

# A **MATRIX** *Minute* with Kathryn Mngadi



## About Kathryn

Dr. Kathryn Mngadi is a Principal Investigator with the [Aurum Institute](#) in South Africa and Clinical Research Site (CRS) Leader of its Tembisa Site, who has nearly 30 years of experience working in HIV, tuberculosis (TB) and COVID prevention. She serves on several different committees, including Trial Steering and Safety Committees and Data Safety and Monitoring Boards, and is a review and section editor for the [Frontiers Reproductive Health](#) Journal and the [Journal of Public Health in Africa](#), respectively. She is passionate about career development for women in research, and actively mentors her team members. For MATRIX, Kathryn serves as [MATRIX-003](#) protocol co-chair, the MATRIX-003 investigator of record for Aurum Tembisa Clinic 4 CRS as well as a national principal investigator.

### What initially interested you in HIV prevention, and how did you begin your career in this field?

I worked in a TB clinic in Durban, Kwazulu-Natal, when HIV became evident in South Africa. We began to conduct tests, but there was no treatment available. I moved from there to hospice and received a Master of Philosophy in Palliative Medicine and balanced the divide between hospice care and active treatment of opportunistic infections. In 2003, I was headhunted by AngloGold Ashanti, a gold mining company in the Northwest Province to implement palliative care of people living with HIV, but between the interview and me starting the job, the unions had fought for and won access to antiretroviral therapy (ART), so I worked in the first ART treatment programme in South Africa. Aurum was a part of the AngloGold Health service, and I worked with them to collect data on treatment, and then joined them and was exposed to HIV prevention through protocols from the Center for HIV/AIDS Vaccine Immunology (CHAVI), the HIV Vaccine Trials Network (HVTN) and the Microbicide Trials Network (MTN) and my love for HIV prevention was born.

### What do you think it will take to end the HIV epidemic, and how far away are we from this goal?

I believe that an HIV vaccine complemented with multipronged non-vaccine approaches to prevention is the answer, with associated cure interventions. I used to believe this would happen in my lifetime, but I think it may take another 10-15 years based on the fact that HIV vaccine development has moved back to the experimental phase, following futility (lack of efficacy) of the mosaic vaccine approach in both the Imbokodo (HVTN 705/HPX2008) and Mosaico (HVTN 706/HPX3002) trials. I do have great faith in the success of the interventions for women planned by MATRIX and remain committed and driven to explore all options.

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## What is your favorite part about working with MATRIX?

The interaction with one of my heroes, Sharon Hillier and the excellent team she has gathered around her, and the vision she has created for MATRIX.

## What do you think you'd be doing if HIV were non-existent?

If HIV didn't exist I would be fighting the brave fight against tuberculosis, working to create new and accessible prevention methods.

## What do you like to do in your free time?

I love watching movies and going out to visit new restaurants.

## Do you have any heroes?

Professors Salim and Quarraisha Abdool Karim, Larry Corey and Sharon Hillier. These individuals have played key roles in both testing and finding solutions for young women in Africa with regard to HIV prevention. Their commitment to this cause is unmatched, and they are just as much relentless as they are driven in their quests. They are all true inspirations for me.

## What is a fact about you that people would be surprised to know?

This is my second time working for Aurum. I initially worked for them until I joined CAPRISA in 2011, and then I returned in 2018.

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### **MATRIX**

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