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A Promising Preventive

It is easy to understand why the results of a modestsize scientific study in South Africa were met with ecstatic applause on Tuesday at an international AIDS conference in Vienna. Researchers have shown that a vaginal gel could cut a woman's risk of infection with H.I.V., the virus that causes AIDS, by almost 40 percent.

The gel is not perfect. But for the first time in the fight to control the global epidemic, it offers women a way to protect themselves even without the cooperation of their male partners. That is a potentially huge breakthrough.

Women make up half of the 33 million people who are H.I.V.-positive around the world and 60 percent of the new cases in sub-Saharan Africa, where sex is the primary mode of transmission. Even a 40 percent to 50 percent reduction in their infection rate could help slow the epidemic. If further developments yield a more potent gel, as seems likely, the impact could be substantial.

The new study's findings are particularly heartening after six other microbicides failed in clinical trials over the past 14 years.

The gel was tested in 889 women for up to two-and-a-half years in two South African communities, one rural and one urban, where the virus is running wild. Half of the women were randomly assigned to use a gel containing an antiretroviral drug, the other half were given a placebo gel. All were instructed to apply the gel within 12 hours before and 12 hours after intercourse.

Those on the medicated gel were 39 percent less likely to contract H.I.V.; those who used it most regularly were 54 percent less likely. The only discouraging note was that effectiveness seemed to wane over time, possibly because women became less diligent in their use.

The new gel seems destined to take its place alongside condoms and male circumcision as proven techniques for reducing transmission. But not just yet.

The gel's effectiveness will need to be confirmed in a larger clinical trial already under way. Ideally, more potent formulations will be found to boost its protective powers. To get women to use it regularly, marketing experts will have to find ways to make the product more colorful, more appealing, even sexy.

Other good news came from a new study in Malawi showing that if schoolgirls and their families received small monthly cash payments, the girls had sex later, less often and with fewer partners — and were less than half as likely to be infected with the AIDS or herpes viruses — than girls who got no payments. The small payments made it less likely that impoverished girls would agree to sex in return for gifts or money.

Slowing the spread of H.I.V. will require multiple approaches. The challenge will be to find enough money at a time of limited resources when AIDS financing has flattened out. Prevention should save money and many lives. All efforts to support the most promising leads should be pursued.