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In Myanmar, only sickest HIV patients get drugs

YANGON: Thein Aung has been trained not to show weakness, but he's convinced no soldier is strong enough for this.

He clenches his jaw and pauses, trying to will his chin to stop quivering and his eyes not to blink. But he's like a mountain that is crumbling. His shoulders shake, then collapse inward, and he suddenly seems small in the denim Wrangler shirt that's rolled up to his elbows and hanging loosely off his skinny arms. Big tears drip from his reddened eyes, and he looks away, ashamed.

As he sits outside a crowded clinic on the outskirts of Myanmar's biggest city, he knows his body is struggling to fight HIV, tuberculosis and diabetes but he can't help wishing he was sicker. Although Aung is ill enough to qualify for HIV treatment in other poor countries, there's simply not enough pills to go around in Myanmar. Only the sickest of the sick are lucky enough to go home with a supply of lifesaving medicine here. The others soon learn their fate is ultimately decided by the number of infection-fighting cells found inside the blood samples they give every three months.

The World Health Organization recommends treatment start when this all-important CD4 count drops to 350.

In Myanmar, it must fall below 150.

Antiretroviral therapy, in the past considered a miracle only available to HIV patients in the West, is no longer scarce

in many of the poorest parts of the world. Pills are cheaper and easier to access, and HIV is not the same killer that once left thousands of orphaned children in sub-Saharan Africa.

But Myanmar, otherwise known as Burma, remains a special case. Kept in the dark for so many decades by its reclusive ruling junta, this country of 60 million did not reap the same international aid as other needy nations. Heavy economic sanctions levied by countries such as the United States, along with virtually nonexistent government health funding, left an empty hole for medicine and services. Today, Myanmar ranks among the world's hardest places to get HIV care, and health experts warn it will take years to prop up a broken health system hobbled by decades of neglect.

"Burma is like the work that I did in Africa in the '90s. It's 15, 20 years out of date," says Dr. Chris Beyrer, an HIV expert at Johns Hopkins University who has worked in Myanmar for years. "If you actually tried to treat AIDS, you'd have to say that everybody with every other condition is going to die unless there are more resources."

Of the estimated 240,000 people living with HIV, half are going without treatment. And some 18,000 people die from the disease every year, according to UNAIDS.

The problem worsened last year after the Global Fund to Fight AIDS, Tuberculosis and Malaria cancelled a round of funding due to a lack of international donations. The money was expected to provide HIV drugs for 46,500 people.

But as Myanmar ~~wows~~ the world with its reforms, the U.S. and other nations are easing sanctions. The Global Fund recently urged Myanmar to apply for more assistance that would make up the shortfall and open the door for HIV drugs to reach more than 75 percent of those in need by the end of 2015. It would also fight tuberculosis, a major killer of HIV patients. TB in Myanmar is at nearly triple the global rate as multi-drug resistant forms of the disease surge.

The aid group Doctors Without Borders has tried to take up the slack by providing more than half the HIV drugs being distributed. But every day, physicians at its 23 clinics must make agonising decisions to turn away patients like Aung, who are desperately ill but still do not qualify for medicine because their CD4 counts are too high.

"It's very difficult to see those kind of situations," says Kyaw Naing Htun, a young doctor with a K-pop hairstyle and seemingly endless energy, who manages the organisation's busy clinic in Insein. He says about 100 patients who should be on drugs are turned away every month in Yangon alone. "It takes a lot more resources when they come back sicker. It's a lose-lose game."

Aung first learned about the virus living inside him in April. He had dropped weight and wasn't sleeping well, but figured it was the TB and diabetes running him down.

When the test came back positive for HIV, he was shocked and scared: How? Why?

"I wanted to commit suicide when I found out the results," he says softly, looking away. "What upset me most was my wife. She says I shouldn't die now because we have children."

The questions swarmed and consumed him, followed by a flood of worry and guilt that he had possibly infected his spouse. Then the bigger concern: What's next?

Unlike many living in a country closed off to the world for the past half century of military rule, Aung, an Army staff sergeant, had some firsthand knowledge about HIV. — AP