

## In memoriam: Joep MA Lange (1954–2014)

REISS Peter<sup>1,2</sup>

<sup>1</sup>*Department of Global Health, Academic Medical Center, University of Amsterdam; Amsterdam Institute for Global Health and Development, Amsterdam 1105 AZ, The Netherlands;*

<sup>2</sup>*HIV Monitoring Foundation, Amstrdam 1105BD, The Netherlands*

Received August 25, 2014; accepted September 3, 2014; published online September 11, 2014

**Citation:** Reiss P. In memoriam: Joep MA Lange (1954–2014). *Sci China Life Sci*, 2014, 57: 1047–1048, doi: 10.1007/s11427-014-4749-4

July 17, 2014 marks the date of the brutal and unforgivable shooting down of Malaysian Airlines flight MH17 over the Ukraine, resulting in the death of all its passengers, including my longstanding friends and colleagues Joep Lange and Jacqueline van Tongeren. They were on their way to attend the 20th International Aids Conference, held this year in Melbourne, Australia. I myself had already arrived in Melbourne when I heard the devastating news. I was instantly struck by an uncontrollable grief and outrage, and the feeling of having lost part of myself. Joep and I were the same age: our birthdays are only one day apart, we had gone to medical school together, and since 1981 our careers had evolved in parallel around HIV. Our private lives were also very much intertwined, and Joep had been the knowing matchmaker who introduced me to my future spouse and mother of five of my six children.

Jacqueline was also a close friend and colleague who first came to work at the Amsterdam Academic Medical Center in the late '80s' as head nurse of our Aids-unit and subsequently became the coordinating research nurse of the National AIDS Therapy Evaluation Center, established in 1990 as the Dutch HIV trial center, and headed by Joep. She was a pillar of support throughout the intervening years for everyone at the Center and especially for Joep, and she was one of the most caring and loving people I have been privileged to know.

In the aftermath of this tragic event, Joep has often been described as a "giant of HIV/AIDS research", contributing greatly to the well-being of people living with HIV (PLWH).

Joep MA Lange



© Marjolein Annegarn

As the chair of the Dutch association of people living with HIV remarked while in Melbourne, PLWH were always very much at the centre of everything Joep undertook professionally. Not only was he a gifted and caring physician, and an innovative and creative entrepreneurial researcher; he was also a tireless advocate for access to quality HIV care and treatment for all of those in need, be it in the Netherlands or anywhere else in the world. To accomplish what Joep believed was the right thing to do, he had no hesitation in being politically incorrect and letting his voice be heard above the clamour of more traditional views.

Joep's contributions to HIV science and the well-being of PLWH are too numerous to mention in one article. Very early on during his scientific career, as part of his Ph.D. thesis he demonstrated that individuals with higher levels of the HIV protein p24 were more likely to experience more

rapid HIV disease progression, while long-term survivors had reduced p24 antigen in their blood. This discovery supported the concept of the use of antiretroviral therapy to reduce p24 antigen already during clinically asymptomatic infection and thereby prevent the onset of AIDS [1]. The p24 antigen test was later replaced by the more sensitive and accurate tests for measuring HIV RNA which remains the hallmark for assessing the success of treatment. Among the later favorite scientific achievements Joep himself listed on his *Curriculum Vitae* are being the originator and co-principal investigator of several pivotal trials on antiretroviral therapy (INCAS [2], 2NN [3]) and on the prevention of mother to child transmission of HIV (PETRA [4], SIMBA). Joep was also instrumental in establishing the ATHENA observational cohort in the Netherlands; was among the first to attempt to eradicate HIV from its tissue reservoirs [5]; and suggested the use of antiretrovirals for pre-exposure prophylaxis (PrEP) at a time when these concepts were considered beyond the reach of accepted treatment strategies.

Joep played a leading role in increasing access to HIV treatment and the provision of quality health care in resource-limited settings. In 1996, together with David Cooper and Praphan Phanuphak, he co-founded and co-directed the HIV Netherlands-Australia-Thailand research collaboration (HIV-NAT; [www.hivnat.org](http://www.hivnat.org)). In 2000, he established the Pharmaccess Foundation ([www.pharmaccess.org](http://www.pharmaccess.org)), aimed at initiating HIV treatment programs in sub-Saharan Africa: subsequent spin-offs, each designed to strengthen health systems in sub-Saharan Africa by financially viable and sustainable means, have included the Health Insurance Fund ([www.hifund.org](http://www.hifund.org)), the Medical Credit Fund ([www.medicalcreditfund.org](http://www.medicalcreditfund.org)), SafeCare ([www.safe-care.org](http://www.safe-care.org)), and the Investment Fund for Health Care in Africa ([www.ifhafund.com](http://www.ifhafund.com)).

Joep understood the importance of disseminating knowledge and he travelled the world frequently for this purpose. In 1995, he established *Antiviral Therapy* together with Doug Richman and Stephen Cameron, and the first issue went to print in 1996. In 2003, together with Fransje van der Waals, Joep established the Health(e)Foundation ([www.healthefoundation.eu](http://www.healthefoundation.eu)) which through computerised and face-to-face means provides educational material to health care providers in resource-limited settings around the globe on HIV and other diseases relevant to their region. In 2007 the annual INTEREST workshop became a focus of his attention which he shaped into becoming one of the premier scientific HIV conferences in the sub-Saharan African region. He has mentored more than 40 Ph.D. students, latterly in his role of Professor of Global Health at the Academic Medical Centre and Executive Scientific Director of the Amsterdam Institute for Global Health and Development ([www.aighd.org](http://www.aighd.org)). Many of these students have themselves moved on to leading academic positions and are con-

tributing their own efforts to the fight against HIV.

In spite of his many achievements Joep remained a very modest person, and was often even shy. He was a man of culture, with a broad interest and fondness for both the visual and performing arts. He read widely, with a great love of modern literature as well as for the latest scientific research and read whenever and wherever he could. Many years ago the first Netherlands astronaut approached him with the idea that putting people into a state of weightlessness might improve immune function and could potentially be of benefit for treating HIV. Joep volunteered to be the human guinea pig for a first experiment. As he entered the machine which would spin him into being weightless, he took with him a number of copies of *New England Journal of Medicine* and *Lancet* in order to make best use of his time...

The HIV and global health community will greatly miss these two remarkable people and their contributions to HIV research and care. And more than ever, their pointless deaths remind us that much of what Joep and Jaqueline both strived for was an end to intolerance and prejudice. In the words of Mr. Laurindo Garcia at the recent IAC in Melbourne, what the world needs is a “vaccine against intolerance”.

Joep was a loving father to his four daughters Anna, Maria, Martha, Ottla; and to his son Max; and the grandfather of his first grandchild Angus. First and foremost our hearts go out to them.

- 1 Lange JM, Paul DA, Huisman HG, de Wolf F, van den Berg H, Coutinho RA, Danner SA, van der Noordaa J, Goudsmit J. Persistent HIV antigenaemia and decline of HIV core antibodies associated with transition to AIDS. *Br Med J (Clin Res Ed)*, 1986, 293: 1459–1462
- 2 Montaner JS, Reiss P, Cooper D, Vella S, Harris M, Conway B, Wainberg MA, Smith D, Robinson P, Hall D, Myers M, Lange JM. A randomized, double-blind trial comparing combinations of nevirapine, didanosine, and zidovudine for HIV-infected patients: the INCAS Trial. Italy, The Netherlands, Canada and Australia Study. *JAMA*, 1998, 279: 930–937
- 3 van Leth F, Phanuphak P, Ruxrungtham K, Baraldi E, Miller S, Gazzard B, Cahn P, Laloo UG, van der Westhuizen IP, Malan DR, Johnson MA, Santos BR, Mulcahy F, Wood R, Levi GC, Reboredo G, Squires K, Cassetti I, Petit D, Raffi F, Katlama C, Murphy RL, Horban A, Dam JP, Hassink E, van Leeuwen R, Robinson P, Wit FW, Lange JM; 2NN Study team. Comparison of first-line antiretroviral therapy with regimens including nevirapine, efavirenz, or both drugs, plus stavudine and lamivudine: a randomised open-label trial, the 2NN Study. *Lancet*, 2004, 363: 1253–1263
- 4 Petra Study Team. Efficacy of three short-course regimens of zidovudine and lamivudine in preventing early and late transmission of HIV-1 from mother to child in Tanzania, South Africa, and Uganda (Petra study): a randomised, double-blind, placebo-controlled trial. *Lancet*, 2002, 359: 1178–1186
- 5 Prins JM, Jurriaans S, van Praag RM, Blaak H, van Rij R, Schellekens PT, ten Berge IJ, Yong SL, Fox CH, Roos MT, de Wolf F, Goudsmit J, Schuitemaker H, Lange JM. Immuno-activation with anti-CD3 and recombinant human IL-2 in HIV-1-infected patients on potent antiretroviral therapy. *AIDS*, 1999, 13: 2405–2410