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International Aids returns

This journal grew up on HIV/AIDS, launching in 1978 when the early noises were emerging about an unknown infection. Indeed in the early 1980s we were embarrassed at how many advertisements we had for HIV tests. Interesting how the dynamic has changed over the years with diagnosis and treatment very much becoming the domain of donor and government relations rather than private sector or personal choices. And while infection levels have fallen significantly, the virus is still very much with us. Yet one gets the feeling that for many governments the urgency has gone out of their HIV efforts and it is being treated as if 'just another Non-Communicable Disease', rather than a critical viral problem.

The statistics call for much more urgent action. Since 2000 there have been 38.1 million HIV infections globally, and in the same period 25.3 million people are thought to have died of the disease. In 2014, an estimated 36.9 million people were living with HIV (including 2.6 million children), a global HIV prevalence of 0.8%. The vast majority of this number live in low and middle-income countries. In the same year, 1.2 million people died of AIDS-related illnesses.

Twenty-five point eight (25.8) million people living with HIV are in sub-Saharan Africa, accounting for 70% of the global total. Only 54% of the people living with HIV know that they have the virus.

In 2014 there were roughly two million new HIV infections, 220 000 of which were among children. Most of these children live in sub-Saharan Africa and were infected via their HIV-positive mothers during pregnancy,

childbirth or breastfeeding.

As of March 2015, 15 million people living with HIV were receiving antiretroviral treatment (including 823 000 children) representing 41% of those in need. But staggeringly, 59% of those in need are still not accessing treatment.

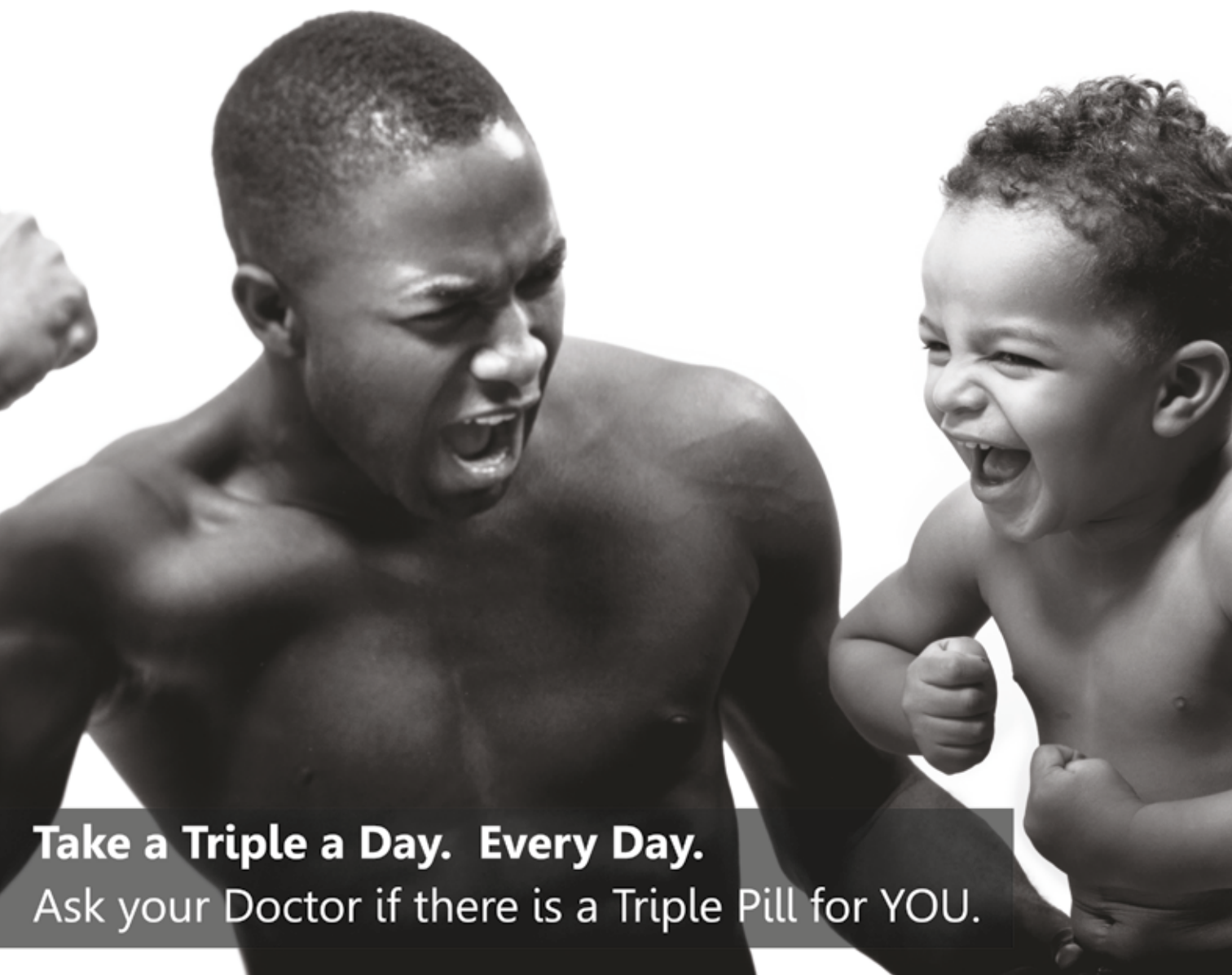
In the week of writing this, the International AIDS Conference 2016 is meeting in Durban, South Africa for the first time in Africa since meeting at the same venue back in 2000. Those were bleak times in South Africa with a rising tide of infection and a new President (Thabo Mbeki) who refused to recognise HIV as being an infection in need of special measures. In South Africa the tide has turned since Mbeki left office in 2008. There is strong, sustained and reasonably well funded and coordinated action. The evidence is that in some countries elsewhere in Africa there is a growing inertia towards leading from the front against this extraordinary challenge and the infection rate graph is moving in the wrong direction again or at best flatlining. If HIV is to be defeated, the fight once-again needs to be led by Presidents, not be relegated to the domain of sugary philanthropic overtures from the First Ladies.



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Stay "Triple Strong"

Taking HIV medication EVERY DAY keeps me strong for a long, healthy life. With my new "Triple Pill" it can be just ONE PILL PER DAY.



Take a Triple a Day. Every Day.

Ask your Doctor if there is a Triple Pill for YOU.

The 2014 Namibian Guidelines for Antiretroviral Therapy and The World Health Organization recommend Fixed-Dose Combination Therapy Consolidated Guidelines on the Use of Antiretroviral Drugs for Treating and Preventing HIV Infection, Geneva, World Health Organization, 2013. (<http://www.who.int/hiv/pub/guidelines/arv2013/en>)

