

Headline	No use burying head in the sand on AIDS	Language	English
Date	29 Jul 2010	Page No	16
MediaTitle	New Straits Times	Article Size	473 cm ²
Section	Local News	Color	Full Color
Journalist	N/A	ADValue	13,992
Frequency	Daily	PRValue	41,975
Circ / Read	136,530 / 330,000		



No use burying head in the sand on AIDS

Malaysia has made significant efforts to tackle the AIDS scourge, which was acknowledged at an international conference in Vienna, but efforts must also be directed at addressing the problem among drug users and sex workers, writes **ADEEBA KAMARULZAMAN**

AFTER nearly three decades of the HIV pandemic and more than 33 million infections worldwide, more than 19,000 participants at the 18th international AIDS conference in Vienna last week were re-energised with some good news and new hopes in the search for effective prevention and treatment strategies.

Unveiled for the first time in Vienna were the results of a study on an anti-retroviral drug containing vaginal gel that could protect women against HIV infection. With up to 50 per cent of the global HIV infection occurring in women and rising rates of women becoming infected in Malaysia annually, this represents the most significant and promising result that will allow women to protect themselves from HIV during sexual intercourse.

Given that abstinence, using condoms and being faithful have been unsuccessful in preventing HIV infection, a vaginal microbicide gel is a critical step forward.

On the treatment front, although combination anti-retroviral therapy has changed what once was a universally fatal disease to a chronic disease, the need for life-long treatment makes this model not only medically unfavourable because of side effects and problems with compliance, but also financially unsustainable in the long run.

For all these reasons and given that candidate vaccines have thus far proven disappointing, the search for a cure becomes imperative.

Renewed hopes in the search of a cure have been ignited through better understanding of what happens to the virus once it enters the body. Coupled with discovery of new drugs that could eliminate la-

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tently infected cells, the feasibility of a "cure" by either eliminating the infection or a functional cure with complete suppression of the virus's capacity to cause disease and to be transmitted seems more possible than ever before.

However, although the prospect of a cure is no longer improbable and a more effective microbicide has at last been found, both are still several years away from being

commercially available and able to impact on what is already one of mankind's greatest tragedies. Much is known about what works to prevent infection that can and should be employed immediately and to scale.

Of particular relevance to the Malaysian epidemic is that we know provision of clean needles and syringes and methadone treatment to drug users work. Here, Malaysia is leading the way compared with many other countries faced with similar drug injection epidemics. Our programmes of providing harm reduction interventions, including in prison settings and the collaboration between health and law enforcement in implementing these programmes, received much praise and attention in Vienna.

However, with approximately one in four injecting drug user in Malaysia infected with HIV, more needs to be done as current programmes are only reaching 10 per cent of the estimated 150,000 injecting drug users nationwide.

Furthermore, only a quarter of those infected are at present receiving HIV treatment. This is particularly important given findings of studies which suggest that the more people there are on treatment, the higher the likelihood of reducing the spread of HIV. In a study from Vancouver, an increase in HIV treatment coverage was associated with a substantial decrease in the number of new HIV diagnoses per year. Clearly, more efforts need to be made in Malaysia to provide both substance abuse and HIV treatment to have an impact on

our epidemic.

However, full-scale implementation of these pro-

grammes remains difficult in the setting of our current drug laws and policies. Laws which criminalise drug use rather than view it as a health problem have inadvertently led to tens of thousands of drug users becoming infected with HIV and hepatitis C.

In a call for governments to examine a full policy reorientation and review of their futile war on drugs, the Vienna Declaration launched at AIDS 2010 argues that prohibition not only undermines efforts to slow the spread of HIV but has also resulted in overwhelmingly negative health and social consequences. To date, more than 12,000 people, including Nobel laureate and co-discoverer of HIV Françoise Barre-Sinoussi and Michel Kazatchkine, executive director of the Global Fund, have lent their voices to the declaration.

While Malaysia is now beginning to address HIV among people who use drugs, programmes to prevent infections in other most at risk populations, namely sex workers and men who have sex with men, are still few and far between. Here, moral high ground, religious and cultural concerns trump scientific evidence.

Recent studies conducted jointly by the Malaysian AIDS Council, the Ministry of Health and the University of Malaya show that already one in 10 sex workers and transgenders in the Klang Valley is infected with HIV. Another recently concluded study shows that

close to four per cent of men who have sex with men in Kuala Lumpur are infected with HIV.

Examples of effective programmes specific to these populations abound. Implementing them would require first an acknowledgement that present approaches which include criminalisation are not only ineffective but contribute to the rising rates of transmission among and from this population. A public health approach based on sound evidence rooted in the recognition of an individual's rights and dignity is more likely to succeed than the current approach of criminal-

ising these behaviours.

The continued reluctance to address the HIV epidemic in these marginalised populations will not only lead to ongoing infections but to onward transmission to the general community. In a recent report, it was estimated that up to 10 million Asian women sell sex and at least 75 million men buy it regularly. While the number in Malaysia is unknown, it is not difficult to imagine that the figure is substantial. With 10 per cent of sex workers in the Klang Valley infected with HIV, the potential for spread to wives and regular partners of these clients of sex workers is frightening.

We can continue to ignore the signs of a substantial HIV epidemic spreading in this country and continue with business as usual at our own peril and deal with the consequences in the future. Lessons learned from the past and new evidence provide us with much knowledge to act. Nothing less than a rethinking of the policies that impede the response to the HIV epidemic and crafting of new policies based on sound scientific evidence and respect for human rights and dignity are needed.

■ **Professor Adeeba Kamarulzaman** was a scientific programme co-chair at the 18th AIDS Conference. She is director of the Centre of Excellence for Research in AIDS (CERIA), University of Malaya, and a former president of the Malaysian AIDS Council



Sex workers are vulnerable as long as prostitution remains illegal in this country.