

# HATiP

HIV & AIDS Treatment in Practice

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## News headlines

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Total lymphocyte count, anaemia, add to symptoms in pinpointing who needs treatment in Thailand

<http://www.aidsmap.com/en/news/6793640B-E0B9-41DA-9E32-F1B3B7B9AC50.asp?hp=1>

Current WHO advice on the detection of severe immunosuppression in the absence of sophisticated laboratory tests may result in a significant underestimate of the number of people who would benefit from immediate antiretroviral therapy, according to findings from a joint US/Thai study published in the June 1st edition of the Journal of Acquired Immune Deficiency Syndromes.

Tattooing associated with HIV risk in Chennai, India

<http://www.aidsmap.com/en/news/9C786221-5D9F-496C-91C4-1A5659ACC5EA.asp?hp=1>

Around 30% of the intravenous drug users (IVDUs) in Chennai, India, are infected with HIV, and around one out of six of these has passed the infection onto their regular sex partners, according to a cross-sectional study published in the May 1st edition of the Journal of Acquired Immune Deficiency Syndrome. Once HIV prevalence among a high-risk IVDU population becomes so high, the paper says "HIV epidemics can become self-perpetuating, with even modest levels of risk behaviour leading to substantial rates of infection. And yet very few of the participants in this study, including those who were infected, thought that they were at any risk of contracting HIV." Lipodystrophy on first-line ARV regimens common in Indian patients

<http://www.aidsmap.com/en/news/B15C0D05-95D8-42BF-ABEF-E51EF79E10BE.asp?hp=1>

Lipodystrophy appears to be just as common in Indian patients receiving antiretroviral treatment as it is in the United States and Europe, according to a report from an HIV clinic in Pune, Western India, published in the June 1st edition of the Journal of Acquired Immune Deficiency Syndromes.

First Indian generic ARV given US FDA approval

<http://www.aidsmap.com/en/news/4A4CA2DE-A5AC-4DED-86EF-2DD82470197F.asp?hp=1>

The Indian pharmaceutical company Ranbaxy has announced that it has received `tentative approval` of its version of lamivudine (3TC) from the US Food and Drug Administration. The product is the first antiretroviral from an Indian manufacturer to be approved by the US drug regulator for purchase by the President's Emergency Plan for AIDS Relief (PEPFAR).

Long-term HAART linked to high blood pressure

<http://www.aidsmap.com/en/news/946D82F4-0EC6-4889-B772-538FC55218CF.asp?hp=1>

Use of highly active antiretroviral therapy (HAART) for over two years can cause increases in blood pressure, according to a large study presented in the 10th June edition of AIDS. This suggests that patients taking HAART are at an increased risk of problems such as heart disease and stroke, and underscores the need for regular blood pressure monitoring in HIV-positive patients.

UK playing `pivotal` role in draining doctors from Africa

<http://www.aidsmap.com/en/news/EBA4EA0B-7D42-4072-9FED-5A34A1B59FOA.asp?hp=1>

Almost half of the recent 16,000 staff expansion of the United Kingdom's National Health Service came from the recruitment of health professionals trained outside the UK and Europe, according to a report in this week's issue of The Lancet. English-speaking countries in sub-Saharan Africa are most severely affected. Flu vaccine works in HIV-positive individuals

<http://www.aidsmap.com/en/news/2A43C7B3-D37C-432A-8934-DB56AC645332.asp?hp=1>

Influenza vaccine is effective in HIV-positive patients, according to the results of a large prospective Japanese study published in the June 1st edition of the Journal of Acquired Immune Deficiency Syndromes. The investigators also found that CD4 cell count predicted the effectiveness of influenza vaccination in patients who did not have antibodies to influenza before vaccination. MALAWI: ARV delays could derail national rollout plan

<http://www.aidsmap.com/en/news/7707181D-8D3A-491C-AA0B-F8D5E6E935DB.asp?hp=1>

A year after the Malawian government launched its HIV/AIDS treatment programme, the numbers of people awaiting treatment are stretching hospitals to their limits. Data from VCT for PMTCT programmes can be used for HIV surveillance

<http://www.aidsmap.com/en/news/CB1134EC-40CB-4160-85EC-3D90B83EAF6A.asp?hp=1>

Pregnant women from Northern Uganda who undergo voluntarily counselling and testing (VCT) in order to access services to prevent mother-to-child transmission (PMTCT) are testing positive for HIV roughly at the same rate (~11%) as women who are tested anonymously at the same site for the national surveillance program, according to a study in the June 10th edition of AIDS. The findings suggest that data from VCT for PMTCT programmes could be used for surveillance purposes.

HAART use and good adherence means less risky sex says Californian study

<http://www.aidsmap.com/en/news/06A62AD8-2E9B-484E-8EF8-F33DA87A1A6D.asp?hp=1>

Use of, and adherence to, HAART is associated with less sexual risk taking, according to a study conducted in California and published in the June 1st edition of the Journal of Acquired Immune Deficiency Syndromes.

AIDS editorial calls for more research into micronutrient supplementation

<http://www.aidsmap.com/en/news/22CAA18E-0CED-4B6B-93EC-60762D4E19E2.asp?hp=1>

More research needs to be done in order to establish the role of micronutrient supplementation in maximising both the quality and duration of life of HIV-positive individuals, an area which "may not be part of the traditional care or thought process of the HIV care provider", concludes an editorial review in the June 10th issue of the journal, AIDS, now available online.

Cost of drugs and lack of resources mean irregular HIV care from routine providers in Cameroon

<http://www.aidsmap.com/en/news/0B45FC10-E38C-4852-B80F-6DC702B2E093.asp?hp=1>

The cost of HIV care and lack of resources including specialist HIV doctors and pharmacists, mean that routine HIV care provided at both public and private healthcare facilities in Douala in Cameroon is irregular with many patients interrupting treatment, according to a study published in the July 1st edition of *Clinical Infectious Diseases* (now available on-line).

Untested HIV-positive individuals more than twice as likely to engage in high-risk sex than those aware of their HIV-positive status

<http://www.aidsmap.com/en/news/0851DE0F-30AE-4E3F-A32D-466275B8DE41.asp?hp=1>

A meta-analysis of eleven studies has found that the prevalence of high-risk sexual behaviour is between 53-68% lower in HIV-positive individuals aware of their status than in HIV-positive individuals unaware of their status. The study, from the US Centers for Disease Control and Prevention (CDC) in Atlanta, was published electronically ahead of print in the *Journal of AIDS at JAIDS* online. Unrecognised TB may be common in people living with HIV in Africa

<http://www.aidsmap.com/en/news/05FBEC7A-F4C9-47FD-913F-1DDDOC87C7E0.asp?hp=1>

Previous assumptions about the diagnosis of TB in HIV-infected people may need to be revised, according to findings from a Tanzanian study suggesting that a significant minority of HIV-positive people have active and in some cases potentially infectious tuberculosis, without any symptoms or indications of active TB in a sputum test.

Treating HIV-positive children with antiretrovirals in first two months increases AIDS free survival

<http://www.aidsmap.com/en/news/B7BC3CCB-10A2-4032-8EB2-EBBC5A12E0CD.asp?hp=1>

Infants who are infected with HIV by their mother at birth are significantly more likely to be alive at age three if they commence anti-HIV treatment within the first two months of life, according to a US study published in the May 11th edition of the *Journal of the American Medical Association*. The investigators believe that this finding emphasises the importance of the early detection of HIV-positive pregnant women and the prompt treatment of their infants.

Nelfinavir and nevirapine well tolerated during pregnancy

<http://www.aidsmap.com/en/news/15C43682-5A6B-43AF-8FE8-34C3A7D39A9D.asp?hp=1>

HAART regimens containing either the protease inhibitor nelfinavir or the NNRTI nevirapine are well tolerated during pregnancy, according to a Dutch study published in the May 20th edition of *AIDS*. The investigators found, however, that side-effects associated with either nelfinavir (such as gastrointestinal problems) or nevirapine (hepatitis) occurred more frequently in pregnant women than non-pregnant women.

Not all microsporidiosis causes chronic diarrhoea according to study from Peru

<http://www.aidsmap.com/en/news/A084217A-EBDE-4470-AEOB-17236B49C420.asp?hp=1>

Not all infections with the protozoan *Enterocytozoon bieneusi*, which causes the intestinal disorder known as microsporidiosis, are associated with serious illness in HIV-positive individuals, according

to a large epidemiological study from Lima, Peru, published in the May 15th issue of the *Journal of Infectious Diseases*.

Risk factors for cardiovascular disease increased in HIV-positive women

<http://www.aidsmap.com/en/news/4FBDADFC-5602-44F3-8B72-870404DC359C.asp?hp=1>

HIV-infected women have increased risk factors for the development of cardiovascular disease, United States researchers warn in the 1st May edition of *The Journal of Acquired Immune Deficiency Syndromes*. They report that most of these risk factors may be influenced primarily by abnormal body fat redistribution, rather than being a direct consequence of HIV infection or treatment.

News feature: Malaria treatment and HIV: co-artemether is needed, but supply and cost remain as barriers

<http://www.aidsmap.com/en/news/F30B37BA-3C5F-4823-920F-E1EB13F3854.asp?hp=1>

A six-dose course of the combination of two drugs - artemether and lumefantrine (coartum or Riomet) - is a highly effective treatment for malaria in the areas of Africa where resistance to frequently used malaria drugs is common, according to two randomised controlled studies published in the April 22nd issue of *The Lancet*.

Mothers able to treat both themselves and new born with nevirapine, says Ugandan study

<http://www.aidsmap.com/en/news/74CED5D9-175A-4831-B487-81FA78B52198.asp?hp=1>

Most HIV-positive mothers in a rural area of Uganda were able to provide single-dose nevirapine at home to both themselves and their newborn babies, achieving a low rate of mother-to-baby transmission of HIV, according to a study published in the May 1st edition of the *Journal of Acquired Immune Deficiency Syndromes*. The proof of concept study, which recruited women in the rural Rakai area of Uganda, demonstrated that self-medication of nevirapine resulted in a rate of mother-to-baby transmission of 8%, similar to that seen in clinical trial where single-dose nevirapine was provided to mother and child in a healthcare setting.

## New resources from the International HIV/AIDS Alliance

Care and treatment publications from the International HIV/AIDS Alliance

<http://www.aidsalliance.org/sw7418.asp>

The Alliance is developing a set of fact sheets and participatory tools to support community engagement for antiretroviral (ARV) treatment. The aim is to provide NGO/CBO staff with tools and information to support PLHA and their communities on ARV treatment. They are based on experience in supporting treatment programmes in several countries.

ARV treatment factsheets

<http://www.aidsalliance.org/sw19588.asp>

Community education referral: Supporting adherence to ARV treatment and prevention for people with HIV in Zambia

<http://www.aidsalliance.org/sw23263.asp>

This is an interim progress report of 'The Community Education and Referral' project that was officially launched on June 1st, 2004. The overall aim of the project is to improve health-seeking behaviour, equity of access, adherence to ARV (anti-retroviral)

treatment, and prevention for people with HIV through community education and referral with the participation of people with HIV and other community stakeholders.

The project is built on the findings of a series of consultations conducted by the International HIV/AIDS Alliance. This report comprises information gathered over two technical support visits to Zambia and details the progress over the first year of the project. Understanding and challenging HIV Stigma: Toolkit for action <http://www.aidsalliance.org/sw23480.asp>

HIV-related Stigma has long been recognised as a barrier to prevention, care and treatment, yet there are few tools available to support trainers and community leaders to begin to tackle this problem.

The Toolkit was developed from a two year research project on stigma which took place in Zambia, Tanzania and Ethiopia. Tools were developed with the involvement of over 50 NGOs from the three countries who developed exercises, shared stories and experiences and tested some of the tools.

It contains over 100 participatory exercises which can be adapted to fit different target groups and contexts. There are different sets of picture codes which help to identify stigma, discuss the rights of PLHAs and help to stimulate discussions around gender, sexuality and morality issues which link to stigma.

## about HATIP

A regular electronic newsletter for health care workers and community-based organisations on HIV treatment in resource-limited settings.

The newsletter is edited by Theo Smart (Cape Town) and Keith Alcorn, NAM's Senior Editor (London).

For further information please visit the HATIP section of [aidsmap.com](http://aidsmap.com)