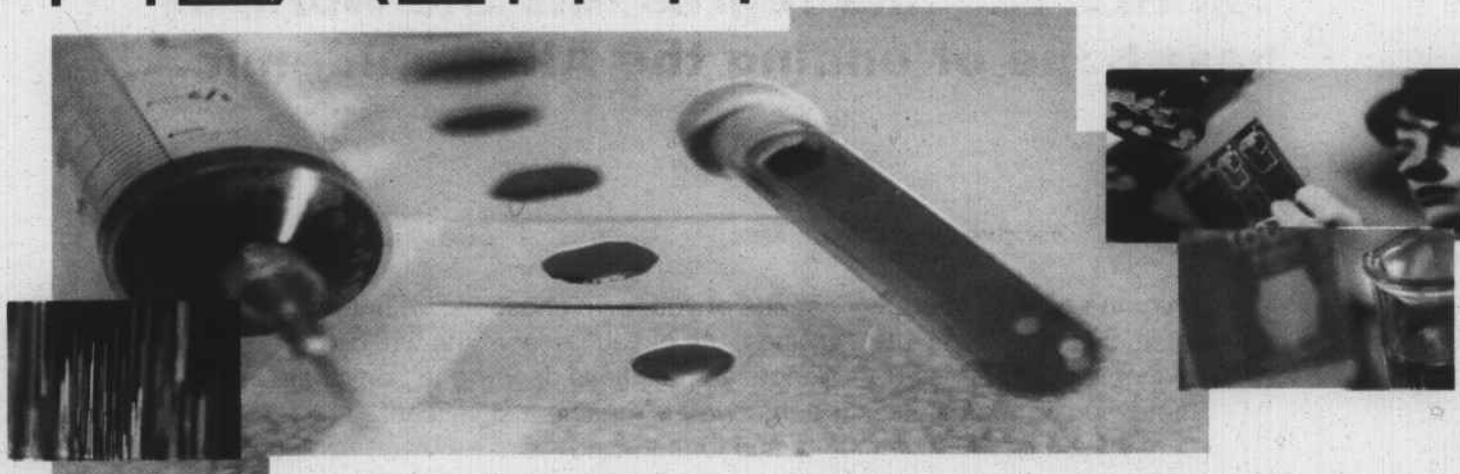


AIDS ALIVE AND HEALTHY

By Kim Dear



Eight years ago scientists researching a cure for AIDS came up with the dam built to manage the most vicious life threatening virus of our time. Many members of the HIV-positive community thought that the “gleaming dam” would lead to the end of AIDS.

Those who partook in the cutting edge of HIV science felt a resurgence of life and energy. However in 1999, patients prescribing to the “new miracle drugs” began to show signs of rejection. Nothing worked against the mutant microbes in their blood.

The grand experiment with combination therapies called Highly Active Anti-Retroviral Therapy, or HAART had come to a screeching halt. And though there never was a promise of a cure, the reality is that the cocktails that HIV positive patients took served as a temporary lifeline.

Treatments consist of more than 250 combinations of three or more anti-HIV drugs that were first introduced in January 1996 and popularized that summer. For two years, this dam blocked the river to death. But now the dam has sprouted leaks.

The reversal from where HAART was headed in 1996 is devastating. The winning Merck protease inhibitor indinavir in combination with older drugs AZT and ddI seemed to be the new “miracle wonder”.

The findings of New York’s David Ho, Alabama’s Dr. Saag and Emilio Emimi of the Merck Research Laboratories, West Point, Pennsylvania, indicated “zero detectable” HIVs in blood actually equaled to no viruses in the bloodstream. Elite HIV researchers talked of “eradication” and envisioned the disappearance of HIV in just a few years.

The changing statistics from 1996 to 1998 showed that the national death rates fell a breathtaking 47 percent supported the new sense of hope.

Then, as abruptly as it had come, hope vanished as the science of AIDS itself began to backfire. HIV was not eradicating. Instead it was hiding. It was mutating.

Peter Young, of HIV therapeutic developments for Glaxo Wellcome pharmaceuticals corporation, stated that he feels that we’re as far away from cures as we are from vaccines.

Meanwhile, for 95 per cent of the 33.4 million people living with HIV, the \$10,000 to \$60,000 annual HAART price tag is out of reach. In Africa’s hardest hit countries, where 20 to 26 percent of all men and women between fifteen to forty-nine years old are HIV positive, the per capita health-care spending averages ten dollars. So they’re dying daily and literally wiping out entire townships.

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