

Sexually Transmitted Diseases, AIDS and Parasitic Infections & Parasitology, Infectious Diseases, STDs and STIs

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Perspective on HIV epidemic, prevention and control

AIDS remains a public health and social problem threatening global population. There are approximately 36.7 million people currently living with HIV and tens of millions of people have died of AIDS-related causes since the beginning of the epidemic. The greatest prevalence and incidence remains in Eastern and Southern Africa with 19 million (52%) affected. While new cases have been reported in all regions of the world, approximately two-thirds are in sub-Saharan Africa, with 46% of new cases in Eastern and Southern Africa. In the endemic regions outside the western countries, many people living with HIV or at risk for HIV do not have access to prevention, care, and treatment. In addition to affecting the health of individuals, HIV impacts households, communities, and the development and economic growth of nations. Many of the countries affected by HIV epidemic also suffer from other infectious diseases, food insecurity, and other serious problems. The number of people newly infected with HIV, especially children, and the number of AIDS-related deaths have declined over the years. The number of people with HIV receiving treatment increased to more than 18 million in 2016. However, a new gap exists. While studies show declines in new infections among adults observed earlier in the epidemic, incidence is now rising in some areas of the world particularly in China and India. HIV epidemic has led to a resurgence of tuberculosis (TB), particularly in Africa. TB is a leading cause of death for people with HIV worldwide. In 2015, approximately 11% of new TB cases occurred in people living with HIV. Interestingly, between 2004 and 2014 TB deaths in people living with HIV declined by 32%, largely due to the scale up of joint HIV/TB services. From our experience of HIV preventive work in the Dominican Republic, effective prevention strategies include behavior change programs, condom use, HIV testing, blood supply safety, harm reduction efforts for injecting drug users, and male circumcision. Additionally, recent research has shown that providing HIV treatment to people with HIV significantly reduces the risk of transmission to their HIV-negative partners. Pre-exposure antiretroviral prophylaxis (PrEP) has also been shown to be an effective HIV prevention strategy in individuals at high risk for HIV infection. In 2015, WHO recommended PrEP as a form of prevention for high-risk individuals in combination with other prevention methods. Additionally, in 2016, the U.N. Political Declaration on HIV/AIDS stated PrEP research and development should be accelerated. Numerous studies suggest that prevention should be based upon “evidenced-based knowledge of epidemic” directed to tailor the prevention and control measures to the local context and epidemiology, and using a combination of sustainable strategies.

Biography

Reza Nassiri is a Professor of Clinical Pharmacology, Professor of Family and Community Medicine, and Lecturer in Global Health, Infectious Diseases and Tropical Medicine at Michigan State University College of Osteopathic Medicine. His research interests focuses on Clinical Pharmacology of HIV/AIDS & TB, prevention and control of infectious diseases, neglected tropical diseases, community health, global health, and socio-ethical determinants of health. He works on international public health issues and has expertise in global health education, research, policy and governance. He has made contributions in various fields of medical sciences including clinical investigation and health education. On the basis of his extensive experience and expertise in HIV/AIDS and TB, he developed Clinical Research Programs in Brazil, South Africa, Haiti, Dominican Republic and Mexico. The core foci of such programs are socio-cultural, bio-ethical determinant of HIV/AIDS and TB prevention, control and intervention.

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