

EVERYTHING IS DIFFERENT IN THAILAND!

(The **XV WORLD AIDS** Conference,
Bangkok, 2004)

(translated from Latvian)

Info- sheets on World AIDS conferences are reaching you so late, since exploring both big- formatted abstract books (1600 pages) in small print takes time.

For sure, this conference was even bigger than previous ones – the amount of delegates reached 20 000! To ease the logistics of the conference, part of Bangkok schools and other institutions were closed! Groups of children in nice school- gowns were attending the conference “Community Village”.

Talking to the „Kathmandu Post” (Nepal) Chief Reporter, his first impressions on the conference are negative – the millions spent could better be used for procurement of life- long therapies to hundreds of untreated HIV patients. He said, his editorial will be quite critical!

Not incidentally, the only long and never- ending queue during the whole conference in its exhibition hall is at the Thai **governmental pharma company's** stand, where applications for the cheap AIDS generics are collected. Yes, Thailand has no private pharma companies, in contrast to the democratic West! So, everything is different in this kingdom, which has always been free. The originally designed delegates' bags are not plastic and not sponsored by some pharma company as at all the other AIDS conferences. They are hand- made of grubby cotton by HIV+ Thai people. Positive Marketing Co. Ltd was chosen as the coordinator for the production of these shoulder bags. The company was recently established by support and technical assistance of the Centre for People & Families Affected by AIDS, the Ministry of Public Health, the Thailand Business Coalition on AIDS and UN ESCAP. Bags do not serve as an advertisement – profits earned from the **sale of articles produced by HIV- infected people** have been earmarked to support healthcare services and income generating activities for HIV/AIDS communities and groups in Thailand.

Conference abstracts seemed to contain **less AIDS clinical research**. And just recently I found an official confirmation to my observation – clinical science tracks have been out- numbered by combined studies on social, prevention, community, access and epidemiology issues.

E.g., P. van de Ven (the Univ. of N. S. Wales, Australia) has discovered that in serodiscordant gay couples where HIV+ partner has an undetectable VL, HIV+ men are more likely to be receptive (HIV- - insertive) when engaged in unprotected anal intercourse (thus minimizing risk of HIV transmission).

S. G. McCoombe (the Univ. of Melbourne, Australia) concludes in his abstract that circumcised men are 8 times less likely to become infected by HIV than

uncircumcised men.

For the developed world, **new approaches to lifelong treatment** were one of the **highlights of the conference**, e.g.:

- Is it possible to use fewer drugs for long- term maintenance treatment, perhaps as few as just one P.I.?
- Can breaks in treatment allow people to take fewer drugs while preserving their immune markers? Etc.

Touching upon STIs, researcher N. Pai (the Univ. of Calif., U.S.A.) concludes: „there is **no consensus** so far **on the** use of **STIs** in the management of HIV infection”.

Pharma news. While “Pfizer” proceeds with the production of single 625ml **Nelfinavir** (Viracept) tablets in the U.S.A., “Roche” has stopped it in Europe due production difficulties (tablets crumble).

Smoking interferes with our health. In his abstract researcher K. Crothers (Yale Univ., U.S.A.) concludes that 1,05 deaths per 100 HIV patient- years could be attributed to smoking. Besides, **QL of smokers is decreased**. M. J. Miguez-Burbano (the Univ. of Miami, U.S.A.) concludes that long- term smoking is also a pathogenic factor for renal disease in HIV+ individuals.

One of the rare abstracts (WePeA5651) on complementary treatments is by S. Lee- Huang (New York Univ., U.S.A.). We all know that many AIDS patients are using **olive leaf extract** (OLE) to strengthen their immune system and relieve chronic fatigue. Lee- Huang has discovered that the non- toxic OLE also inhibits acute infection and cell- to- cell transmission of HIV-1 strain.

Since poverty has become a growing threat for HIV+ breadwinners, Malaysian AIDS Foundation is trying to secure financial independence of PWA.

I. K. Nadchatram describes a project, initiated in 2002, and entitled „**PWA Business Assistance Scheme**”, which provides PWA and their family members with interest- free loans to enable them to enhance small- scale business. Recipients often are the poor and those unable to access credits from banks and elsewhere. The programme works as a revolving fund with a set of 2 new loans being awarded to each organization once previous loans are paid in full. Small- scale businesses are often carried out within home settings and loans are generally used to purchase equipment to improve business delivery.

P. B. Fernandes (FALE, Brasil) describes that since the Brazilian government has not cared for any **shelter for PWAs**, an NGO FALE (Fraternidade Assistencial Lucas Evangelista) from 1994 started providing a place to stay, some food, clothes and other basic needs to PWAs excluded from their families, jobs or social groups. FALE is maintained only by community donations. The maintenance of buildings, cleaning and cooking is implemented by PWAs who

live there. There are no employees. Some 20 volunteers are engaged in supervision and administration. The support house hosts about 150 persons, including relatives, even those not HIV+. FALE has a special house for AIDS orphans who are staying under the responsibility of resident couples. There are also gender- separate houses for singles.

N. J. van der Nest (Johannesburg) underlines that the South African **life insurance** industry is one of the most advanced and innovative in the world. He recommends that SA HIV- related insurance practices could be used as a model for other countries where HIV status threatens traditional insurance approaches.

Thanks to the support of the Canadian embassy in Riga, I had the opportunity to participate at an interesting pre- conference 1- day satellite „Human Rights at the Margins: **HIV/AIDS, Prisoners, Drug Users and the Law**”, organized by Canadian HIV/AIDS Legal Network.

For the first time in the history of AIDS conferences there was a **workshop in Russian**. We discussed the development of support groups. The workshop was facilitated by Natalya Leonchuk and your humble servant

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