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Asian epidemic, abstinence top AIDS meeting agenda

A burgeoning epidemic in Asia, massive gaps in funding and access to treatment and prevention—particularly for women and young people—are urgent issues in the fight against AIDS, heard delegates at the XV International AIDS Conference, held in July in Bangkok. As is now tradition for this meeting, which is held every two years, frequent political protests were also a regular feature, both in the conference rooms and outside.

Asian leaders are not doing enough to manage the escalating AIDS epidemic that is sweeping the region, experts warned. They urged Asian governments to stem the epidemic by providing sterile needles, condoms and antiretroviral drugs.

“This conference must be a wake-up call to Asian leaders,” said Peter Piot, executive director of the Joint United Nations Programme on HIV/AIDS (UNAIDS). “They’re starting to respond, but sometimes too timidly.”

An estimated 7.4 million people in Asia are living with HIV. Worldwide, the number of infections has risen to a record 38 million, according to a report released by UNAIDS in the days preceding the conference. Last year, a record 4.8 million people worldwide became infected with HIV.

The agency now estimates that \$12 billion will be needed each year by 2005 and \$20 billion by 2007 to fight AIDS. Less than half of that money is available. The funds are sorely needed: nine of every ten people who need treatment in the developing world aren’t getting it.

The numbers are worse in Asia, home to some 27 companies that make generic versions of patented antiretroviral medications. Of the 1.3 million Asians who need the drugs, only seven percent have access to them, according to a report released by the American Foundation for AIDS Research (amfAR).

The epidemic in Asia is driven largely by intravenous drug users, sex workers and men who have sex with men. “That pattern has held in virtually every country in Asia,” said Tim Brown, a senior fellow at the East-West Center in Bangkok. Brown predicts that compared with Africa, Asian nations will see a

slow, steady rise in infections. “We are never going to see a generalized spread in the population as in Africa,” he said.

Many Asian countries have low infection rates, but with their large populations, that can translate to millions of infected individuals. For instance, India has an infection rate of 0.9 percent, one-twentieth that of South Africa. But with 5.1 million infected individuals, India is rapidly closing in on South Africa’s 5.3 million.

The epidemic in Asia is, in some ways, more dangerous because the low infection rates mean the disease is “flying below the radar” of the government, Brown said. Many Asian leaders turned down the Thai government’s invitation to participate in the conference.

In some Asian countries, greater stigma is attached to AIDS and sex than in Africa. Many Asian countries also have poor public health systems. In Vietnam, for instance, there is only one doctor for every 11,250 HIV-infected people, and China has fewer than 200 trained doctors for an estimated 840,000 infected individuals, according to the amfAR report.

Mathematical models predict that HIV will spread most rapidly in countries where more than 20% of men visit sex workers. Delaying the epidemic among drug injectors by providing clean needles can slow the spread to sex workers and buy precious prevention time, Brown said.

There is reason to believe that early intervention can stop the Asian epidemic in its tracks. Thailand, which saw an early and rapid rise in infections in the late 1980s, promoted condom use among Thai sex workers to nearly 90% and halved the number of men who visited sex workers. As a result, the number of new people testing positive for HIV in the country has fallen from 142,819 in 1991 to 21,260 in 2003.

“There is no question about what needs to be done to fight AIDS in Asia,” said Piot. “The only question is whether the governments and people of Asia will have the courage to do it.”

Piot and others pointed out that women and young people are increasingly bearing a disproportionate burden of the epidemic. Nearly half of the people infected with HIV worldwide—and nearly 60 percent of those in Africa—are women. Half of all new infections are in young people aged 15–24. In that age group, women account for nearly two-thirds of infections.

“What is needed is real positive change that will give more power and confidence to women and girls,” UN Secretary General Kofi Annan said at the opening ceremony of the conference. “What is needed is the education of girls.”

Microbicides—chemicals that can maim or kill the virus on contact—are widely acknowledged as the ideal prevention tool for women in the developing world. But since the Barcelona meeting in 2002, there has been minimal progress toward developing microbicides and vaccines to prevent HIV transmission. With few scientific presentations at the conference, most of the discussion on prevention strategies instead devolved into raucous debate on the US government’s emphasis on abstinence (see page 765).

More than 20,000 people from 160 countries gathered in Bangkok for the conference. This is the first time the conference has been held in Asia.

Apoorva Mandavilli, Bangkok



Debates on condoms and antiretroviral drugs dominated at the AIDS conference in Bangkok.

Reuters/Adrees Latif