

## WHO declares failure to deliver AIDS medicines a global health emergency

At a special session of the United Nations General Assembly in New York on 22 September, WHO declared the failure to expand access to antiretrovirals in the developing world a global health emergency. The announcement was made together with UNAIDS and the Global Fund to Fight AIDS, Tuberculosis & Malaria.

Only 5% of the six million people requiring antiretrovirals in the developing world are receiving them. In sub-Saharan Africa, which bears most of the global HIV/AIDS burden, only 50 000 people of the 4.1 million who need treatment actually have access to it. This despite the availability of treatment for a dollar a day or less.

The global target is to provide antiretroviral medicines to three million people by the end of 2005. However, using existing programmes, fewer than one million people who need treatment will receive it by the close of 2005. Achieving the target, otherwise known as “3 by 5,” needs an immediate emergency response but also a change in long-term thinking. “To deliver antiretroviral treatment to the millions who need it, we must change the way we think and change the way we act,” said Dr LEE Jong-wook, Director-General of WHO.

WHO, together with UNAIDS and other partners, is leading the response to the global health emergency. It is urging governments, donors, other international and nongovernmental organizations, people living with HIV/AIDS, and industry to work together in closing the gap between patient and treatment. Dr Peter Piot, UNAIDS Executive Director, highlighted the importance of gaining strong commitment from the governments of those countries most affected. “AIDS therapy is a long-term commitment, not a one shot,” said Dr Piot. “We therefore need dramatic and sustained increases in resources and political commitment — including from hard-hit countries themselves.”

In order to achieve the “3 by 5” target, WHO will provide Emergency Response Teams to those countries with the highest burden of HIV/AIDS based

on direct appeals from governments. These teams, made up of AIDS treatment experts will make rapid assessments of the national barriers to the global target and will work with governments to find ways to speed up drug delivery.

An AIDS Drugs and Diagnostics Facility is also planned to assist countries with drug procurement issues such as price and quality. Procurement has been one of the major barriers to accessing AIDS drugs. Its inspiration, the Global TB Drug Facility (GDF) solved this problem in many of the countries suffering from a high burden of tuberculosis.

Other strands to WHO's response include the planned publication of treatment guidelines for the administration of antiretrovirals, the establishment of a system to track the progress of treatment programmes and the emergency expansion of training for health care professionals in the delivery of standardized antiretroviral treatment.

If the battle to get AIDS drugs to those who need it is to get back on track, “business as usual will not work,” said Dr LEE. “Business as usual means watching thousands of people die every single day.” On World AIDS Day on 1 December, WHO will announce the details of a comprehensive global strategy to meet the “3 by 5” target. ■

## New low-cost meningitis vaccine developed in record time

A new meningitis vaccine has been made available to WHO at a cost of one euro per dose. WHO is now issuing an urgent appeal to buy millions of doses of the vaccine before the meningitis season strikes.

The vaccine could represent significant progress in the battle against the disease which suffered a setback last year with the emergence of the strain W135. The strain exploded in Burkina Faso, striking more than 13 000 and killing at least 1500. Until now, there was no affordable vaccine available to combat it. Funds are now urgently needed to get production of the vaccine underway before the next wave of the disease sweeps

across Africa's “meningitis belt,” which stretches from Ethiopia to Senegal and is home to 350 million people.

“This is an urgent health situation which forces quick action,” said Dr Anarfi Asamoah-Baah, Assistant Director-General in charge of Communicable Diseases at WHO.

Every year, meningitis sweeps across sub-Saharan Africa, sometimes igniting outbreaks involving 100 000 people or more. At least 10% of those infected die and many others are left permanently disabled. Now, at least, the newest and most threatening form of the disease can be slowed significantly, providing funds are found. “The tragedy of meningitis will be compounded if we cannot get this new vaccine to those who need it most,” said Dr Asamoah-Baah. ■

## Long-lasting bednets to be produced in Africa

WHO, UNICEF and the Acumen Fund jointly announced a potential breakthrough that could save millions of people from malaria every year. For the first time, a Japanese product which extends the life of insecticidal bednets from about one year to more than four years is being manufactured in Africa — where 90 % of the world's malaria deaths occur.

The key advantage of the new long-lasting bednets is that they do not need to be retreated. Ordinary nets need to be treated with insecticides at least once a year to remain effective, a requirement which has been difficult to achieve due to cost, availability and custom. The new technology, which embeds the insecticide within the net's very fibres, means the new nets remain effective for at least four years.

Dr LEE Jong-wook, Director-General of WHO, confirmed the importance of this development in the battle against malaria which costs Africa alone US\$ 10–12 billion annually in lost GDP. “If health and development are truly global priorities, then it is essential that we reduce the number of malaria deaths,” said Dr LEE. “Properly used, they can cut malarial morbidity by at least 50% and child deaths by 20%.” ■