A CA NEWSFILE 香港愛滋病顧問局通訊

Publication of the Hong Kong Advisory Council on AIDS

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.Calendar.

XXXXII Meeting of the Advisory Council on AIDS (ACA)

2:30pm 10 January 2003

XXVI Meeting of the Scientific Committee on AIDS (SCA)

2:30pm 10 December 2002

Informal Pre-meeting of the AIDS

Prevention and Care Committee (APCC)

6 December 2002

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we have.....

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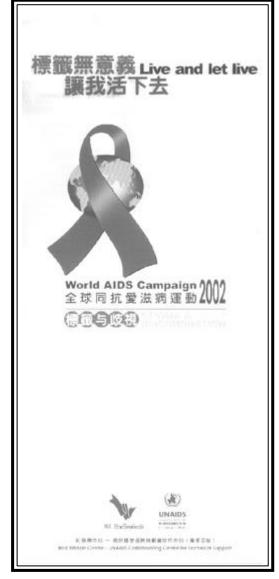
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New email

EFFECTIVE from 1 January 2003, the Advisory Council on AIDS would be using a email address - aca@dh.gov.hk 1



WORLD AIDS

Day falls on the first of December each year. In theupdatedepidemiological report issued by UNAIDS to tie in with the World AIDS Day, it's noted that the 42 million people around the world are living with HIV. The estimated number in Asia and the Pacific is 7.2 million. Two weeks prior to the World AIDS Day, the Department of Health in Hong Kong reported the highest number of HIV infection detected in a single quarter (see page 56). Though the actual number has remained small, the phenomenon does indicate that the infection is going to be with us in the years to come.

How did, or are you going to, commemorate (or observe, but definitely not celebrate, please!) this year's World AIDS Day? Did you join one of the activitiesorganised by

AIDS agencies in the territory? In this connection, the Red Ribbon Centre has been distributing a pamphlet listing all activities focusing on the Day (see figure above). This could be a starting point for all who are new to the field. Or, members may be getting prepared to attend of the committees' meetings under the Advisory Council on AIDS.

In places around us, the media was reporting the initiation of 'needle exchange 'activities in Guangdong. Down south, Singapore has just held its national AIDS conference. Nearer Hong Kong, the Pearl River Delta HIV workshop was successfully held in Shenzhen (page 57-58). Further away in India, about 4 million people have been infected by the virus. In Africa, AIDS has had a catastrophic effect in food safety.

In the statement released by Dr Peter Piot, the UNAIDS Executive Director reminded us that we are entering the third decade of the global epidemic. With the rising number of women infections, the volatile situation is certainly a cause for concern. Whatwe needperhaps, are innovation on one hand and determination on the other. The war has not been won yet. **X**

Advisory Council on AIDS Secretariat

Highest number reported

SEVENTY-EIGHT persons were reported positive in HIV antibody tests in the third quarter of 2002, bringing the cumulative total number of HIV infections to 1 941, the Department of Health announced on November 14. This is also the highest number of reported HIV infection in a quarter.

Eighteen new AIDS cases were reported in the same quarter. This brings to a total of 603 confirmed AIDS cases reported since 1985.

Of the 78 new HIV cases reported, 42 acquired the infection via heterosexual contacts and 18 via homosexual orbisexual contacts. Four cases involved injection drug users, another case acquired the infection perinatally. The route of transmission of the

remaining 13 cases were undetermined due to inadequate data. The 78 cases comprised 57 males and 21 females.

Of the 1 941 cumulative total of HIV infections since 1984, around eighty-one per cent of all have acquired the infection through sexual contact, with about seventy-one per cent of them through heterosexual transmission. Fifty-two infections have occurred among injection drug users.

The 18 new AIDS cases involved 17 males and one female. Around sixty-seven percent of them were related to heterosexual contact.

In the third quarter, the most common presenting AIDS defining illness was *Pneumocystis carinii* pneumonia, followedby

Epidemiology

Mycobacterium tuberculosis infection.

Department of Health has been monitoring the HIV/AIDS situation through a voluntary reporting system, a series of seroprevalences studies, STI (sexually transmitted infection) surveillance, and behavioural monitoring. The first cases of HIV and AIDS were reported in 1984 and 1985 respectively.

Data on HIV/AIDS are released on aquarterly basis and can be viewed on Homepage on AIDS (Virtual AIDS Office). Other information can also be accessed from the Homepage. The address is www.aids.gov.hk. &

Modified from a press release issued by the Department of Health on 14 November 2002

Reported HIV/AIDS Statistics (updated 30 September 2002)

		\mathbf{HIV}		AIDS	
		total / Q	3 2002	total / (23 2002
Gender	male	1582	57	527	17
	female	359	21	76	1
Ethnicity	Chinese	1351	53	474	15
	non-Chinese	590	25	129	3
Transmission	heterosexual	1110	42	400	12
	homosexual	367	15	103	2
	bisexual	91	3	29	0
	injectingdrug use	52	4	9	0
	blood/blproducts	68	0	19	0
	perinatal	15	1	6	0
	undetermined	238	13	37	4
TOTAL		1941	78	603	18

NOTE:

The "total" refers to the cumulative total number reported since 1984, under the voluntary HIV/AIDS Reporting System. Q3 refers to the period July to September 2002. The "AIDS" number is a subset of the "HIV numbers" and the two should not be added.

SOURCE:

Special Preventive Programmes, Department of Health, Hong Kong SAR Government

in & around Hong Kong

Useful AIDS websites in China

The following are useful websites for understanding the HIV/AIDS situations and programmes in China

<u>UNAIDS China Office</u> www. unchina.org/unaids

National Center for STD/AIDS
Prevention and Control www.
chinaids.org.cn - The website of the AIDS and STD sections of the new China CDC

AIDS In Guangdong www.cdcp. org.cn/aids/aids0.htm - The AIDS website of Guangdong's CDC.

CDCTaiwan www.cdc.gov.tw/ch
- Center for Diseases Control in
Taiwan &

Translation Matters

IN the Mainland, the chinese translation for the theme of the 2002 World AIDS Day LIVE AND LET LIVE is 相互關愛, 共享生命. This was announced in a press release issued by the Ministry of Health on 18 October 2002. In Taiwan it's translated into 有量有福,有愛有希望.These translations are very different from the approach of the Red Ribbon Centre, Hong Kong, which had combined the theme and the slogan to become 標籤無意義 讓我活下去. (ACA Newsfile, October 2002) &

PEARL LESSONS

THE III Workshop on HIV Surveillance and Epidemiology in the Pearl River Delta Region was held successfully on 7 to 9 November 2002. There was active discussion and information exchanges during the three-day meeting in Shenzhen, with the participation of over one hundred health professionals from Hong Kong, Macao, Guangzhou, Shenzhen, Jiangmen, Zhuhai, Shende, Dongguan, Foshan, Qingyuan and Huizhou. The Opening of the Workshop was officiated by officials of Guangdong and Shenzhen, Dr Homer Tso, chairman of the Hong Kong Advisory Council on AIDS, and Mr PK Ip, head of the Macao Public Health Laboratory.

The first day of the workshop featured situation reports of the cities, and discussions on the implications of the two important risk factors - sex and drug use. The second day covered clinical presentations of HIV infection, and new surveillance activities, namely, molecular epidemiology and antenatal HIV testing. The third morning provided an opportunity to exchange views on opportunities for collaboration.

What were the lessons learned? Dr Xu Ruiheng of the Guangdong CDC gave a concluding presentation to summarise the most important learning points of the workshop. He began by quoting a participant's remark that HIV/AIDS is a problem rather than a disease. The broad dimension and the complexity of the issues provided, not surprisingly, the backdrop for the workshop. He reminded participants that there's a distinct difference between the public health perspective taken on by the workshop, and the clinical perspective that some might have in handling individualcases.

Dr Xu went on to alert participants of a number of practices in the region which were particularly meaningful, and could became good reference materials in programme planning. These practices were: the methadone clinic services in Hong Kong, the HIV screening for foreign

[cont'don page 58]



Dr Homer Tso, the ACA chairman, making a point at the Pearl River Delta Workshop on 7 November

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Pearl Lessons

entertainment industry workers in Macao, HIV testing for pregnant women in Shenzhen and Zhuhai, and the operation of the surveillance system in Guang dong province.

Epidemiologically, therewere both similarities and differences across the cities in the Pearl River Delta Region. While Hong Kong and Macau are witnessing infection through sexual contacts, cities like Guangdong aretroubled by transmission in injection drug users. Shenzhen was somewhere in between, and seemed to be in the process of being transformed from acity with predominantly sexual to IDU-related HIV spread.

For the Mainland, Dr Xu remarked that the action plan formulated by the Central Government had created a useful framework to develop programmes for putting HIV under effective control. He explained the strategy fortargeting drug users, which would involve the introduction of methadone treatment and needles 'social marketing'. He reminded the audience that the new harm reduction strategy was not meant to

replace butincorporate detoxification. Ratherthan seeing detoxification as the only means of drug rehabilitation, the action plan considered it as one of the different tools to reduce drug related harm, alongside methadone, needle access, and outreach. It's hoped that this pragmatic approach would become characterise China's new direction to combating HIV spread. **X**



in & around HongKong (continued)



The officiating guests (Dr Homer Tso, third from the left) at the Opening of the Workshop

The Advisory Council on AIDS Website

www.aca-hk.com

Documents

TWO important reports on HIV/AIDS were released in late November.

The newly released *AIDS Epidemic Update* dated December 2002 can now be downloaded at the website of the Joint United Nations

Programme on HIV/AIDS (www. unaids.org). This is a global report authored by UNAIDS and World Health organisation (WHO). The document covered the HIV situation and patterns in different continents and selected countries. Tables and charts featuring the report's highlights are also available

as powerpoint files on the same web page. The report had updated the situation last published during the International AIDS Conference in Barcelona earlier this year.

On the other hand, the Centers for Disease Control and prevention (CDC) of the US has published in the Mortality and Morbidity Weekly Report (MMWR) its revised recommendations on the use of antiretroviral drugs for preventing mother-to-childHIV transmission. The report can also be viewed at CDC's website www.cdc.gov \$\frac{\mathbf{k}}{\mathbf{k}}\$