

MSF: AIDS drug shortage threatens Africa

July 18 2009, By MICHELLE FAUL, Associated Press Writer

(AP) -- Doctors Without Borders warned on Saturday that a chronic shortage of drugs to treat AIDS in six African countries could cost thousands of lives and reverse progress made on the continent most afflicted by the disease.

In recent weeks, some clinics have stopped accepting new patients, Eric Goemaere, medical coordinator in South Africa of the organization, which is also known by its French abbreviation MSF, told The Associated Press.

He said apathy of governments, donors and the organizations they work with, as well as the global economic crisis, were to blame.

"There's no doubt people will die as a consequence. It's a catastrophe in the making," Goemaere said before the opening of a four-day international AIDS conference in Cape Town.

A newsletter for the conference said, "Amidst a lingering global recession and reports that world leaders are retreating on prior commitments, the 5,000 AIDS researchers, implementers and community leaders gathering in Cape Town this weekend are determined to raise their collective voices."

The conference president, Dr. Julio Montaner of the Geneva-based International AIDS Society, added, "Either we move forward or we will fall back. That is the reality we face at this pivotal moment in HIV scale-up."



The countries affected are Zimbabwe, Uganda, Congo, Malawi, Guinea and South Africa, with the last suffering the highest rate of AIDS infection in the world.

At the end of 2007, 33 million people worldwide were living with HIV, according to the <u>World Health Organization</u>. Two-thirds of them live in sub-Saharan Africa.

The Global Fund to Fight AIDS, Tuberculosis and Malaria, which provides a quarter of all international financing to fight AIDS across the world, has not received \$3 billion to \$4 billion in promised funding, according to Mit Philips of the MSF research center in Brussels.

"Some countries have committed but have not paid and there's a lot of uncertainty at an international level whether the Global Fund will get the money it needs," she said in a telephone interview.

The fund has already slashed 10 percent from grants already approved last year, Philips said.

The fund's Web site says that, since its creation in 2002, it has approved \$15.6 billion for more than 572 programs 140 countries.

In addition, Philips said, there has been no promised increased in funds from the U.S. President's Emergency Plan for AIDS Relief, a pet project of President George W. Bush that is credited with saving millions of lives.

On the campaign trail, President Barack Obama promised to expand the program by a billion dollars a year. But Philips said funding has remained flat. Goemaere said organizations using the project's funds in Uganda have been told to stop taking on new patients.



For those who do not die, that means getting sicker and sicker before getting access to the drugs, that they may need expensive specialist care instead of that of ordinary health workers, and a greater likelihood of suffering side effects from the anti-retrovirals.

"It makes a huge difference if people come walking in for treatment, or if they are coming in on stretchers," Goemaere said. "We're very scared" of hearing no new patients must be enrolled.

Local news reports that some AIDS victims in South Africa's KwaZulu-Natal province have been forced to halt their drug regimen raise other issues. Such patients develop drug-resistance and then must be treated with a more expensive cocktail of medication.

Goemaere also feared difficulties in getting drugs could reverse decades of work to fight the stigma attached to AIDS: "We will be going back to the dark times with people thinking that treatment is not reliable or not accessible, so 'let's hide the disease."

The United Nations last month warned governments against using the global economic crisis as an excuse to cut funding for fighting AIDS at a time when there are nearly five new HIV infections for every two people put on treatment.

"With reports of drug shortages here and elsewhere foremost on our minds, we must hold our leaders accountable for the needless deaths that will result, along with countless preventable infections," said the South African co-chairman of the conference, Dr. Hoosen Jerry Coovadia, who is professor in HIV/<u>AIDS</u> research at the University of Natal-Durban.



On the Web:

http://www.ias2009.org, official conference site

http://www.msf.org, Doctors Without Borders

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