

STOP HIV AND AIDS NOW

Roll out treatment as prevention

The Lancet column calls for immediate, collaborative expansion of global HIV strategy

STAR HEALTH REPORT

The Lancet, a leading global medical journal, recently published an editorial comment that emphasises the critical role of expanding access to HIV treatment under a "Treatment as Prevention" strategy to stop the HIV pandemic.

The publication of the editorial comment coincided with the opening of the 6th IAS Conference on HIV Pathogenesis, Treatment and Prevention (IAS 2011) in Rome, Italy from July 17-20.

The commentary – by Dr. Julio Montaner, director of the British Columbia Centre for Excellence in HIV/AIDS (BC-CfE) and Past President of the International AIDS Society (IAS) – strongly reinforced the view that the benefits of highly active antiretroviral therapy (HAART) extend beyond the remarkable effectiveness of the treatment to prevent the onset of AIDS and prolong life, to dramatically reduce HIV transmission. Based on HAART's effectiveness in reducing transmission, Dr. Montaner called on the international community to support an immediate and expanded roll out of HAART under the Treatment as Prevention strategy, as pioneered by the BC-CfE in British Columbia, Canada.



"Treatment as Prevention is one of the most important and promising additions to the range of prevention strategies available to us today," said Dr. Elly Katabira, President of the IAS and Chair of IAS 2011.

Current HIV treatment reduces the level of HIV in the blood to undetectable levels, thus improving the health of HIV-

positive individuals. At the same time, the treatment decreases the level of HIV in sexual fluids to undetectable levels, thereby reducing the likelihood of HIV transmission by over 90 per cent.

"The evidence is clear: treatment conclusively prevents morbidity, mortality and transmission," said Dr. Montaner. "We now have ample and compelling

evidence that treatment prevents HIV transmission during pregnancy and breastfeeding, as well as in sexual and injection drug use settings. The challenge remains to optimise the impact of this valuable intervention. Failure to do so is not an option."

A recent study by the US National Institutes of Health (NIH) reported that immediate use of HAART led to a 96% decrease in the risk of HIV transmission among heterosexual couples where one partner is HIV positive. "These results are a real scientific breakthrough and a game changer in the response to HIV," said Michel Sidibé, Executive Director of the Joint United Nations Programme on HIV/AIDS (UNAIDS).

The Treatment as Prevention model has been embraced by UNAIDS and the World Health Organisation within the Treatment 2.0 initiative, announced last year as a central pillar of the global strategy to respond to HIV.

In February 2011, in consultation with the BC-CfE and the Chinese Centre for Disease Control and Prevention (China CDC), China became the first country to incorporate Treatment as Prevention as part of its national HIV/AIDS strategy to control HIV/AIDS over the next five years.

BREAKING NEWS



WHO seeks ban on TB blood tests

WHO warns against the use of inaccurate blood tests for active tuberculosis

REUTERS, Geneva

The World Health Organisation (WHO) called for an immediate ban on the use of blood tests to detect active tuberculosis, saying they produced wrong results and left millions of lives at risk.

In unusually frank terms, the U.N. agency suggested that mainly Western test-kit manufacturers misled their customers in developing countries with unfounded claims about their worth and used "perverse financial incentives" to boost sales.

A year-long rigorous analysis by its own and independent health experts uncovered "overwhelming evidence...that the blood tests produced an unacceptable level of wrong results," a statement from the WHO said.

In at least 50 percent of cases, the tests — only used in developing countries and mainly in the private sector — found sick people to be TB-free and healthy people to have the disease, the agency's Mario Raviglione told a news conference.

"This means that tens of thousands of people with TB get no treatment, so they are highly likely to infect many, many others," he said. "And a similar number of healthy people are given useless treatment."

The tests, which have no regulatory approval anywhere and are not used in richer nations, "must be stopped immediately and everywhere," Raviglione said.

HEALTH bulletin

Doctors warn against giving energy drinks to children

Children given energy drinks could pile on the pounds because they are not active enough to burn off the extra calories, warn doctors.

They say energy drinks — which contain between 10 and 270 calories a serving — should never be given to children. Instead children should be offered water to quench their thirst, and drink the recommended daily amount of fruit juice and low-fat milk with meals.

A hidden problem with energy drinks is caffeine, which can reach toxic levels up to 14 times greater than in other soft drinks. The stimulant has been linked to seizures, diabetes, heart problems and behavioural disorders.

Source: Paediatrics

Pregnancy category of drugs

PROF DR M KARIM KHAN

During pregnancy all drugs are not equally safe. Without prescription of a registered physician, expectant mothers should not take any drug. On the basis of safety profile, drugs used in pregnancy are categorised as category A, B, C, D and X. These are done as per FDA, USA.

A-Category drug means they are very safe in pregnancy, tested and trusted drugs. They are tested in human being and in animals and no adverse effect are observed in fetus.

B-Category drugs are also safe in pregnancy but not enough data are there like A-Category.

C-Category drugs have some side effects on fetus and their uses are restricted.

D-Category drugs obviously have more side effects than C-Category, so their uses are more restricted.

X-Category drugs are dangerous for fetus.

In many countries, pregnancy category of the drugs is being printed on the packet, to make the user aware of the drug. So if a physician uses pregnancy category drugs B, C, D or X in pregnancy, must explain why it has been prescribed and what are the risk for the fetus.

In our country pregnancy cate-



gory of the drugs is not mentioned on the packet and we, most of the physicians are not in a habit of explaining the drugs and its side effects that are prescribed in pregnancy.

All the patients has got the right to know about the drugs which are being prescribed for them. I think, it is the sacred duty of the concern physician to explain the side effects of the drugs which are prescribed. We should build up such practice for the betterment of the patients and for the profession.

Drug authority can also ask the pharmaceutical companies to mention the pregnancy category of the drugs that they are marketing. Be happy and healthy always.

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Breastfed children are better behaved

Breastfed children are more likely to be better behaved, according to an Oxford University-led study.

Researchers have found that those who are breastfed for at least four months are 30 per cent less likely to exhibit a range of behavioural problems when they start school. Such problems include anxiety, clinginess, bad behaviour such as lying and stealing, as well as being hyperactive.

Maria Quigley of Oxford University's National Perinatal Epidemiology Unit, who led the study, said "We found that children who were breastfed for at least four months were less likely to have behavioural problems at age five."

Source: Journal Archives of Disease in Childhood



Disappointing probiotics in children's constipation

DR ABDULLAH SHAHRIAR

The prevalence of constipation in children may be less frequent (2%) than that of adults (20%), but it can be serious if their constipation is prolonged. Studies of standard treatments (such as laxatives) for prolonged constipation in children have shown no benefits. Some probiotic strains are effective for the treatment of paediatric diarrhoea and some strains show promise for paediatric constipation.

Although few studies demonstrated that some strains of probiotics were not that much effective for the treatment of prolonged constipation in children. But a few negative studies should not rule out the possibility that it may be effective.

However, the bottom line is — probiotics should still be administered for the treatment of such cases. Certainly, more studies are needed to completely deny the benefits of probiotics.

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