Antiretrovirals Give Life

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On World AIDS Day, two reports have been released demonstrating the success of antiretroviral treatment in developing countries, one from South Africa and the other from Haiti.

- Antiretrovirals give life: A statement by the Faculty of Health Sciences of the University of the Witwatersrand in Johannesburg
- Antiretroviral Therapy in a Thousand Patients with AIDS in Haiti: Abstract from article in today's New England Journal of Medicine

In over 50 clinical trials and dozens of operational sites around the world, antiretroviral treatment has been shown to save lives. Nutrition is also critical for the management of HIV. But the false dichotomy between nutrition and treatment that has been created by the Minister of Health is leading to confusion and avoidable deaths. Again on radio this morning (SAFM, 9am-10am), the Minister presented antiretrovirals and nutrition as alternatives, not as complementary to each other. TAC calls on the Minister of Health to lead on HIV and to encourage people to get tested and, if necessary, get treated.

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The Faculty of Health Sciences of Wits University would like to take the occasion of World AIDS Day 2005 to publicly share its positive experiences with the use of anti-retroviral therapy (ART) for HIV/AIDS. "This is important in the light of ongoing public confusion and fear surrounding ART, which we believe may prevent people from making use of life saving medication that is increasingly available in the Gauteng province," says Prof. Max Price, Dean of the Faculty of Health Sciences.

Faculty doctors working in public hospitals have been closely associated with the Gauteng Provincial ART programme since its inception in April 2004 and are collectively following up more than 10,000 people on ART. "The results are dramatic and unequivocal, says Dr Francois Venter, an HIV clinician who works at the Johannesburg Hospital and who is currently President of the Southern African HIV Clinicians Society. "At Johannesburg Hospital, out of every 100 of patients started on ART, 90 are able to return to work and family life within months. In the era before ART was

made available, of these 100 patients, 40 would have died and another 40 would have become severely ill within one year," he says. Findings are similar across all the ART treatment sites where Faculty doctors are involved.

Positive personal testimonies of people on the public sector ART programme have been found at the Harriet Shezi Children's HIV clinic at Chris Hani Baragwanath Hospital. "Every life saved is a household spared the devastating loss of a parent, a bread-winner or a child. We strongly encourage all people living with HIV to seek care from health facilities in the Province to enable them to make an informed choice about whether to start treatment and to find out how and where they can obtain treatment for HIV," says Dr Tammy Meyers, the paediatrician in charge of this clinic.

The Faculty would further like to express its dismay over the lack of national consensus on appropriate treatment for HIV. In this respect, Prof. Helen Schneider, Chair of the Health Faculty's AIDS Committee reaffirmed the statement made by the Wits Vice-Chancellor, Professor Loyiso Nongxa two months ago in which the University called for a speedy investigation into the trials allegedly being conducted by the Rath Foundation. Dr Rath has criticised ART as dangerous and is apparently testing high dose vitamin supplements for the treatment of HIV without obtaining ethical clearance. "There has been no conclusion to the investigation of the validity and ethics of the Rath trials. Instead we have seen a proliferation of law-suits by Dr Rath against respected journalists, academics and non-governmental organizations," says Schneider. "The effects of this are to sow mistrust and confusion in the public's mind."

[END OF WITS STATEMENT]

Antiretroviral Therapy in a Thousand Patients with AIDS in Haiti

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ABSTRACT

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Background: The one-year survival rate of adults and children with the acquired immunodeficiency syndrome (AIDS), without antiretroviral therapy, has been about 30 percent in Haiti. Antiretroviral therapy has recently become available in Haiti and in other developing countries. Data on the efficacy of antiretroviral therapy in developing countries are limited. High rates of coinfection with tropical diseases and tuberculosis, along with malnutrition and limited laboratory monitoring of therapy, may decrease the efficacy of antiretroviral therapy in these countries.

Methods: We studied the efficacy of antiretroviral therapy in the first 1004 consecutive patients with AIDS and without previous antiretroviral therapy who were treated beginning in March 2003 in Port-au-Prince, Haiti.

Results: During a 14-month period, three-drug antiretroviral therapy was initiated in 1004 patients, including 94 children under 13 years of age. At enrollment, the median CD4 T-cell count in adults and adolescents was 131 per cubic millimeter (interquartile range, 55 to 211 per cubic millimeter); in children, a median of 13 percent of T cells were CD4-positive (interquartile range, 8 to 20 percent). According to a Kaplan?Meier survival analysis, 87 percent of adults and adolescents and 98 percent of children were alive one year after beginning treatment. In a subgroup of 100 adult and adolescent patients who were followed for 48 to 56 weeks, 76 patients had fewer than 400 copies of human immunodeficiency virus RNA per milliliter. In adults and adolescents, the median increase in the CD4 T-cell count from baseline to 12 months was 163 per cubic millimeter (interquartile range, 77 to 251 per cubic millimeter). In children, the median percentage of CD4 T cells rose from 13 percent at baseline to 26 percent (interquartile range, 22 to 36 percent) at 12 months. Treatment-limiting toxic effects occurred in 102 of the 910 adults and adolescents (11 percent) and 5 of the 94 children (5 percent).

Conclusions: This report documents the feasibility of effective antiretroviral therapy in a large number of patients in an impoverished country. Overall, the outcomes are similar to those in the United States. These results provide evidence in support of international efforts to make antiretroviral therapy available to patients with AIDS in developing countries.

- Antiretrovirals

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