

IS EXPENSIVE ALWAYS BETTER?

(the **IV** International Conference
"HOME and COMMUNITY CARE for PLWHA",
 Paris, XII. 1999)

(translated from Latvian)

At the conference opening, its president dr J. M. la Piana stated that **preventive measures** have not always given the awaited results.

During the conference, **"Act- Up Paris"** protested France's small AIDS support to developing countries. France is the third mightiest economy in the world.

Still, African doctors confessed that medication often is not their first problem. Sometimes it is more important to feed their hungry patients.

Sad changes are awaiting the oldest AIDS/NGO in France "Vaincre le SIDA". Government's opinion is that due to HAART availability, AIDS crisis has passed away, and there is no need to further budget this NGO. 70 employees will get sacked, and some 70 helpless or blind patients will be left without anybody to help them...

AIDS medications are not **patented** almost in all developing world (UNAIDS research). E. g., Brazil will soon produce a generic version of Indinavir and there are no laws to forbid developing countries buying it at the Brazilian price.

Mandatory licencing is defined by WHO TRIPS agreement on intellectual property. But the 46 world's poorest nations (mostly in Africa and L America) have to incorporate TRIPS into their national legislation only by 2006. Provided they do it, pharmaceutical companies shall still be obliged to patent each product in every country separately – there is no international patent system.

Below are some price comparisons (dr B. Acoutre, "Medecins Sans Frontieres"):

DDI	U.S.A.:	180	\$/mth.	Brasil:	46	\$/mth.
AZT	Holland:	2,08	\$/tabl.	Thailand:	0,37	\$/tabl.
Fluconazol	Thailand (till 1988):	7	\$/day	Thailand (from1988):	0,67	\$/day

There is good news from the **Czech** Republic. The Prague municipality has so far been covering ASO "ČSAP" costs on rent. Now, with the financial aid from the Czech National AIDS committee, BMS and other sponsors, the house has been fully re- constructed and turned into a "Lighthouse". It comprises a short-term medical facility, a hospice, a club for self- help groups and a centre of prevention/ education.

Part of the renovation was done by PWAs themselves!

Doctors from Africa are accusing their Western colleagues.

Over- engaged in the newest OI treatments, Westerners are forgetting simple, cheap and effective medications with no side effects.

Patients from Nairobi, Kenya used the expensive anti- fungal medications (Cotrimazole, Ketaconazole, Fluconazole, Nystatin). While in 10 days they got improved, mouth still had bad odour and some patients experienced serious repeated oral cavity's **candidiasis** that degenerated later on into oesophageal candidiasis.

According to Kenyan doctors, these medications are not effective in 20% of patients with repeated candidiasis.

Alternatively, in 10 days on 2% Povidone **Iodine** no oral cavity's candidiasis or bad odour was observed. Its longer use (when needed) prevented development of oesophageal candidiasis.

The non- active ingredients of 2% Povidone Iodine mouthwash are: ethanol, menthol salicylat, saccharine and sodium in purified water.

Patients rinsed their mouths after each meal with 10 ml of the mouthwash.

For treating paediatric oral cavity or oesophageal candidiasis a 5mg daily dose of **follic acid** was used, complemented by a daily tablet of vit. B complex.

Candidiasis did not reappear in 85% of cases after a year on this therapy, and children had an improved appetite.

Some good news: nowadays drug companies are no more opposing research on **complementary treatments**. Their condition: these treatments should prolong the life span of HIV patients, so that more ARVs are consumed.

Doctors under the supervision of Bastyr University Institutional Review Board researched the cheap **homeopathic growth factors** (IGF₁, PDGF_{BB}, TGF_{B1}, GPI_{CSF}) (made in the U.S.A.). Here are the outcomes:

- increased or stabilised CD4 counts
- normalized body weight
- stabilized amount of muscle mass
- decreased VL.

“Healthy Pets, Healthy People” project representative (U.S.A.) gave an interesting evidence. Though some of the **pets** may be a threat of an infection to some patients, most of them are psychosocially supportive.

For that reason the U.S.A. Health Authorities are not advising PWAs to refrain from most of them.

Some research got criticized during the conference - **sexual behaviour** will not change because of any research; these expenses are eventually unnecessary!

Concerning the recent paedophilia scandal in Latvia it is interesting to know that the age of sexual “independence” in Russia is 14 years!

A.Kalnins,
AGIHAS