

AIDS on the Rise

Contributed by LAWRENCE K. ALTMAN
Tuesday, 21 November 2006

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November 22, 2006 AIDS Is on the Rise Worldwide, U.N. Finds By LAWRENCE K. ALTMAN

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At the same time, the prevalence of H.I.V., the virus that causes AIDS, among young people has declined in eight countries in Africa, showing that prevention efforts can work, United Nations officials said.

“Even limited resources can give high returns when investments are focused on reaching people most at risk and adapted to changing national epidemics,” said Dr. Paul De Lay of the United Nations AIDS program, known as UnAids.

But over all, prevention efforts have reached far too few people at risk, like gay men, prostitutes, injecting drug users and members of minority groups, Dr. De Lay said in a telephone news conference from Geneva. He was commenting on a report issued yesterday by his agency and the World Health Organization, also a United Nations unit. Both have headquarters in Geneva.

An estimated 39.5 million people are now living with H.I.V., the report said. Of that total, 4.3 million became infected this year. There have been 2.9 million AIDS deaths in 2006, the highest number reported in any year.

The comparable figures in 2004 were 36.9 million living with H.I.V., 3.9 million new infections and 2.7 million deaths.

In Eastern Europe and Central Asia, infection rates have risen by more than 50 percent since 2004.

The AIDS pandemic is a series of epidemics involving different groups at high risk like prostitutes, drug users and gay men. Because different groups may become infected at different rates and stages of the epidemic, each country needs to know its situation.

But precise statistics are not available, because many countries in Latin America, the Caribbean, the Middle East and North Africa lack adequate disease surveillance systems, the officials said. Those countries’ health systems lack sufficient trained workers, laboratories, supply systems and money to keep H.I.V.-infected people alive.

Nevertheless, “these estimates are amongst the most robust for any disease of global public health importance,” said Dr. Kevin De Cock, the World Health Organization’s chief AIDS official.

The global death total would be even higher without the efforts undertaken in recent years to provide antiretroviral therapy to hundreds of thousands of AIDS patients in poor countries, Dr. De Cock said. Still, he said, such drug therapy has not reached enough poor people to match the degree of decline in death rates seen in wealthy countries.

Dr. Peter Piot, the executive director of UnAids, said that “countries are not moving at the same speed as their epidemics.”

Without rapid improvements, the pandemic will only worsen, the officials said. The United Nations cited Uganda as a country where the infection rate has shown resurgence after being on the decline.

Surveys conducted in 2000 and 2005 show that the rise there appears to have resulted from increasingly erratic condom use and an increased number of men who had sex with more than one partner in the previous year. Also, there are signs of an increased H.I.V. prevalence in some of Uganda’s rural areas.

Cause for concern was also found in Thailand. Despite a falling overall H.I.V. infection rate there, a large percentage of new infections are among people previously considered at low risk, Dr. De Lay said. “A third of all new infections are among married women,” he said.

Infection rates in the United States and Western European countries, including England, seem to show a decline in the

intensity of prevention efforts, the officials said. The number of new infections in the United States has remained stable at 40,000 for about a decade.

That rate "is not good news," said Karen Stanecki, a senior epidemiologist at Unaid. She said the United Nations had "highlighted" those wealthy countries "because we feel they are places where prevention programs should be more focused to stop all the new infections that are occurring."

But the officials said they were encouraged by new data showing declines in H.I.V. prevalence among young people from 2000 to 2005 in eight African countries: Botswana, Burundi, Ivory Coast, Kenya, Malawi, Rwanda, Tanzania and Zimbabwe.

The trends were not sufficiently strong nor widespread to lower the overall impact of AIDS in Africa.

The report also said that in China some programs that focused on sex workers had led to marked increases in condom use and decreases in rates of sexually transmitted infections. Also, programs for injecting drug users have shown progress in some areas.

In Portugal, new H.I.V. infections among injecting drug users declined after the introduction of special prevention programs focused on H.I.V. and drug use.

Many babies have not benefited from efforts to scale up distribution of antiretroviral drugs in Africa. Dr. De Cock said studies were needed to directly measure the effectiveness of such therapy on child survival and the death rates of children in poor areas.

Strong efforts are needed to improve the detection and treatment of tuberculosis as part of efforts to treat AIDS in poor countries, Dr. De Cock said.

Although countries, private foundations and individuals have contributed billions of dollars to improve H.I.V. treatment in poor countries, health workers cannot assume that such donations will always continue, Dr. De Cock said. "We face a great responsibility to show further impact in coming years," he said.

The report is available on the organizations' Web sites: www.unaids.org and www.who.int.