

Daily Roundup – Thursday, August 7, 2008

Experts today at the XVII International AIDS conference discussed the complementary nature of improving health systems in developing countries and broadening access to HIV prevention and treatment. They called for collaboration in expanding primary care as well as HIV/AIDS care. Gregg Gonsalves of the AIDS and Rights Alliance for Southern Africa gave the expansion of access to antiretroviral treatment as an example.

“ART scale up is a health systems success,” said Gonsalves. “It is the most ambitious public health undertaking of my life time, and it was something that was done against the wisdom of the time. We can take that and build on what we have done with AIDS and what we can do with primary care.”

“Universal access is not about HIV alone,” said Kevin De Cock of the World Health Organization. “It is about viewing attainment of the health related Millennium Development Goals, including those like maternal and child health, as a global public good.

People living with HIV and AIDS can play a vital role in bolstering health care systems, according to Morolake Odetoyinbo with Positive Action for Treatment Access. She added, “Health care, health systems are everybody’s business. It’s not one individual, it doesn’t belong the government, but to all of us.”

At a session with several AIDS Ambassadors, Norway’s Sigrun Mogedal called for every sector to be included in the overall battle against HIV. “We hear at this conference maybe stronger than ever before, the need for positive leadership; the need for youth leadership; the need for civil society leadership,” she said. “Up until now it has been government leadership, politicians, the UN and scientists. We shouldn’t bear that leadership; we should play a part, but not take it.”

Paul Bekkers, the AIDS Ambassador from the Netherlands, spoke about the role he and his colleagues can play. “We have to make sure that countries stick to their commitments for instance on universal access,” he said. “We have to tell the G8 to walk the talk, to stick to their commitments. But we also have to be willing to talk to the Vatican. We have to be vocal on issues, to have courage, to discuss sensitive issues, talk about drug use, homophobia, moral issues, gender violence.”

In addition to expanding access to treatment, scientists have continued to develop new HIV drugs. Reducing toxicity and drug resistance as well as simplifying treatment regimes are all goals for improvements. So if everyone knew their status, what would an ideal, permanent course of treatment look like?

“You’d need a drug that would have a fantastic side effect profile, in other words, none,” explained Anton Pozniak with the Chelsea and Westminster Hospital. “You’d need a drug that was incredibly cheap. You’d need a drug that if you missed a few doses it wouldn’t matter. And you’d need a drug that if you’re in any small village in any part of the world you could get access to it, but first of all you’d need access to that test. Is it a pipedream? Maybe. Could it be a reality? It possibly could.”

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