

UNAIDS and Lancet Commission: AIDS and global health

The UNAIDS and Lancet Commission: *Defeating AIDS – Advancing global health* met in London in February to discuss the future of AIDS and global health in the post-2015 era.

The Commission, which was established in early 2013 brought together more than 40 Heads of State and political leaders, HIV and health experts, young people, activists, scientists, and private sector representatives, to ensure that lessons learned in the AIDS response can be applied to transform how countries and partners approach health and development.

'The fight against AIDS is not over yet. We need to intensify efforts to achieve a historic victory against this disease,' said the President of Ghana, John Dramani Mahama. 'Everyone has a key role to play in achieving this objective. We have to take action to ensure that we are doing the best possible for our countries, for our people, and for humanity.'

'Equal access to HIV services will halt and reverse the epidemic and contribute to economic growth and people's well-being,' said the First Lady of Gabon Sylvia Bongo Ondimba. 'That is why HIV services must be integrated in all countries' development plans.'

'We have managed to provide treat-

ment and care for people living with HIV but now many also face non-communicable diseases,' said the First Lady of Rwanda Jeannette Kagame. 'The changing nature of the disease is an illustration of how difficult it is to find a cure or vaccine so we must be adaptive and responsive. Africa should be ready! The worst is behind us. Now we know how to prevent, how to treat, and how to care. We should build from what we have started and do it yesterday.'

The Commission, convened by Michel Sidibé, Executive Director of UNAIDS and Richard Horton, Editor-in-Chief of the *Lancet*, is co-chaired by Malawi President Joyce Banda, African Union Commission Chairperson, Nkosazana Dlamini Zuma, and London School of Hygiene and Tropical Medicine Director, Peter Piot.

As part of the Commissions' efforts to provide a framework for informing how to address AIDS and health in the context of the post-2015 development agenda, dialogues have been held across regions, bringing together diverse perspectives to inform the discussions of the Commission's London meeting. The final recommendations will be compiled in a comprehensive report which will be published in the *Lancet*.

Obesity soars to 'alarming' levels in developing countries



The extent of the world's obesity epidemic has been thrown into stark relief as a report from the Overseas Development Institute (ODI) puts the number of overweight and obese

adults in developing countries at more than 900 million.

Future Diets, an analysis of public data about what the world eats, says there are almost twice as many obese people in poor countries as in rich ones. In 2008, the figures were 904 million in developing countries, where most of the world's people live, compared with 557 million in industrialised nations.

'The growing rates of overweight

and obesity in developing countries are alarming,' said the report's author, ODI research fellow Steve Wiggins. 'On current trends, globally, we will see a huge increase in the number of people suffering certain types of cancer, diabetes, strokes, and heart attacks, putting an enormous burden on public healthcare systems.'

The report warns that governments are not doing enough to tackle the growing crisis, partly due to politicians' reluctance to interfere at the dinner table, the powerful influence of farming and food lobbies, and a large gap in public awareness of what constitutes a healthy diet.

According to the report, overweight and obesity rates since 1980 have almost doubled in China and Mexico, and risen by a third in South Africa, which now has a higher rate than the UK. Regionally, north Africa, the Middle East, and Latin America all have overweight and obese rates on a par with Europe.

Philips and AMREF to join forces

The healthcare company Philips and the African Medical and Research Foundation (AMREF) have announced that they will work closely together in a shared-value partnership which will bring about a structural improvement in the healthcare infrastructure and healthcare provision in Africa.

In order to compliment local government efforts in tackling existing and emerging healthcare challenges, AMREF and Philips will connect their networks and bring to market new education and training programmes designed specifically for healthcare professionals in Africa. In close cooperation with local stakeholders, both parties will develop and implement large-scale projects to improve healthcare infrastructure and make healthcare more accessible to the local population.

UNAIDS urges greater protection in the Central African Republic

UNAIDS Executive Director Michel Sidibé conducted a joint mission to the Central African Republic in February.

The delegation met with the country's President of the Transitional Government, Catherine Samba-Panza who expressed her appreciation to the United Nations for its efforts in bringing humanitarian aid to people in need.

'There is no longer a fine line between living and dying in the Central African Republic. People are dying – we are on the brink of a health catastrophe,' said Mr Sidibé. 'If we do not act now, a generation will be gone forever – under our watch. This is not acceptable.'

WHO: Daily sugar intake 'should be halved'

People will be advised to halve the amount of sugar in their diet, under new World Health Organization guidance.

The recommended sugar intake will stay at below 10% of total calorie intake a day, with 5% the target, says WHO. The suggested limits apply to all sugars added to food, as well as sugar naturally present in honey, syrups, fruit juices, and fruit concentrates.

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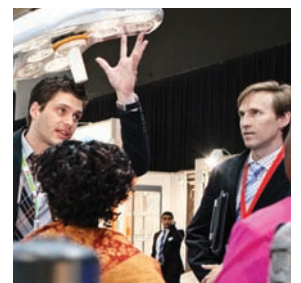


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MRC funds BREATHE Africa Partnership

The Medical Research Council (MRC) has announced £580 000 of funding to facilitate collaboration between established trial sites and to increase research capacity in Africa focused on the health effects of Household Air Pollution (HAP). HAP has been identified as a major preventable cause of disease and death in the Global Burden of Disease survey 2010.

The BREATHE Africa Partnership (Biomass Reduction and Environmental Air Towards Health Effects) is led and co-ordinated by Stephen Gordon and Jane Ardrey at the UK's Liverpool School of Tropical Medicine (LSTM). The Partnership will draw together experts and investigators in major air pollution trials in order to share findings and plans, harmonise specific aspects of trial methodology, optimise the opportunity to undertake mechanistic work – including testing for new biomarkers not funded in current trials – and to engage African researchers and trainees in existing and new studies by a bottom-up approach offering mentored research training projects.

There are five themes for the work and four additional co-investigators from LSTM focused on Interventions to reduce HAP, Exposure and Biomarker measurements, and Mechanisms by which HAP causes health effects. BREATHE currently has 50 partners and those partners contributing financially are The Global Alliance for Clean Cookstoves (Alliance) and The American Thoracic Society (ATS).

The Partnership will work with existing Cookstove projects that are currently underway in Ghana and Nepal

Cities challenged to be 'diabetes aware'

The world's cities will soon have the opportunity to be officially designated 'diabetes aware'. They will be challenged to show that their public services and businesses encourage healthy lifestyles for people with diabetes and those at risk.

The new scheme is being created by the International Diabetes Federation (IDF) and the European Connected Health Alliance (ECHAAlliance) who plan



as well as the Cooking and Pneumonia Study (CAPS), which is an LSTM led, randomised study being carried out in Malawi.

Professor Stephen Gordon, who is the head of LSTM's Department of Clinical Sciences, said, 'Half the world's population, including some 700 million people in Africa, use biomass fuel from animal and plant material to provide energy for cooking, heating, and lighting. Those using biomass fuel and their young children experience substantial smoke exposure, which is an established threat to health. This new Partnership will bring together international experts, African Investigators, and other stakeholders to ensure the best use of new opportunities provided by £8 million of recent grant investment directed at quantifying and reducing the health effects of household air pollution.'

The funding, along with a benefactor donation of £32 000, will also enable the continuation of The Pan African Thoracic Society – Methods in Epidemiological, Clinical and Operations Research (PATS MECOR) Course for 2014. The course, which was initiated by Professor Gordon, is designed for pulmonary clinicians, investigators, and academicians to provide training in research methods. It will take place in Kenya in September.

to launch it on World Diabetes Day, 14 November 2014. IDF and the ECHAAlliance want to create a global network of 'diabetes aware' cities using mobile health tools to promote diabetes awareness and support.

A "diabetes aware" city will demonstrate that all sections of the community are committed to creating a healthy urban environment. Local public services, businesses, and institutions will demonstrate that they understand challenges faced by people with diabetes.

South Africa: R370 m for new vaccines and medicines

Medical research in South Africa is set to get a R370 million boost for the development of new medicines, vaccines, and other technologies to fight against HIV and AIDS, tuberculosis (TB), and malaria.

'The future is bright for science in South Africa,' said Dr Trevor Mundel from the Bill and Melinda Gates Foundation at a meeting with the Medical Research Council (MRC) and the University of Cape Town (UCT), which are set to receive R180 million from the foundation.

The MRC will receive R125 million from the foundation, R130 million from the Department of Science and Technology, and R60 million from the Department of Health for its Strategic Health Innovation Partnerships (SHIP) programme. SHIP will fund selected research projects aimed at developing AIDS and TB vaccines.

International recognition for new syringe design

For designing a device that has the potential to save hundreds of thousands of lives, UK designer, Dr David Swann has been awarded the 2014 World Design Impact Prize.

The ABC Syringe (A Behaviour Changing Syringe) is designed to tackle a massive global healthcare problem. It is estimated by the World Health Organization that up to 40% of the 40 billion injections administered each year are delivered with syringes reused without sterilisation. This is responsible for large proportions of new cases of HIV and hepatitis, responsible for some 3 million deaths every year.

Dr Swann's solution is a plastic syringe that is colourless while it remains in its nitrogen-filled pack. But exposure to air activates an ink applied to the label on the barrel. There is a brief treatment window – lasting about a minute – before the ink, having absorbed CO₂, turns the label to red. This alerts patients to the fact that the syringe has been used once and is therefore no longer sterile.



Malaria 'master switch' revealed

Researchers at the Wellcome Trust Sanger Institute have unlocked the mystery of how the malaria parasite initiates the process of passing from human to human.

The scientists identified the factor that the parasite must produce to begin the process of passing from human to mosquito and then onwards through the insect's bite.

They have discovered the 'master switch' that triggers the development of specialised sexual cells that are responsible for the infection of the mosquito and initiation of transmission, the process of the parasite passing through the mosquito.

It is hoped the discovery will open up the way to the development of new drug treatments.

The research was carried out by UK scientists from the University of Glasgow and the Wellcome Trust Sanger Institute at Cambridge.

Andy Waters, Professor and Director of the Wellcome Trust Centre for Molecular Parasitology at the University of Glasgow said, 'Malaria is the biggest parasitic disease killer that there is in the world, so clearly we need to combat that. There are drugs, but they are losing their efficacy because the parasite is becoming resistant. There is currently no vaccine.'

Ghana adopts electronic health records

Ghana has become one of very few countries in Africa to start using electronic health records in the public sector.



The system, called MedSpina, allows doctors and other health workers to collect all patient information including laboratory results electronically, making medical care extremely easy. It also flags up allergies, sets up reminders and appointments, controls stocks, and warns the pharmacist if any medicines prescribed for the patient can interact.

Following a demonstration in her office, the Minister of Health, Ms Sherry Ayithey commented on the usefulness of the system and highlighted the importance of obtaining real-life data on both patients and commodities to ensure optimum patient care. She added that such systems are effective in managing logistics, preventing wastage and improving efficiency.

The Minister of Health expressed happiness at the support offered by the World Health Organization in the development of MedSpina. 'This support indicates WHO's commitment in building strong health systems towards achieving universal health coverage.' Under a project titled: 'Electronic Health Records

for Pharmacovigilance and Safety Assessment' WHO supported the WHO Collaborating Centre for Advocacy and Training in Pharmacovigilance (WHO-CC), University of Ghana Medical School, to work with its partners to customise a leading global software for use in safety data collection and patient care.

Ms Haggar Hilda Ampadu, Director of Operations of the WHO-CC, praised the product which allows doctors to manage patients in real time, whilst collecting extremely vital data for patient management as well as policy decision making. 'MedSpina was developed with Africa in mind and it serves the needs of Africa very well. Very soon, we expect all patients to ask their healthcare workers why their health records are not being collected and kept electronically so that their doctor can give them excellent service in a very short time,' Ms Ampadu added.

MedSpina has undergone 3 years of rigorous testing at the Diabetic Clinic of the Korle-Bu Teaching Hospital and has been found very useful in the Ghanaian context.

Dr Girish Mohata, an IT expert from Australia and a consultant to the WHO-CC explained the laborious process the team had gone through to ensure a product which is 'future proof' and interfaces with all globally available systems. The Minister of Health recommended immediate pilot testing of the system at the Korle-Bu Teaching Hospital.

South African government launches free contraceptive device for women

South African Health Minister Dr Aaron Motsoaledi has launched a new contraceptive device which will be available free to women at all state clinics from June.

The contraceptive device, which is a sub-dermal implant lasting 3 years, is expected to reduce the number of unwanted and teenage pregnancies, and reduce the number of maternal deaths in the country. The device is implanted below the skin of the arm and will be added to the current birth control methods used by women to prevent unwanted pregnancy.

Global Atlas of Palliative Care

Only 1 in 10 people who need palliative care is currently receiving it. This unmet need is mapped for the first time in the *Global Atlas of Palliative Care at the End of Life*, published jointly by the World Health Organization (WHO) and the Worldwide Palliative Care Alliance (WPCA).

In 2011, approximately 3 million patients received palliative care, the vast majority at the end of their life. Although most palliative care is provided in high-income countries, almost 80% of the global need for palliative care is in low- and middle-income countries. Only 20 countries worldwide have palliative care well integrated into their healthcare systems.

The Atlas calls on all countries to include palliative care as an essential component to every modern healthcare system in their moves towards universal health coverage. In February, the Executive Board of WHO called on countries to strengthen palliative care and to integrate it into their healthcare systems. It is expected that the 67th World Health Assembly will discuss the subject in May 2014. The importance of palliative care is being emphasised by the WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020.

The Atlas can be downloaded at <http://www.who.int/nmh/publications/en/> or at <http://www.thewpca.org/resources>

Crisis of cancer impact worldwide exposed

On February 4th, World Cancer Day 2014, a new global cancer report compiled by UN Agency, The International Agency for Research on Cancer (IARC) showed:

- As a single entity, cancer is the biggest cause of mortality worldwide – there were an estimated 8.2 million deaths from cancer in 2012.
- Global cancer incidence over 4 years increased by 11% to an estimated 14.1 million cases in 2012 – equal to the population of India's largest city, Mumbai.
- Cancer cases worldwide are forecast to rise by 75% and reach close to 25 million over the next 2 decades.

The rise of cancer worldwide is a major obstacle to human development and well-being,' comments Dr Christopher Wild, Director of IARC. 'These new figures and projections send a strong signal that immediate action is needed to confront this human disaster, which touches every community worldwide, without exception,' stresses Dr Wild.

The World Cancer Report 2014 confirms that inequality exists in cancer control and care globally. The number of deaths due to the disease amongst the world's poor is growing at a faster rate than previously expected. Specifically, by 2025 almost 80% of the increase in the number of all cancer deaths will

occur in less developed regions.

Unlike the developed countries, a large proportion of cancers in developing nations are caused by infections, such as the human papillomavirus (HPV), which accounts for more than 85% of all HPV-related cancer cases. As these countries increasingly adopt a more western lifestyle we are witnessing increasing levels of smoking, alcohol use, and a lack of physical activity – all known risk factors for cancer.

Low- and middle-income countries are most at risk of cancer overwhelming their health systems and hindering economic growth, as they have the least resources and infrastructure to cope with the predicted levels of disease escalation. Worryingly, according to the World Health Organization, only 50% of low- and middle-income countries have operational National Cancer Control Plans.

With spiralling care and treatment expenditure, poor and wealthy nations must all contribute in the fight against cancer. Currently almost 4.2 million people per year die prematurely (aged 30 to 69 years) due to the disease across the world. Unless decisive action is taken to develop practical strategies to address cancer, this is projected to increase to well over 5 million premature deaths per year by 2025.

WMA urges Ugandan President to reverse new law on homosexuality

In February, Ugandan President Yoweri Kaguta Museveni signed a law that sentences anyone who commits a 'homosexual act' to life in prison. An openly gay person with HIV can be further charged with 'aggravated homosexuality,' according to the AIDS & Rights Alliance for Southern Africa.

Following the announcement, the World Medical Association (WMA) wrote to the President of Uganda to express its deep concern about the new law and urging him to reverse the measure.

The Chair of the WMA, Dr Mukesh Haikerwal, and the Secretary General, Dr Otmar Kloiber, say that the science and ethics on which this Ugandan legislation is based is incorrect and that the

new law will detract from the many advances in healthcare made in Uganda.

The WMA state that they believe the new law 'is violating what is now being seen across most of the world community as a basic human right, namely to decide about one's sexual orientation.'

It continues, 'We do note that this was not the case in the past in many nations of the world but now is; we hope the legislation in Uganda can reflect international human rights in a short time. It is noteworthy that the amended legislation has seen the unworkable notion of mandatory reporting removed.'

Commenting on the letter, Dr Haikerwal said, 'We are seeing in some jurisdictions those previously convicted of homosexual acts being exonerated. Ultimately this Ugandan legislation must be reversed.'

Ghana asked to scale up its health budget

Ghana has been called upon to take the necessary steps to implement the Abuja Declaration on scaling-up the national budgetary allocation to the health sector to 15%, and to implement all other ECOWAS declarations on the health of people in the sub-region.

The call was made at the end of a 2-day West African Health Sector Unions Network (WAHSUN) country-level workshop that was attended by the two member unions of WAHSUN – the Health Services Workers' Union of the Trades Union Congress (HSWU-TUC) and the Ghana Registered Nurses Association (GRNA).

WAHSUN called on the regional body, ECOWAS, to take steps to deal with Occupational Health, Safety, and Environment issues to ensure a safe working environment for health workers and their clients within the sub-region – in line with various policies, legislations, and protocols both at the country and regional levels.

'Of particular importance to WAHSUN is the issue of the supply of retractable syringes and needles to prevent needle-stick injuries,' the organisation said in a communiqué.

It further went on to re-affirm support for the sub-regional integration agenda in line with the ECOWAS protocol on the free movement of goods and people within the sub-region and the health integration process.

WAHSUN indicated that it remains resolute in its pursuit of building a formidable relationship with the West Africa Health Organisation (WAHO).

Angry people risking heart attacks

Having a hot temper may increase your risk of having a heart attack or stroke.

Rage often precedes an attack and may be the trigger, say researchers from the Harvard School of Public Health. They identified a dangerous period of about 2 hours following an outburst when people were at heightened risk.

People who have existing risk factors, such as a history of heart disease, are particularly susceptible, they told the *European Heart Journal*.

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More qualified health workers need to tackle newborn deaths

In countries across sub-Saharan Africa, there is a severe shortage of midwives, nurses, doctors, and even medical training programmes.

Up to 51% of births in sub-Saharan Africa take place without the presence of a midwife or skilled health worker. Every year, 40 million mothers around the world give birth on their own. And every day, almost 18 000 children under the age of 5 die by preventable causes.

The numbers are staggering, and paint a picture of how, despite claimed progress, much work remains to be done in addressing newborn and child mortality across the globe a year before the Millennium Development Goals expire.

One way of moving forward, according to international humanitarian organisation Save the Children, would be to increase the number of skilled health workers, particularly in those countries where they are most needed.

At present, the World Health Organization and the Global Health Workforce Alliance estimate a shortage of 7.2 million around the world – a huge number that at the current annual progress rate of 1.1% is hard to meet, and could mean 354 million unattended births between now and 2043, the aid group said in a new report published in February.

The current rate lags behind the MDG 5 of 90% coverage by 2015, and Save the Children is calling on the international community to double its efforts to increase the current coverage by 2.3% a year to meet the goal by 2025.

But simply increasing the number of health workers in a given setting is not enough to ensure newborn survival. Statistics cited in the report support this: With 78 977 stillbirths and first-day deaths, the Democratic Republic of Congo has one of the highest newborn mortality rates across sub-Saharan Africa, despite enjoying a high rate of 80.4% of skilled attendance at birth.

'It's really about whether health workers are present, motivated, equipped and supported in a functioning facility and whether community members choose to use that facility. In many cases, there are simply not enough qualified health workers to go around,' said Save the Children President and CEO Carolyn Miles.

Organisations like Save the Children will attend the annual World Health Assembly in Geneva in May, where ministers will gather to discuss and hopefully commit to a new strategy to end preventable newborn deaths and stillbirths under a so-called 'Every Newborn Action Plan'.

Prosthetic limb project offers hope for Africans



It is estimated that more than 2000 used prosthetic limbs are disposed of each year in the UK

alone. Legs 4 Africa is a group that plans to channel the redundant limbs to people that need them across Africa.

The group will supply and transport 200 limbs to the Royal Victoria Teaching Hospital in The Gambia. Two volunteers will drive a van full of limbs, 3708 miles, from Leicestershire to Gambia.

Legs 4 Africa chose a focus on The Gambia because they have established connections in that location which are

already developed, with work they have started. Resources also to cover the expenses of creating a short film documentary which will effectively get Legs 4 Africa and the group message to a larger audience. The documentary will follow the journey of the volunteers and the limbs, from the UK to their new owners in Gambia. The group expects to focus on capturing the impact that a new limb delivers to an amputee and how it affects their careers.

Any leftover funds will be donated to the department of Social Welfare at the Royal Victoria Teaching Hospital in The Gambia, where the limbs are received, customised, and paired with their new owners. In the future, founder Tom Williams intends to expand the efforts to other African nations.

Videos can be seen on the Facebook page: www.facebook.com/legs4africa

Scientists discover antibodies that could neutralise HIV

Scientists in South Africa have discovered potent antibodies that could neutralise and kill multiple strains of HIV.

The discovery of how a KwaZulu-Natal woman's body responded to her HIV infection by making potent antibodies, called broadly neutralising antibodies, was reported earlier this month by the Centre for the AIDS Programme of Research in South Africa (CAPRISA). The consortium is made up of AIDS researchers jointly with scientists from the United States.

The study, published in the scientific journal *Nature* describes how the research team found and identified the antibodies in her blood and then duplicated them by cloning the antibodies in the laboratory.

The cloned antibodies were then used in a series of experiments in the laboratory to elucidate the pathway followed by her immune system to make these potent antibodies.

This, according to Professor Lynn Morris, from the National Health Laboratory Service in the Wits School of Pathology, could lead to new HIV vaccine strategies that are able to stimulate the rare precursors of these protective antibodies.

Seven African countries lead the continent in malaria control

In January, during the official opening of the African Union Summit of heads of state, H E Armando Guebuza, President of Mozambique, conferred the 2014 African Leaders Malaria Alliance (ALMA) Awards for Excellence in Vector Control to Cape Verde, Madagascar, Malawi, Namibia, Rwanda, São Tomé and Príncipe, and Swaziland. Each country has demonstrated exemplary leadership in maintaining at least 95% coverage year round of Long-Lasting Insecticidal Nets (LLIN) and/or Indoor Residual Spraying (IRS) interventions, the most important tools in preventing malaria.

The 2013 World Malaria Report declared that as a result of significant scaling-up of malaria control interventions, an estimated 3.1 million lives have been saved in Africa since 2000, reducing malaria mortality rates by 49%.