

HEALTH



# HIV

## THE GOOD NEWS

Since the first case of HIV was reported almost 30 years ago, there has been little to feel upbeat about. But with South Africa making strides on new medical developments, we have something to celebrate.

By **MELINDA FERGUSON.**

In July this year, a groundbreaking HIV prevention/cure announcement was made at the International Aids Conference in Austria that made the world sit up and take notice. Ten years of failed trials had finally yielded great news.

### **MIRACLE GEL**

After conducting trials on the efficacy of a microbicide (a vaginal gel that targets viruses or bacteria) among 889 women in KwaZulu-Natal for a period of two-and-a-half years, Dr Salim Abdool Karim and his team from the University of KwaZulu-Natal announced that the Caprisa





significant role in the prevention of HIV and the herpes simplex virus. It's the first time in medical history that a microbicide trial has achieved this level of success.

Dr Karim spoke in a late-breaking news special session at the Aids Conference. He was twice interrupted by applause and his presentation ended with a standing ovation for the researchers on the now famous Caprisa 004 Trial.

Should other studies of Tenofovir gel confirm these results, widespread use of the gel could prevent over 500 000 new HIV infections in South Africa alone over the next decade. "It's absolutely fantastic!" said Dr Timothy Farley, coordinator for the control of sexually transmitted infections at the World Health Organization.

Treatment Action Campaign (TAC) chairperson Nonkosi Khumalo explains that Dr Karim's announcement has far-reaching benefits for female sexual health in

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microbicide had reduced HIV infection by 39 percent among respondents.

The protective gel contains the anti-HIV drug Tenofovir, which works to prevent the virus from multiplying inside human cells. Generally available in pill form, Tenofovir is a popular component of various three-drug cocktails that are used to treat HIV-positive people. The drug is fast gaining the reputation for having the least number of side effects.

The new results indicate that Tenofovir, inserted into the female genital tract as a topical gel 12 hours before sex and within 12 hours after sex, has the potential to play a

particular. "For the first time there is hope that women will be able take control of their own protection and not necessarily depend on their partners and male condoms for prevention," she says.

Other encouraging breakthroughs have also emerged on the prevention and treatment front.

### CIRCUMCISION

Research has shown that medical male circumcision reduces the chances of HIV infection by 60 percent. As a result, the government has made voluntary medical male circumcision (VMMC) an integral part of its HIV

counselling and testing campaign. The campaign aims to offer all men aged 15 to 49 and guardians of infants below six months, VMMC at public health facilities in all provinces by 2011. In April 2010, KwaZulu-Natal became the first province to offer the service.

It's estimated that a programme with male circumcision could prevent 500 000 new infections and 100 000 deaths within a decade – with these figures rising in the decades to follow.

TAC's Khumalo warns that circumcision shouldn't be the exclusive method of prevention. "It's extremely important to still use condoms and not regard circumcision as a prevention method on its own," she cautions.

More good news is that a number of medical aid funds are coming to the party by approving claims for medical-circumcision procedures.

### GREATER ACCESS TO ARVs

According to the latest statistics from PlusNews, the United Nations' online HIV/Aids news service, South Africa has the world's largest ARV programme, with more than a million people currently on ARV treatment.

At the end of 2009, an estimated 37 percent of people were receiving antiretrovirals (ARV), according to the latest 2010 World Health Organization guidelines.

"By contrast, between 1 million and 3 million people died unnecessarily between 1999 and 2006 during the so-called Mbeki/Tshabalala-Msimang era because of poor access to ARVs," a Harvard study reported.

"In fact, I think the figures are much higher than the study estimates," says Dr Francois Venter, president of the Southern African HIV Clinicians Society and clinical director of the Reproductive Health and HIV Research Unit at the University of the Witwatersrand. "Many children were infected during that time because mothers did not have access to [the ARV] Nevirapine."

These days, however, South Africa's treatment capabilities are cast in a more positive light. There is a huge amount of data proving that the >





state HIV programme is both doable and affordable, which is excellent news, confirms Dr Venter.

### CHILDREN BORN HIV-FREE

Mother-to-child transmission rates have also seen an encouraging drop in numbers in the recent past. The Gauteng Health and Social Development Department recently announced that more than 90 percent of babies born to HIV-positive mothers in the province's public-health facilities between April and June 2010 were negative. This was an improvement from an average of 70 percent in the previous period.

"There is a lot of progress in this area," says Dr Venter.

"Women are testing when they fall pregnant. Patients are far more HIV-savvy these days. We are finally seeing the results of good and far-spread HIV education."

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### YOUTH INFECTION DROPS

In July, UNAIDS executive director Michel Sidibé highlighted how young people in the world, including those in South Africa, are leading the prevention revolution.

Statistics showing that HIV prevalence has dropped 25 percent among youth in 15 of the hardest-hit countries were welcomed.

A 2008 survey on national HIV prevalence, incidence, behaviour and communication among South African teenagers showed an estimated 60 percent drop in infection rates in among 15- to 24-year-old age groups.

"I think the decrease means that all the education and communication is coming to fruition," Dr Sue Goldstein from *Soul City* told *The Times* newspaper. "We do know that there has been a huge increase in the use of condoms among the youth particularly and this, with other safer sexual practices, is starting to show an effect."

### SA'S NEW COMMITMENT

South Africa is turning the corner on HIV/Aids on many levels, says TAC's Khumalo. The incumbent government has pronounced positively on forward-thinking plans and programmes to be implemented.

In December last year, President Zuma and Health Minister Dr Aaron Motsoaledi announced numerous new HIV policies to galvanise its HIV strategy and improve the lives of those living with the virus. Some of these new policies include:

#### **New treatment guidelines for adults:**

The new starting point for ARV treatment is a CD4 of 350 and below for pregnant women and people co-infected with HIV and tuberculosis. The ARV D4T has now been replaced with Tenofovir (the more patient-friendly ARV component) and other more tolerable drugs with less negative side effects.

#### **New prevention method for mother-to-child transmission:**

Pregnant mothers with HIV are now initiated on treatment early, at CD4 350 and below, and they're >



put on triple therapy (not single and dual therapy as per the previous policy). This will ensure that less than five percent of children are born with HIV or are infected with HIV during and after pregnancy, decreasing HIV-related maternal and child mortality.

#### **New treatment guidelines for paediatric care:**

The policy states that children should be tested early (three months after birth). If they test HIV-positive, they are immediately put on treatment. This will drastically decrease the paediatric HIV pandemic and save many more young lives.

#### **CHALLENGES AHEAD**

With all the good news, it's important to be aware of the enormous challenges still at hand.

"Although the current Health Ministry is doing a really great job, they're in the unenviable position of having inherited a health-care system that was in a total mess," cautions Dr Venter.

"Even though there is far greater access to ARVs and education today, there are still those who're falling through the cracks due to accessing treatment too late.

In some places an unfriendly health system and health workers still exist, preventing people from accessing treatment."

Supporting Dr Venter's sentiments, a study conducted at two Durban clinics has shown that most patients who came in to be tested only did so at a late stage of infection at these institutions. Late-stage diagnosis and subsequent delayed treatment has devastating consequences.

Of those who were eligible for treatment, more than a fifth died before beginning treatment.

"The statistics around older age groups are also not hopeful at all," laments Khumalo. "That's why we need to improve our messaging on HIV prevention."

Another study conducted by the Human Sciences Research Council shows that couples in marriages are more vulnerable to HIV infection than single people, and men aged 55

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and older are increasingly susceptible to HIV. Khumalo believes that there needs to be better planning and financing of general health and HIV/Aids programmes by government and development partners to keep the momentum going.

International funding for HIV/Aids prevention and research is on the decline, and this can be disastrous for countries hardest hit by the epidemic, such as South Africa.

"Infrastructure and management needs to be improved in the public healthcare sector," urges Khumalo. "There needs to be training of caregivers and a better flow of information between patients, healthcare workers and officials. Above all, we need to make sure these plans are implemented." ■

## AIDS GOES LITERARY

Over the past decade South African authors have been finding a creative way to give the virus a face and a voice. HIV/Aids literature is playing a huge role in HIV education and de-stigmatisation.

#### **Beauty's Gift by Sindiwe Magona (Kwela Books)**

"Beauty's Gift is one of the most important books written on HIV/Aids in our country." – Treatment Action Campaign founder Zackie Achmat

#### **Aids Safari by Adam Levin (Zebra Books)**

A joint winner of the *Sunday Times* Alan Paton Award in 2006, Levin's book is a personal and no-holds-barred memoir on contracting and living with the virus.

#### **Three-Letter Plague by Jonny Steinberg (Jonathan Ball)**

A bestseller locally and internationally, Steinberg's book penetrated the darker side of the disease.

"When people die en masse within walking distance of treatment, my inclination is to believe that there must be a mistake somewhere, a miscalibration between institutions and people. This book is a quest to

discover whether I am right." – author Jonny Steinberg

#### **Witness To Aids by Edwin Cameron (Tafelberg Publishers)**

Cameron was the joint winner with Levin of the Alan Paton Award. The fact that a Constitutional Court judge had come out gay and HIV-positive makes this book a compelling read.

#### **Flowers Of The Nation by Sandile Memela (University of KwaZulu-Natal Press)**

Memela manages to tell a powerful story about HIV/Aids in less than 100 pages. He describes access getting tested, access to treatment, the stigma attached to the infection and the impact it has on families.

#### **What Is Left Unsaid: Reporting the South African HIV Epidemic – Edited by Kristin Palitza, Natalie Ridgard, Helen Struthers and Anton Harber (Jacana Media)**

It is a fascinating collection of essays and insights on the history of media reporting on HIV/Aids.

All books available from *Exclusive Books*, or on [www.kalahari.net](http://www.kalahari.net).



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\* For the purpose of the article, a donor is a person who donates his/her organ legally and without any remuneration, while a supplier provides his/her organ in exchange for a financial reward.

## Shocking facts about illegal organ trade

- Several Mozambican human rights groups and the Brazilian Mission in Nampula, Mozambique notified authorities that many children were missing vital organs, with several children believed to have died as a result of organ harvesting. Most of the harvested organs are believed to be sent to South Africa for both transplants and for religious rituals. There have also been reports of children being kidnapped and killed for their organs in South America.
- Many of the kidneys on the black market come from poor and vulnerable people in desperate need of money. These suppliers get only a small part of the money and are often left debilitated by the lack of post-operative care. Sometimes entire villages have given their kidneys, like Villivakkum in India which has been referred to as "Kidneyvakkum."
- In Egypt, one method of organ trafficking revolved around a hiring scheme. Young men were hired for a job and sent to a physician for an exam to ensure that they were in good health. The young men would wake up in hospital in pain and be missing a kidney. Victims of this scheme have faced threats of violence when they filed charges against those who perpetrated the crime.
- China has been under scrutiny for several years for detaining members of dissident groups, executing them, and selling their organs. One American paid \$100 000 for a liver to keep his mother alive only to discover that his transaction with a man in Shanghai was likely a part of this Chinese racket that included using a religious group to help facilitate the sale of the liver.
- Despite the high numbers of illegal organ transplants and rampant disregard for the law, organ trafficking is illegal in all but one country around the world. In Iran, organ sales are legal and closely monitored. The practice of legal organ transactions has eliminated the waiting list for those awaiting a kidney and has provided an increase in post-mortem organ donations, although those are not remunerated in Iran.
- In 2009, five prominent rabbis in New Jersey, USA, were arrested for money laundering and trafficking organs. The rabbis allegedly convinced Israelis to sell their kidneys for \$10 000 and then charged up to \$160 000 for the kidneys to those in need. The rabbis stated their money came from other sources, with one man claiming the money came from the "diamond business".
- Three Ukrainian women were arrested in Italy after auctioning off the unborn child of one of the women. The baby's mother sold her unborn child for €350 000 to undercover officers who posed as drug runners looking for a baby for its organs. The officials believe the gang of women had performed many such transactions, sometimes selling babies for illegal adoptions and sometimes for their organs.
- More than 70% of South Africans surveyed as part of a report on the trafficking on human body parts believe that muti killings would increase as the 2010 FIFA World Cup approached. Simon Fellows, author of a report entitled *Trafficking Body Parts in Mozambique and South Africa* said: "There is a clear link between muti and business. With the World Cup approaching, people we surveyed believe more people will be killed and their body parts used in muti that is bought to ensure business' prosperity." Fortunately the SAPS stated after the event that there were no indications that human trafficking increased prior to or during the event as had been speculated before.