

WP  
24 Nov

# As AIDS epidemic ebbs, many challenges remain

By [David Brown](#)

Washington Post Staff Writer

Tuesday, November 23, 2010; 11:41 PM

The AIDS epidemic has crested and started to recede almost everywhere in the world, but it has left behind millions of people who urgently need treatment if they are going to avoid adding to the disease's toll of 30 million dead over the past 30 years.

That is the gist of [the annual portrait of the global AIDS epidemic](#), released Tuesday by [UNAIDS](#), an agency of the United Nations and World Bank.

AIDS incidence and mortality have been declining for several years, and the new report, which includes data through the end of 2009, confirms that the trend is clear and undeniable.

"We can say with confidence and conviction that we have broken the trajectory of the HIV/AIDS epidemic," said Paul De Lay, deputy director of UNAIDS, which is based in Geneva. "There are fewer people infected, and there are fewer people dying."

The downward decline is the consequence of many forces, including sexual behavior change among young people, success in preventing mother-to-child transmission of the virus, and the lower infectious risk of people who are successfully taking AIDS drugs. It also reflects the epidemic's natural history, in which the annual number of new infections peaks and then declines as the disease "saturates" high-risk groups in the population.

In 2009 there were 33.3 million people living with HIV infection, compared with 26.2 million in 1999. However, the number of new infections in 2009 was down 16 percent from a decade ago - 2.6 million versus 3.1 million. The number of AIDS-related deaths peaked in 2004 at 2.1 million, and last year was down to 1.8 million.

Among the hopeful trends is the rapid increase in the number of people in the developing world taking the combination antiretroviral therapy that since 1996 has revolutionized AIDS care in rich countries.

In 2009 there were 5.2 million people in the developing world on the drugs, a 30 percent increase over the previous year. (Treatment of about 2.5 million of those people is paid for by the U.S. government). However, 10 million people need treatment but aren't getting it.

The report also described some discouraging developments.

In more than a half-dozen countries, HIV infection rates went up more than 25 percent in the past decade. In the United States and Western Europe, an epidemic in gay and bisexual men continues to grow unabated. There are still two new people becoming infected for every one

person who starts treatment, although that is better than two years ago, when there were five new infections for every two people starting treatment.

In 2009, about \$15.9 billion was spent on the global AIDS response, with slightly more than half the money provided by low- and middle-income countries. However, much more money, about \$26.8 billion, is needed annually to fully fund treatment, care and [prevention](#), the report said.

Equally troubling, according to the report, was that in 2009 the amount of money - \$7.6 billion - provided by wealthy countries to treat and prevent AIDS overseas was a tad lower than in the previous year.

"This is coming at the wrong moment, just as we are seeing the investment pay off," said Michel Sidibe, executive director of UNAIDS. "For me, it will be immoral to bring more than 5 million people on treatment and to possibly then say, 'We do not have the means to pay for that treatment.' "

Sub-Saharan Africa is home to about two-thirds of the people in the world living with HIV. The continent's total number of infected, about 22.5 million, continues to grow, in part because of the longer survival of people who have started taking antiretroviral drugs. In 22 of the region's nations, however, the annual number of new infections has dropped by more than 25 percent in the past decade.

A dramatically upward trend has occurred in a few places.

In Eastern and Central Europe, the number of people with HIV has tripled since 2000, with the most infections acquired through drug use.

The number of children infected at birth has fallen nearly 25 percent in five years. The fraction of infected pregnant women who get medicines to prevent passing the virus to their babies is just over 50 percent, up from 35 percent in 2007. But only 15 percent of the women are then put on a permanent course of antiretroviral therapy, which is a big problem, Sidibe said.

"We need to make sure that when we save the baby that we don't abandon the mother. That is a major challenge that I am fighting to make sure we change," he said.

AP

23 Nov

Story carried by WP

## 3 big developments make AIDS outlook more hopeful

By MARILYNN MARCHIONE  
The Associated Press  
Tuesday, November 23, 2010; 9:31 PM

-- In the nearly 30 years the AIDS epidemic has raged, there has never been a more hopeful day than this. Three striking developments took place Tuesday: U.N. officials said new HIV cases are dropping

dramatically worldwide. A study showed that a daily pill already on pharmacy shelves could help prevent new infections in gay men. And the pope opened the way for the use of condoms to prevent AIDS.

"I don't know of a day where so many pieces are beginning to align for HIV prevention and treatment, and frankly with a view to ending the epidemic," said Mitchell Warren, head of the AIDS Vaccine Advocacy Coalition, a nonprofit group that works on HIV prevention research. "This is an incredibly opportune moment and we have to be sure we seize it."

President Barack Obama said the groundbreaking research on the AIDS drug "could mark the beginning of a new era in HIV prevention."

The U.N. report said that new cases dropped nearly 20 percent over the last decade and that 33.3 million people are living with HIV now.

"We can say with confidence and conviction that we have broken the trajectory of the AIDS pandemic," said UNAIDS Executive Director Michel Sidibe in Geneva.

Health officials credit part of the decline to wider condom use, and on Tuesday, in a historic shift in church teachings, the Vatican said that using a condom is a lesser evil than infecting a sexual partner with HIV.

Condoms remain the best weapon against AIDS, and the new prevention pill is not the chemical equivalent. But scientists called it a true breakthrough. The pill, Gilead Science's Truvada, is already used to treat people with HIV. A three-year global study found that daily doses cut the risk of infection in healthy gay and bisexual men when given with condoms, counseling and other prevention services.

The drug lowered the chances of infection by 44 percent, and by 73 percent or more among men who took their pills most faithfully. Researchers had feared the pills might give a false sense of security and make men less likely to use condoms or to limit their partners, but the opposite happened - risky sex declined.

The results are "a major advance" that can help curb the epidemic in gay men, said Dr. Kevin Fenton, AIDS prevention chief at the U.S. Centers for Disease Control and Prevention. But he warned they may not apply to people exposed to HIV through male-female sex, drug use or other ways. Studies in those groups are under way.

Because Truvada is already on the market, the CDC is rushing to develop guidelines for doctors who want to use it to prevent HIV, and urged people to wait until those are ready.

As a practical matter, price could limit use. The pills cost \$5,000 to \$14,000 a year in the United States, but roughly \$140 a year in some poor countries where they are sold in generic form.

Whether insurers or government health programs should pay for them is one of the tough issues to be sorted out, said Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases. Continued

Full-text: <http://www.washingtonpost.com/wp-dyn/content/article/2010/11/23/AR2010112302324.html>

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Trinidad Express

23 Nov

## **Unsafe sex pushes new HIV cases in T&T**

### **...as infections decline elsewhere in Caribbean**

THE rate of new HIV infections in four Caribbean countries has decreased for the past nine years but remained unchanged in Trinidad and Tobago, which recorded 12,000 new infections for that period.

In a media release yesterday, UNAIDS provided details from its 2010 report, which has basic data from 182 countries.

The report found for the period 2001 to 2009, the incidence rate of HIV infection decreased by more than 25 per cent in Belize, Dominican Republic, Jamaica and Suriname, and was stable in Haiti. The data showed the decline in new HIV infections was the result of safer sex practices.

It was a different story in other Caribbean countries, such as Trinidad and Tobago, the Bahamas and Barbados, where "the adult HIV prevalence remained high or has increased". It was found overall, 50 new HIV infections occurred every day in the region and in 2009, there were between 230,000 and 290,000 people living with HIV in the wider Caribbean.

The release stated overall prevention programmes did not reach the most at-risk populations, namely men who have sex with men, female and male sex workers, crack cocaine users and prisoners, and the prevalence of HIV in these groups was very high.

"Therefore, more effort is necessary to reach out to these key population groups in the society if the prevention programmes have to achieve greater impact," the release added.

The report found for the previous nine years, new HIV infections have fallen by 14.3 per cent in the Caribbean but below the 20 per cent global decline. It also found the direct impact of antiretroviral treatment has resulted in a 43 per cent decline in AIDS-related deaths, which was well above the 20 per cent global decline in the previous nine years.

"These data show that prevention is working and treatment is having a positive impact on lives of people living with HIV," said director of the UNAIDS Caribbean Regional Support Team Ernest Massiah.

UNAIDS noted in the Caribbean, during the past five years, 72 per cent of all resources allocated to HIV were from external sources.

"This needs to be changed, and national authorities have to commit national resources to respond to HIV if gains made have to be sustained and expanded," the organisation added.

UNAIDS suggested this change could take the form of new approaches, including integration of interventions, decentralisation of services and focusing national attention and resources on population groups where new HIV infections are occurring.

NYT

23 Nov

U.N. Reports Decrease in New H.I.V. Infections

By [DONALD G. McNEIL Jr.](#)

Fewer people are being infected with the virus that causes [AIDS](#) than at the epidemic's peak, but progress against the disease is still halting and fragile, the [United Nations'](#) AIDS-fighting agency reported Tuesday.

In its new [report on the epidemic](#), Unaid said 2.6 million people became newly infected with H.I.V., the virus that causes AIDS, in 2009 — almost 20 percent fewer than in the late 1990s.

But progress is spotty. About 25 countries are doing better at prevention, including several in southern Africa with sky-high AIDS rates.

South Africa, which has the world's worst epidemic, has benefited from the changeover from the presidency of [Thabo Mbeki](#), which was hostile to the distribution of AIDS drugs, to that of [Jacob Zuma](#), who has publicly taken an AIDS test and urged citizens to do the same. Still, it faces an estimated 350,000 to 500,000 new infections annually.

In one area, progress has been heartening: giving mothers drugs to prevent the infection of their babies at birth or through [breastfeeding](#).

“We’ve had a 50 percent reduction of infections among young people in South Africa, which is a huge reservoir,” Michel Sidibé, executive director of Unaid, said in an interview in Manhattan last week.

Mr. Sidibé gave several reasons for the change.

“Relations between parents and children over discussing sexuality are changing,” he said. “Previously, no one would talk about it. Now, more people are willing to talk to their children.”

Also, he said, people are sleeping around somewhat less. “In 59 countries we surveyed, only 25 percent said they had had more than one partner in the last year,” he said. “That is a big shift.”

And, he said, while posters urging everyone to use [condoms](#) are not particularly effective, government health agencies have gotten better at “concentrating on hot spots” like sex workers and long-haul truckers.

In countries like Senegal and Malawi, Mr. Sidibé said, “there has been a sea change in attitudes toward men who have sex with men.”

In countries that jailed homosexuals or simply denied that there were any, gay men have been released from prison. Instead of driving gay men underground, some governments are trying to reach them with safe-sex education and condoms.

At the same time, some countries are becoming worse, especially those in Eastern Europe and Central Asia, where the epidemic is concentrated among heroin-injectors and their sexual partners. As Afghan and southeast Asian heroin spreads along new distribution routes, more addicts are created, increasing AIDS infections in countries with little history of dealing with them.

There are exceptions. In Iran, Mr. Sidibé said, he accompanied a woman in a chador who was handing out condoms in prison.

“I was shocked,” he said. “In Iran, the prisons had one of the most progressive programs. There was methadone maintenance; there was condom distribution. They even had conjugal visits for prisoners — five hours in a private room every three months with your wife. With condoms.”

There is also both good and bad news on the treatment front. About 5.2 million people are getting antiretroviral drugs — more than ever before, thanks to the multinational [Global Fund to Fight AIDS, Tuberculosis and Malaria](#) and its strictly American counterpart, the [President’s Emergency Plan for AIDS Relief](#). But 10 million more still need the treatment immediately, and it seems unlikely that donors will give enough money to keep them all alive.

Also, some people have developed resistance to first-line drugs, but the money for more expensive second- and third-line drugs is not there.

It is now nearly 30 years since the epidemic began, and an estimated 33.3 million people are living with H.I.V. That number has never been higher, and its growth is due to a combination of new infections and the receipt of life-prolonging treatment by more of the sick.

But a comparison illustrates how much progress still needs to be made before it can be said that the world is winning the war on AIDS: in its previous report, Unaid estimated that for every 100 people put on treatment each year, 250 became newly infected. Now, it estimates that for every 100 on treatment, 200 become infected.

A version of this article appeared in print on November 24, 2010, on page A4 of the New York edition.

New vision, Uganda

24 Nov

Sex workers causing rise in HIV

**By Raymond Baguma and Chris Kiwawulo**

TEN percent of new HIV infections in Uganda have been linked to sex workers, according to the newly released 2010 UNAIDS report on the global AIDS epidemic.

The report says paid sex remains an important factor in the HIV epidemic trend in Uganda, with infections occurring among sex workers, their clients, or their other sex partners.

It also lists Uganda among 14 African countries with condom use rates of 20% or less for people with more than one partner. The other countries are DR Congo, Ethiopia, Malawi, Rwanda and Tanzania.

The report shows that there are more women going for antenatal care in Uganda. Also, the number of Ugandan girls and boys who have had sex by the age of 15 is declining.

Also, more women have reported having had sex with more than one partner in the past year, while there is no evidence of change in the number of men with more than one sexual partner.

It adds that the number of men and women with multiple sexual partners without using condoms is declining significantly.

Trend analysis shows a general decline in the percentage of people who had more than one partner in the past year.

However, Ugandan men above 25 years are increasingly reporting multiple partners, while the number of women with more than one sexual partner has remained stable.

The report also shows that Uganda has rolled out the adult male circumcision programme, with 5,340 men circumcised between October 2008 and March 2010.

Under treatment coverage for adults and children in line with the World Health Organisation guidelines, Uganda's antiretroviral coverage for children is at 18%, while 43% of Ugandan adults have access to antiretroviral treatment.

According to the report, 1.2 million Ugandans live with HIV, while only 200,000 people are receiving antiretroviral therapy. The report also shows that around 76% of Ugandans on antiretroviral treatment continue receiving treatment one year after initiation.

The report points out that Uganda's inadequate political will and insufficient resources are challenges to increasing access to high-quality HIV/AIDS care and support services.

The scorecard for Uganda shows that the rate of HIV infection between 2001 and 2009 has remained stable at between 6.5% and 7.0%. Infection rates for Kenya have stagnated, while Rwanda and Tanzania's prevalence rates have decreased.

### **Global trend**

The report shows that the world is beginning to reverse the spread of the virus.

"New HIV infections have fallen by nearly 20% in the last 10 years. AIDS-related deaths are down by nearly 20% in the last five years," reads the report.

The report contains data on HIV from 182 countries. It also gives new evidence that investments in HIV prevention programming are producing significant results in most of the highest burdened countries.



However, even though the number of new HIV infections is decreasing, there are two new HIV infections for every one person starting HIV treatment, which shows that HIV prevention programmes have been inadequate.

The report also points out that despite the decline in HIV adult prevalence worldwide, and increasing access to treatment, the total number of children aged 0–17 years, who have lost their parents due to HIV, has not declined.

The number of HIV orphans has increased from 14.6 million in 2005 to 16.6 million in 2009.

Almost 90% of the orphans live in sub-Saharan Africa. A total of 9 million orphans live in Uganda, Kenya, Nigeria, South Africa, Tanzania and Zimbabwe. Of these, 2.5 million orphans are in Nigeria alone.

Daily Monitor, Uganda  
24 Nov

## Good and bad news in new report on HIV

By Evelyn Lirri

### Kampala

The number of new HIV/Aids infection has fallen globally by 19 percent, but a cap in HIV funding could reverse this trend, the Joint United Nations Programme on HIV/Aids (Unaids) has revealed in its annual report.

The report rates Uganda as a country that is not making progress but where the epidemic is not yet becoming worse. The report says funds available to fight HIV/Aids in 2009 totalled \$15 billion, but this is \$10 billion short of what is needed in 2010. Since the epidemic peaked in 1999, the report says its prevalence in some countries has declined by 25 per cent or more.

Expanding access to anti-retroviral treatment, which has now reached 5.2 million people living with HIV/Aids, has yielded a 19 per cent decline in deaths since 2004, but 10 million people -- mostly in developing and low income countries -- still do not have access to lifesaving drugs.

The report, based on a survey of 182 countries, also found that the epidemic was increasing in seven countries; in 23 countries, including Uganda, the epidemic was stable, and cases declined by 25 per cent or more in 33 other countries.

The report shows that Uganda's Aids prevalence has stabilised between 6.5 and 7 per cent since 2001. "We have halted and began to reverse the epidemic. Fewer people are becoming infected with HIV/Aids and fewer people are dying from Aids," said Michel Sidibe, the executive director of UNAIDS. "However, we are not yet in a position to say mission accomplished," he added.

### Fight still on

Instead, recent achievements are being threatened by flattened funding for HIV/Aids worldwide. The report shows that demand for Aids treatment and care is outstripping supply.

To keep Aids-related deaths declining, countries should adopt a new and simplified HIV treatment platform called Treatment 2.0. Treatment 2.0 is a new approach of using treatment to increase prevention, making available cheaper and simplified diagnostic tools, and a low-cost community-led approach to delivery of HIV services.

This new treatment plan, according to the UN body, could bring down costs and make treatment regimens simpler compared to current approaches. If adopted, it could also avert up to 10 million deaths by 2025 and one million new infections every year.

### **Declining deaths**

According to the report, the expansion of ARV treatment has contributed to a 19 per cent decline in deaths between 2004 and 2009. Some 1.2 million more people also had access to ARVs globally by the end of 2009, representing a 30 per cent increase.

In Uganda, the number of people accessing ARVs stands at 200,000 people, but this is far below the 322,000 who require the drugs currently. With more than 130,000 new infections occurring every year, according to the Uganda Aids Commission, meeting a growing number of people who will need treatment will be a huge challenge.

Voice of America News

23 Nov

## **UN Reports Progress Against HIV/AIDS in Africa**

Scott Bobb | Johannesburg

The United Nations says progress is being made worldwide against the HIV/AIDS virus, as fewer people are becoming infected and fewer are dying from the disease. The report also cites progress in sub-Saharan Africa, where two-thirds of all HIV victims live, but says greater efforts are needed in the struggle.

The United Nations report on HIV/AIDS says expanded treatment has dramatically reduced deaths from the virus in sub-Saharan Africa, but the region remains the most affected in the world.

The report said new HIV infections on the continent declined by nearly 20 percent since 2001, and dramatically improved access to treatment has lowered deaths by 20 percent in five years.

The director of UNAIDS for Eastern and Southern Africa, Sheila Tlou, said this was the good news in the battle against HIV, which attacks the immune system and has killed 30 million people in the past three decades.

But she warned against complacency.

"Even though the number of HIV infections is decreasing, there is still a need for prevention, because there are two new HIV infections for every one person that is put on HIV treatment," said Tlou.

She noted that southern and eastern Africa still bear the brunt of the epidemic, with five percent of the world's population, but one-half of all HIV victims.

Nevertheless, the report notes that new infections had declined by more than 25 percent in four of the African countries with the largest HIV epidemics - Ethiopia, South Africa, Zambia and Zimbabwe - and had stabilized in a fifth, Nigeria.

South Africa's deputy minister of Health, Gwen Ramokgopa, praised the report for highlighting progress as well as challenges.

"We are encouraged that, particularly in sub-Saharan Africa - including in our country, South Africa - we are seeing the dawn of a new era, where we are starting to halt the epidemic. And, indeed, we need to consolidate our efforts so that we can get into a phase of reversal," said Ramokgopa.

The report says the epidemic is having a particularly heavy impact on African women, who account for three-fourths of HIV infections worldwide. It says for every 10 men who become infected in Africa, HIV infects 13 women.

It said stigma and discrimination also discouraged marginalized groups, such as sex workers, gays and drug users, from accessing testing and treatment on the continent.

But it said new infections among young people declined by 25 percent in the most affected countries between 2000 and 2008. And, it said, infection of African children had declined by 32 percent between 2004 and 2009, a reflection of the increased access to treatment by pregnant women.

Tlou concluded that the battle against HIV/AIDS was far from over, noting that funding for the effort last year fell \$10 billion short of the amount needed.

"Yeah, we have the good news. But the AIDS response is fragile. It needs to be kept alive. It needs to be kept alive with funding. Domestic funding is still very low," said Tlou.

She urged African governments to rely less on international donors, noting that, although many African governments have pledged to devote at least 15 percent of their budget to health and HIV/AIDS, only a few have done so

IBN Live, India

23 Nov

## UN HIV programme shows success in India

[Press Trust Of India](#)

Posted on **Nov 23, 2010 at 23:10**

**New Delhi:** The AIDS epidemic is for the first time showing a reverse trend which has been attributed to high investment in HIV prevention programmes by India and other most affected countries over a decade.

"Investments in HIV prevention programmes are producing significant results in many of the highest burden countries. India is one of them. The incidence rate of new HIV infection fell by more than 25 per cent between 2001 and 2009 here," Charles Gilks, UNAIDS country coordinator, said while releasing the 2010 UNAIDS report on the global AIDS epidemic today.

Around 2.4 million estimated people are living with HIV last year in India as against 2.5 million in 2001 with the exposure rate down by 50 per cent. Overall there has been a nearly 20 per cent decrease in new HIV infections over the past decade globally.

Gilks also said that condom use and availability have increased significantly. Eleven countries including India report more than 75 per cent condom use in the higher risk groups.

An estimated 1.8 million people died from AIDS related illnesses globally by 2009 end as against 2.1 million in 2004.

People with HIV/AIDS are now living longer due to the greater availability of anti-retroviral drugs. The total number of people on treatment has increased by seven and half times over the last five years with 5.2 million people having access to life saving drugs in 2009 compared to seven lakh in 2004.

In Asia, an estimated three lakh people died from AIDS related causes in 2009 compared to 2.5 lakh in 2001. AIDS related deaths among children declined from 18,000 in 2004 to 15,000 in 2009 - a decrease of 15 per cent.

"The decline reflects the increased availability of anti - retroviral therapy, as well as care and support, to people living with HIV, particularly in middle and low-income countries," Gilks said.

By 2009 end, an estimated 33.3 million were living with HIV across the world while 2.6 million people became newly infected. But the report said there had been rises in infections in parts of Eastern Europe and Central Asia.

Mail & Guardian, SA

23 Nov

## UNAids report of the global Aids epidemic

[FARANAAZ PARKER](#) | JOHANNESBURG, SOUTH AFRICA

Efforts to curb de AIDS pandemic are **beginning to pay off and the world is beginning to see a reversal in the spread of the syndrome. This was revealed in a global report released by the United Nations on Thursday.**

According to the Joint United Nations Programme on HIV and Aids (UNAids), the global number of people newly infected with HIV is declining and Aids-related deaths are decreasing. The report showed that an estimated 2,6-million people became newly-infected with HIV in 2009. This was a 20% drop from the 3,1-million people infected in 1999.

"The report gives new evidence that investments in HIV prevention programming are producing significant results in many of the highest burden countries," the organisation said.

Condom use and availability have increased significantly over the past few years and the number of people on treatment has increased seven and a half times in the last five years. Globally over 5,2-million people now have access to life-saving antiretroviral treatment, compared to 700 000 in 2004.

Professor Sheila Tlou, director of the UNAids regional support team for Eastern and Southern Africa, said the report showed that people in sub-Saharan Africa were now living longer lives and fewer children are contracting the virus. "The

efforts of anti-retroviral therapy are really evident especially in our region of the world."

### **Africa still bears the brunt**

**However, Eastern and Southern Africa remain the epicentre of HIV.**

**According to UNAids, 1,8-million people were newly infected with HIV in sub-Saharan Africa in 2009. This is more than twice as many people as were infected in the rest of the world combined last year. In addition, more than 70% of the 1,8-million deaths due to Aids last year, occurred in sub-Saharan Africa.**

**But Tlou warned that the battle is not yet won. "Even though the rate of HIV-infection is decreasing, there is still a need for prevention because there are two new infections for every one person put on treatment," she said.**

**Tlou also pointed out that 50% of new infections are acquired within marriage or cohabitation. According to Tlou, the prevalence of sero-discordant couples, where one person is HIV positive and the other is not, is very high in sub-Saharan Africa, at a rate of between 35% and 85%. Because of this, Tlou said, there is a serious need for couples counselling and testing to ensure that couples can access services like prevention, treatment, care and support.**

### **Human rights still not guaranteed**

**Nonkosi Khumalo, chairperson of the Treatment Action Campaign, welcomed the news that the epidemic is stabilising and even reversing in some areas. However, she said, human rights is still an issue that needs to be addressed as part of the global response to Aids.**

**The UN report said that although most countries acknowledge human rights in their Aids strategies, punitive laws that criminalise same-sex relationships continue to hamper access to Aids-related services.**

**Khumalo said she found it disturbing when 79 states, mainly from Arab and African countries, last week voted to remove a reference to sexual orientation from a UN resolution condemning unjustified killings. South Africa's UN delegation also voted to have the reference removed.**

**"What was disturbing for me was that it was lead by largely African leaders," she said. "We want to say all the right things but we're failing to put into practice things that could and should work."**

**Khumalo said states would not be able to curb the impact of Aids unless they take into consideration marginalised groups, like sex**

**workers and homosexual men.**

**"The road is still very long and activists will continue to push for human rights," she said.**

## **OTHERS**

World Radio Switzerland  
23 Nov

### **Pope's comments open up dialogue on use of condoms**

**Geneva-based UNAIDS has called the apparent softening of the Vatican's stance on condom use positive and significant. The Catholic church's unbending stance has been a serious obstacle to HIV and AIDS campaigners for decades. However, in a recent interview, Pope Benedict XVI outlined certain scenarios where condom use might be the best moral option. WRS's Pete Forster spoke to the deputy executive director of UNAIDS, Paul De Lay, and asked him why the change is important:**

Audio link: <http://worldradio.ch/wrs/news/switzerland/popes-comments-open-up-dialogue-on-use-of-condoms.shtml?21916>

WP  
23 Nov

This story widely covered worldwide

## **Daily AIDS drug lowers risk of HIV, study finds**

By [David Brown](#)  
Washington Post Staff Writer  
Wednesday, November 24, 2010

When gay men at high risk of becoming infected with HIV through sex take a daily dose of antiretroviral drugs, their chance of catching the virus drops by at least 40 percent, according to a new study.

The protective benefit could be as high as 95 percent if a person is extremely attentive about not missing a dose, the research on nearly 2,500 men on four continents found.

The study provides further proof that the drugs that have transformed AIDS treatment over the past 15 years might be powerful tools in preventing infection, as well. Earlier evidence of that appeared last summer, when a study testing a vaginal gel containing an AIDS drug lowered African women's risk of acquiring HIV by 40 percent.

"This study really represents what I think is a major advance in HIV prevention research," said Kevin Fenton, a physician who directs AIDS prevention activities at the Centers for Disease Control and Prevention, which was not involved in the study. The findings were published Tuesday in the New England Journal of Medicine.

This latest approach adds to a growing menu of strategies for preventing infection in ways other than by urging people to change their behavior. While globally the AIDS epidemic is starting to ebb, gay men remain a risk group in which rates of infection are growing in both rich countries and the developing world. This study offers a new tool to address that problem.

"This is an extremely important advance in our efforts to address HIV in both the United States and globally," said Chris Collins, policy director of the New York-based organization amfAR, the Foundation for AIDS Research.

"This is a great day in the fight against AIDS. It's a result that requires immediate action," said Mitchell Warren, director of AVAC, an AIDS advocacy and educational group.

The researchers running the study warned that its findings apply only to gay men and cannot be extrapolated to men and women at risk of acquiring HIV through heterosexual intercourse.

The use of antiretroviral drugs for prevention is known as "preexposure prophylaxis," or "PrEP" for short. There are about a half-dozen other studies of PrEP strategies underway around the world, testing both pills and gels in heterosexual men and women and IV drug users.

The new findings raise questions that public health authorities are already scrambling to answer.

One is whether it is ethical to use placebos in the other PrEP studies. Another is what to tell doctors and patients who want to start using the strategy now.

The two drugs in the study - emtricitabine and tenofovir - aren't officially approved for AIDS prevention. But doctors can prescribe them for that "off-label" purpose. Sold in combination under the brand name Truvada, they cost \$5,000 to \$14,000 a year, depending on whether they are bought at retail price or with a bulk discount. In the

generic form sold to the poorest countries, however, the combination costs as little as \$150 per year.

In the next few weeks, Fenton said, the CDC will provide advice to gay men and their doctors who might want to put the findings into practice immediately. More detailed guidance, as well as cost-benefit calculations that might help determine whether insurance companies will pay for the strategy, will come later.

Fenton and other public health officials are especially worried that gay men might trust the medicines too much.

"It is not time for gay and bisexual men to throw out their condoms or to abandon other ways to prevent HIV," he said.

The director of the study, Robert M. Grant of the University of California at San Francisco, said PrEP should be embarked upon only "under supervision of health-care providers" and needs to be part of an HIV prevention package that includes regular AIDS testing and the delivery of time-honored messages such as the importance of reducing the number of sex partners.

Gay and bisexual men account for nearly half the 1.1 million Americans infected with HIV, and 53 percent of new infections. The infection rate for this risk group has been increasing for more than 15 years

The study, called the Preexposure Prophylaxis Initiative, enrolled 2,499 men in Peru, Ecuador, Brazil, South Africa, Thailand and the United States. About half were in Peru, and the average age was 27.

As a group, they were at very high risk for acquiring HIV. The average number of sex partners they reported having in the previous three months was 18. Sixty percent reported having unprotected receptive anal intercourse - the riskiest activity - during that time. About 40 percent reported having traded something - food, drink, drugs, shelter or money - for sex.

The subjects were randomly assigned to take the combination of the two antiretroviral drugs, or a look-alike placebo, once a day. They were given extensive prevention counseling, were tested regularly and were given a short course of AIDS drugs if they thought they'd had sex with an infected person - a strategy called post-exposure prophylaxis that's been shown to work.

They were followed for an average of 1.2 years, and during that period 100 became infected with HIV. Thirty-six were in the drug group and 64 in the placebo group. That



difference amounted to a 44 percent reduction in the chance of becoming infected in the drug group.

Side effects of the drugs were minimal. About 2 percent of people taking the AIDS drugs experienced nausea or weight loss. About 6 percent of people in both the drug "arm" and the placebo "arm" of the study stopped taking their pills either temporarily or permanently because of side effects.

Although most patients reported taking the pills nearly every day, a count of pills left in their bottles at the end of the month, as well as lab testing of their blood, suggested that many doses were missed. But in those with adequate bloodstream concentration of the drugs, the risk of infection fell 95 percent.

"When people take the drug frequently enough to establish a [target] drug level, they are highly protected," Grant said.

The study cost \$44 million. The National Institute of Allergy and Infectious Diseases, part of the National Institutes of Health, provided \$28 million, and the Bill and Melinda Gates Foundation provided \$16 million. Gilead Sciences, the pharmaceutical company that makes the two drugs, provided them for free but did not otherwise participate in the study.

The new findings come at a time of cautious optimism elsewhere in the effort to prevent HIV infection.

Several studies have shown that circumcision reduces by about 50 percent a man's chance of becoming HIV infected through heterosexual intercourse. There's now a big effort to make the procedure available in AIDS hot spots around the world. The U.S. government, through the President's Emergency Plan for AIDS Relief, or PEPFAR, paid for 130,000 circumcisions in 14 African countries last year.

An AIDS vaccine tested in Thailand last year was found to be 30 percent protective, too little for practical use but the first hopeful sign on the vaccine front in years. More recently, molecular studies of HIV-fighting antibodies, and the analysis of the genomes of patients who are able to control HIV infection without drugs, are providing scientists new targets for vaccine development.