept of cure according to their local cultural context. This research aims to investigate the cultural meaning of HIV cure as articulated by HIV-infected individuals, principal investigators (PIs) on HIV cure research studies, HIV physicians and public health experts in China in order to increase the cultural sensitivity of ongoing HIV cure research and optimize researcher-participant communication.

Methods: From August to December 2014, we conducted in-depth interviews with stakeholders including 36 HIV infected individuals, four PIs, and four public health experts in Guangzhou, China. The stakeholders were selected because of their importance in planning, implementing, and funding HIV cure research studies. The interviews were audio-recorded, transcribed and translated into English for analysis. A code based methodology was used to identify themes and structure the analysis.

Results: We identified a clear dichotomy in the terms used to describe HIV cure research. Our data suggests that medical professionals in China, in line with their western counterparts, adopted the biomedical definition of cure which focuses on viral eradication. We refer to this concept as a "hard" cure. However, the "hard" cure generated confusion among HIV-infected individuals who were unclear about the meaning of this for their individual lives. In contrast, HIV-infected individuals preferred to use a different Chinese term that we called the "soft" cure. The "soft" cure resonates with traditional Chinese medicine philosophy and focuses on restoring yin/yang balance regardless of viral status. This concept clearly denotes improvement in symptoms, but leaves some uncertainty about virological status and assay results. Although "soft" cure seemed more acceptable among HIV-infected individuals, physician researchers felt that this was not sufficiently specific and "hard" cure was more useful.

Conclusions: The "hard" or "soft" cure dichotomy is analogous to the tension in describing ongoing research as "cure" or "remission." Using a "soft" cure concept may provide a clearer and more culturally sensitive way of discussing HIV cure research with potential research participants and other HIV-infected individuals. This may also help re-align expectations with the early stage of cure research.