

## *.Calendar.*

### **XLIV Meeting of the Advisory Council on AIDS (ACA)**

2:30pm 3 October 2003

### **XXIX Meeting of the Scientific Committee on AIDS (SCA)**

2:30pm 30 September 2003

### **XIII Meeting of the AIDS Prevention and Care Committee (APCC)**

6pm 19 September 2003

### **XI Meeting of Committee on Promoting Acceptance of People living with HIV/AIDS (CPA)**

2:30pm 4 September 2003

## THE 43rd MEETING

THE 43rd meeting of the Advisory Council was originally scheduled for April. It was postponed to 11 July because of the SARS outbreak in the second quarter of the year. The rescheduled meeting featured three main agenda items - (1) the work of the Expert panel on HIV infection of health care workers, (2) HIV infection in haemophiliacs, and (3) evaluation of the universal antenatal HIV testing programme.

1. **The report of the Expert Panel on HIV infection of Health Care workers** was discussed. The Panel was formed in 1994 in response to the incidents centering on the self-disclosure of the HIV status of an infected dentist in Hong Kong. Apart from focusing on quality infection control standards, the Director of Health appointed a Panel to advise attending physicians of HIV infected health care workers on possible need for job modification, in accordance with a set of guidelines formulated by the Advisory Council on AIDS. While acknowledging the importance to integrate the subject of HIV infection in health care workers in the portfolio of professional registration bodies, it was noted that:

- (a) currently there's minimum capacity in the health profession to take up a similar role in the territory;
- (b) the provision of timely technical advice is crucial;
- (c) efforts to involve the participation of respective health profession should be made; and
- (d) the incorporation of the functions of the Panel by the professional bodies remains a long term goal.

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## Departure of Members

TWO veteran members are leaving the Advisory Council on AIDS.

Dr Margaret Chan, Director of Health and currently vice-chairman of the Advisory Council on AIDS, would shortly be leaving Hong Kong to take up the position as the Director for the Protection of Human Environment of the World Health Organisation in Geneva, Switzerland.

In July, Professor Peter Lee submitted his resignation from the Advisory Council because of his busy teaching schedule at the

University of Hong Kong.

Both Dr Chan and Professor Lee have been active members of the Council for years. Professor Lee was first appointed to the Council in 1999 and was reappointed in 2002. He is a professor of psychology at the University of Hong Kong. In his letter he expressed that he "would remain highly interested and eager in continuing with AIDS related work as a concerned individual".

ACA Newsfile wishes Dr Chan and Professor Lee the best in their endeavour to better serve the community in their professional career. ✂

**Council Meeting**

**www.aca-hk.com**  
at your service

## Funding Application

THE next round of application to the **AIDS Trust Fund** should reach the Council before the end of August 2003. There are two types of grants: Project fund and Programme fund.

Project fund is given on a one-off basis. It does not commit the AIDS Trust Fund to additional funding for the project in future. Applications incurring recurrent/on-going expenses will not be considered. Programme fund is provided for longer-term activities. Applications for programme fund should benefit people living with HIV/AIDS or six priority areas, i.e. travellers to and from China, commercial sex in Hong Kong, men who have sex with men, youth, injecting drug users and STD clinic attendees. Recipients of programme

## Nominations to the APCC

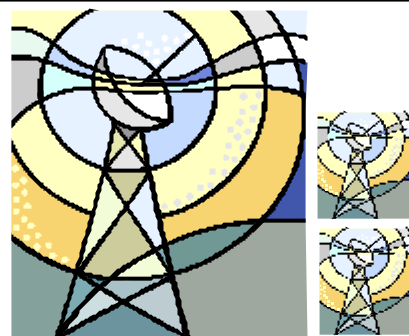
AT the beginning of the current term of office, the **AIDS Prevention and Care Committee** had resolved to invite as members persons who represent and reflect the interest of seven communities. The Hong Kong Coalition of AIDS Services Organisations (HKCASO) was asked to make the recommendations. In the last week of June, HKCASO nominated three persons to the Committee, from two of the communities: MSM (men having sex with men), HIV/AIDS patients, and women.

The seven communities proposed by the Committee are: MSM, HIV/AIDS patients, cross-border travellers, injection drug users, youth, sex workers and clients, and patients with sexually transmitted infections (STIs). **⌘**

fund are not normally eligible for project fund.

The AIDS Trust Fund is now one major funding agency on community-based activities on HIV prevention and care. Further information about the Fund can be available from the website [www.info.gov.hk/atf](http://www.info.gov.hk/atf) **⌘**

## Council News



### Reported HIV/AIDS Statistics (updated 31 March 2003)

		HIV		AIDS	
		total / Q1 2003		total / Q1 2003	
<b>Gender</b>	male	1675	38	544	12
	female	392	14	83	2
<b>Ethnicity</b>	Chinese	1433	34	490	12
	non-Chinese	634	18	137	2
<b>Transmission</b>	heterosexual	1178	29	415	9
	homosexual	395	11	109	4
	bisexual	94	0	30	0
	injecting drug use	54	0	10	0
	blood/bl products	68	0	20	1
	perinatal	15	0	6	0
	undetermined	263	12	37	0
<b>TOTAL</b>		<b>2067</b>	<b>52</b>	<b>627</b>	<b>14</b>

**NOTE:**

The "total" refers to the cumulative total number reported since 1984, under the voluntary HIV/AIDS Reporting System. Q1 refers to the period January to March 2003. 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

### Message from Tadamitsu KISHIMOTO, Chair of the 7th ICAAP Local Organizing Committee

1 July 2003, on internet

ON behalf of the Local Organizing Committee of the 7th International Congress on AIDS in Asia and the Pacific (7th ICAAP), I should like to express my sincere gratitude for your continued attention and support to the Congress. I am afraid that we have to make a regrettable announcement concerning the 7th ICAAP in this letter.

It was decided that the 7th ICAAP, which has been slated for November this year, would be postponed until the year 2005. LOC submitted a proposal to put off the Congress for deliberation to the sponsors of the 7th ICAAP; AIDS Society of Asia and the Pacific (ASAP) and Joint United Nations Programme on HIV/AIDS (UNAIDS), and also to the Seven Sisters, co-sponsoring organizations of the Congress. On June 27, we have obtained the final approval from ASAP, the custodian body of ICAAP.

Our proposal for postponement was met by some strong critical comments, stating that it would be a grave loss in our effort to resolve the issue of HIV/AIDS in Asia and the Pacific, and LOC received a lot of calls for organizing the Congress as scheduled. LOC held a clear and deep understanding of such issues involved with the postponement, nevertheless, it had no choice but to make the proposal. We are very much obliged that our proposal was finally accepted despite the complications it involves.

This inevitable decision to postpone the 7th ICAAP was made due to the high possibility of re-emergence of SARS as foreseen by relevant specialists, which could be rampant on top of the influenza epidemic that prevailed every winter in Japan. The fact made us very much concerned about a potential turmoil in the Congress and the surrounding community.

In addition, an exceptional case of significant economic damage caused by SARS in Japan occurred unfortunately in the neighbouring areas of the hosting city, Kobe. Citizens of Kobe City, who were earnestly making preparations to welcome the 7th ICAAP, came to be very much anxious about an infectious disease yet to be highly medically identified, and the potential harm it could do to the community



### THE Second China AIDS & STD Conference 第二屆中國 艾滋病性病防治大會

was originally scheduled for 27 to 30 October, to be held in the city of Nanjing, with the deadline for abstract submission set on 31 August.

The Council Secretariat learned of the postponement of the Conference in mid-July. A new date has yet to be fixed. Interested members should keep

## Postponement of National Conference

an eye on announcements made on the webpage of the National AIDS/STD Center for the Chinese Center for Disease Prevention and Control [www.chinaids.org.cn](http://www.chinaids.org.cn) &



## Adherence highlighted

**"Failure to take prescribed medicine for chronic diseases is a massive, worldwide problem"** - the message stood out clearly in a press release of the World Health Organisation on 1 July 2003.

The WHO is concerned about poor adherence to long-term treatment for conditions including HIV/AIDS. The adherence rates ranged between 37% to 83% in a number of reviews. It's noted that non-communicable diseases, mental health disorders, HIV/AIDS and tuberculosis represented 54% of the global burden of illness in 2001, and are expected to exceed 65% in 2020.

Interested members may wish to download the WHO report: Adherence to long-term therapies. Evidence for Action, at [www.who.int/chronic\\_conditions/adherence-report/en](http://www.who.int/chronic_conditions/adherence-report/en) &

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## Council Meeting

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2. Following the report of the **New York Times** of the "dumping" of unsafe clotting factor concentrates in Asian countries, the Council had resolved to discuss the issue at the July meeting. In concluding the discussion, The Council:

- (a) noted the media report on the alleged unethical distribution of non heat-treated clotting factor concentrates in the early 1980s when new safer alternative had just begun to be available;
- (b) reckoned that joining the class action lawsuit filed by an American law firm is a personal option, the decision of which would need to be

considered individually by weighing the pros and cons unique to one's circumstances; it is understood that the Government would provide the information for individuals upon request;

- (c) considered that as a priority, the unmet medical and psychosocial needs of HIV infected haemophiliacs and their families should be appropriately attended to.

3. In an effort to prevent mother-to-child HIV transmission, the Council proposed the introduction of **universal antenatal HIV testing**, in Hong Kong. The programme was

launched in September 2001. The Council examined an evaluation report coordinated by the Scientific Committee on AIDS, which concluded with nine recommendations, ranging from the continued monitoring of the programme, emphasis on the development of practice protocols for the management of children born to HIV infected mothers, possible use of rapid tests to supplement the current programme, and means to enhance effectiveness of universal antenatal HIV testing. It was agreed that there's also the need to increase the coverage rate in the private sector.

It was noted that the evaluation report would be published for the reference of all who are working on the subject and those concerned with the perinatal transmission of HIV. ⚡

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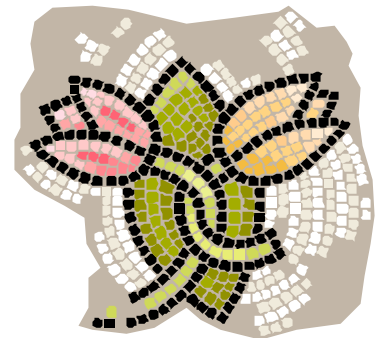
## About 7th ICAAP

due to the incident. Their reaction is understandable in the context that people in this area have not completely recovered from the economic damage caused by the great earthquake hit the area in 1995, which claimed 5000 human lives.

We are in a critical phase with regard to the prevention and treatment of HIV/AIDS in Asian and Pacific Regions, and it is evident that the postponement of ICAAP at this stage could cause a significant loss in our efforts. LOC, together with the sponsors and co-sponsors of the 7th ICAAP, recognizes the fact very clearly. The decision was not an easy one,

and LOC has thoroughly examined every possible countermeasure against SARS referring to WHO guideline and other pertinent information in order to make the good use of our preparatory works and hold the Congress as scheduled. We, however, also have responsibilities to adopt the most prudent course to relieve the citizens of the hosting city who are supporting the Congress, and convince them to organize the Congress successfully. LOC came to the reluctant conclusion that we could not fulfil such responsibility in the given time before the scheduled Congress dates with such regrettably limited political power and capacity.

LOC deeply regrets that this unfortunate postponement of the 7th



ICAAP must be announced to those who have been concerned with and supporting the Congress, but we cordially ask for your kind understanding in the matter. LOC is determined to strive to contribute to the future development of HIV/AIDS community in Asia and the Pacific, including the success of the Bangkok Congress in 2004, and committed to make renewed endeavours toward the success of the 7th ICAAP in 2005. We very much appreciate your continued attention and support to the Congress. ⚡