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WINNING THE AIDS WAR

If treatment became available for all the 34 million people with AIDS, the epidemic could be stopped.

The battle to slow the global AIDS epidemic has made astonishing progress over the past decade, especially in countries whose survival as functioning societies had once seemed threatened. The question is whether the momentum can be maintained at a time when donations are falling, the need for treatment is rising, and research suggests that with sufficient resources the epidemic could be stopped in its tracks.

A report issued on Friday by the United Nations AIDS agency, Unaid, noted that thanks to a vigorous effort by donor nations and international organizations, the global annual rate of new cases of H.I.V. dropped by 25 percent over the last decade. AIDS-related deaths have declined, and some 6.6 million people in low- and middle-income countries were being treated with antiretroviral drugs at the end of 2010. For them, AIDS is no longer a death sentence. Most are likely to live near-normal lives.

But an even larger number of people in those countries, some nine million, qualified for treatment but were unable to get it, usually because there was not enough money to buy the drugs or set up clinics and train personnel to deliver the medicines. Almost \$16 billion was spent to fight the epidemic in low- and middle-income countries in 2009, but at least \$22 billion a year is needed by 2015. In 2009 and 2010, disbursements by donor nations declined.

Beyond the need to treat millions of people whose immune systems are weak enough to qualify for care right now lies the exciting prospect that the epidemic could be stopped if all of the estimated 34 million people infected with the virus could be treated. A pivotal study found that if an infected person was treated with drugs immediately, the risk of transmission to an uninfected partner was cut by 96 percent. The up-front costs of treating everyone would be huge, but in the long run it could well save money by greatly reducing the number of people who become infected and need treatment.

In recent years, the United States and other far-sighted donors have worked to build up the health-care systems in afflicted countries, push governments to assume more responsibility for fighting their own epidemics, and cut costs with common-sense reforms like using generic drugs, shipping by land and sea, and pooling purchases.

The United Nations will hold a high-level meeting this week to chart a course of action for coming years. It needs to press donor countries, and those with high infection rates, to do more, not less, for this life-or-death fight.