



NEWS

ALL-PARTY PARLIAMENTARY
GROUP ON AIDS



Summer 2009

Drugs, sex and R&D:

APPG enquiry into making the right HIV treatments, cheaper.

Action must be taken now, to avoid disaster in the developing world as people with HIV become resistant to basic treatments and need medicines that are at least six times as expensive to stay alive. This will be one of the key conclusions of an APPG on AIDS report due to be published this summer.

The report, based on written and verbal evidence from UN institutions, NGOs, foundations and pharmaceutical companies in the UK and around the world, will also point to the urgent need to bring the cost of paediatric HIV treatment down in order to treat the hundreds of thousands of children with HIV who are currently not on treatment.

Whilst the price of some existing drugs needs to come down, there is also a need for

research and development into new medicines, particularly fixed dose combinations (several medicines in one pill) for children. These combined pills are easier to take properly than a series of different pills each day.

Lowering the price of drugs whilst ensuring incentives for continuing research, which is expensive, is a challenge, which **David Borrow MP**, chair of the APPG promises the report will not duck:

“Companies and Governments... need to be honest and ambitious about the public health impact of their decisions.”
David Borrow MP

“Business as normal is not an option.” he said. “Companies and Governments, including developing country governments need to

re-assess the way they are buying and selling medicines and investing in research and development. They need to be honest and ambitious about the public health impact of their decisions. Without change all our work on getting HIV under control and getting people treated will be lost.”



The APPG report will be launched at a reception on July 14th at 5pm in the CPA Room. All MPs, Peers and researchers are welcome.

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HIV graffiti tip of discrimination iceberg

Living with HIV in the UK is sometimes compared to living with diabetes *writes Veronica Oakeshott policy adviser to the APPG*. Both are serious conditions which require treatment daily and it is possible to live long lives with both. But at a recent meeting I attended, the difference between the two was brought home. An HIV+ speaker was describing the campaign of hate meted out against her by neighbours when it became public she had HIV. She had 'HIV' graffitied

across her car. 'Nobody would ever write diabetes' she said.

HIV discrimination is rife. A recent Sigma Research survey of 300 HIV positive people found 19% had experienced discrimination from healthcare professionals. Some experienced outright denial of services (dentists were particularly bad), others faced hostile comments and inappropriate queries about how they acquired HIV.

Such ill-informed behaviour is particularly worrying when it is aimed at children.

Each year there are several cases of children being denied school places because they are HIV positive. This is illegal under the Disability Discrimination Act, but parents rarely want to fight such cases.

HIV is a medical condition, not a moral judgement, and the Government has a responsibility to ensure its public servants, whether doctors, teachers or dentists, treat it as such. Until they do, graffiti is just the tip of a discrimination iceberg.

comment

Patent pools hailed as solution for generating new medicines



Sign EDM 1553 calling for companies to sign up to the Patent Pool.

What is a patent pool and how does it work?

A patent pool is a scheme where patent owners put their patents in a 'pool' and allow others to access them in exchange for a payment.

Patent pools have already been used to drive forward innovation in different fields of technology

eg. MP3 players.

So the principle is sharing knowledge, whilst still rewarding the inventors?

Yes, that is the beauty of it. It's not a matter of donating patents – the patent owners who collaborate with the pool get royalties from those who use them.

What would it mean for HIV medicines?

We desperately need the development of new drugs that combine multiple compounds into one pill. These are easier to take for people living with AIDS, especially children.

But when you want to

combine three separate products into one pill, you may have to deal with three patent owners. This makes an agreement very difficult. The patent pool allows you to do it in a 'one-stop shop'.

Would it make drugs cheaper?

A patent pool would help bring prices down by speeding up the development of generic competition (see graph on back page).

Today, when generic producers are faced with a patent, they have to wait 20 years for it to run out. A patent pool can speed that up, because as soon as the patent is in the pool, generic companies can pay

the royalties and develop generic versions.

What does DFID think?

DFID is supportive. "Our aim is to reduce the cost of HIV/AIDS drugs by £50 million a year over the next few years. Only this week, I wrote to UNITAID asking it to set out a timetable for the launch of a patent poolthe time has now come for other pharmacological companies to respond positively to this initiative and join forces so that we can make the contribution to driving down prices and improving access to HIV/AIDS drugs." **Ivan Lewis MP, DFID 25/3/09**

If not for you...
PLEASE
...do it for me!



Image by Landara De-lanteuil, Harlow College for Durexhibit

Condoms may be advertised before 9pm

The advertising regulator is considering whether adverts for condoms should be allowed before 9pm.

The Broadcast Committee of Advertising Practice (BCAP) consultation follows a recommendation from the Independent Advisory Group on Sexual Health and HIV that the current ban on

condom adverts before 9pm should be relaxed.

It has already elicited strong views from MPs on either side of the debate. Vice Chair of the APPG, **Evan Harris MP** said "The idea that pregnancy advice, family planning and condom adverts should not appear before the 9pm watershed is as ridiculous as

the former ban on tampon adverts, which have been shown not to offend despite the outcry at the time they were allowed."

A relaxation of current rules is supported by HIV and sexual health charities including the National AIDS Trust, Terence Higgins Trust and Brook.

Parliamentarian charity focus



Baroness Masham: Patron of CWAC & Officer of AIDS APPG

I am very pleased to be associated with The Children with AIDS Charity.

Often children's needs are neglected, and there is a shortage of services for children infected and affected by HIV.

The charity was registered in 1993. Rebecca Handel and her daughter Bonnie, who was also infected, were being treated

Children with AIDS Charity (CWAC)

at St. Mary's Hospital, Paddington. Rebecca was infected through a blood transfusion in her second pregnancy, before blood was screened for the virus.

Rebecca and the Paediatric team at St. Mary's, founded the Charity to help with the impact that HIV has on children and their families. Both Rebecca and Bonnie died, but the

charity goes on.

CWAC is at the forefront of the fight against paediatric HIV/AIDS. The Education Programme has initiated ground-breaking projects, to stop the spread of HIV and the Hardship Project provides parents and children with essential items, such as warm clothing. This charity needs support.

Should there be more HIV testing in your constituency? **High prevalence PCTs**

There are about 25,000 people in the UK who have HIV and who don't know it. That is nearly one in three of everyone infected.

The Health Protection Agency has recommended that PCTs with an HIV prevalence of 1 in 500 or more, consider offering a test to everyone newly registering with a GP. Your PCT falls into that category if it is in the list down the right hand side of this page.

The Department of Health is working to reduce

undiagnosed HIV, which as well as being a serious issue for the individual concerned, is also a public health risk. In areas with high undiagnosed HIV, there is a greater risk of onward transmission.

Levels of HIV testing across the country vary, with some PCTs taking a pro-active approach and others quietly deciding it is not an issue for them.

"HIV and sexual health can be neglected at a local level because patient activ-

ism is harder when it is about topics like HIV. When funding gets cut, people are not always willing or able to speak out." said former Health Secretary, **Lord Norman Fowler**.

The APPG on AIDS is calling on MPs to write to their PCTs or visit them this summer, to ask what they are doing to encourage more people to take an HIV test in their area.

There is an event on this issue at 12.30 on 24th June in the Jubilee Room.

- Barking And Dagenham PCT
- Barnet PCT
- Blackpool PCT
- Bournemouth & Poole PCT
- Brent Teaching PCT
- Brighton And Hove City PCT
- Camden PCT
- City And Hackney Teaching PCT
- Croydon PCT
- Ealing PCT
- Enfield PCT
- Greenwich Teaching PCT
- Hammersmith And Fulham PCT
- Haringey Teaching PCT
- Heart of Birmingham Teaching PCT
- Hillingdon PCT
- Hounslow PCT
- Islington PCT
- Kensington And Chelsea PCT
- Lambeth PCT
- Leicester City PCT
- Lewisham PCT
- Luton PCT
- Manchester PCT
- Newham PCT
- Nottingham City PCT
- Redbridge PCT
- Salford PCT
- Southwark PCT
- Sutton And Merton PCT
- Tower Hamlets PCT
- Waltham Forest PCT
- Wandsworth PCT
- Westminster PCT

MPs call for curbs on pre-job offer health questions.

The Work and Pensions Select Committee is calling for new rules around pre-employment health questionnaires, to help crack down on discrimination against people with stigmatised conditions.

The calls come after NAT (the National AIDS Trust) gave evidence to the Committee about how difficult it is for people with HIV to find employment even if they are perfectly able to work.

HIV and mental health charities offer countless examples of job applicants

who get through initial interviews and are then asked to fill out health questionnaires. Having done so, their potential employers suddenly decide they are not up to the job.

The Select Committee is proposing that 'questions should only be permitted after a conditional/ provisional job offer has been made.'

The Committee recognises that in some cases, a person's health may be relevant to their ability to do their job, and if reason-

able adjustments for disability are not possible, a job offer could be withdrawn. However, unlike the current system where health issues are mixed up with other considerations, the process would be transparent. Where there are disagreements further consideration or mediation would be possible. This system is used in America.

MPs and Peers will be calling for the changes as part of the Equality Bill. EDM 1547 also calls for these changes.

Global Fund funding crisis

The Global Fund for AIDS, TB and Malaria is facing a \$4 billion shortfall next year. Its Director, Michel Kazatchkine said at a meeting in Bangkok, it was facing 'financial crisis'.

To date, the Fund has committed \$15 billion in grants to 140 countries, saving around 2.5 million people from diseases.

MPs have praised DFID for its long-term commitment to the Fund (£1bn between 2008 and 2011) but are now asking Ministers to help bridge the gap.

Doug Naysmith and **Julie Morgan** (pictured right at a Global Fund meeting) went with APPG Chair, **David Borrow**, to **Douglas Alexander**, the Secretary of



State, to ask for further DFID support.

The APPG on AIDS: Keeping HIV/AIDS on the political agenda

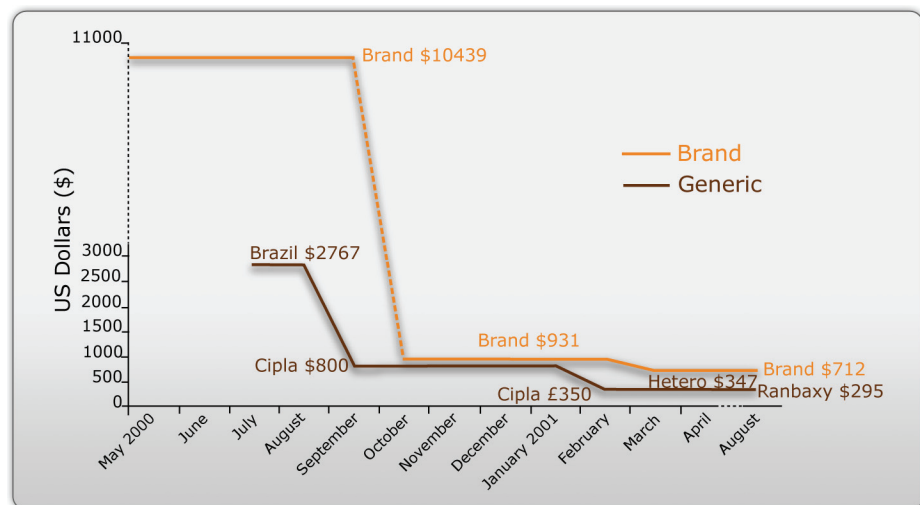
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Members of The All Party Parliamentary Group on AIDS believe that HIV/AIDS is one of the most serious threats facing the world in the 21st century and that as Parliamentarians we should play our part in addressing the epidemic. At home in the UK, where around 77, 000 people are infected with HIV, we believe that careful policy, respectful of human rights, is critical to tackling the disease and the serious social exclusion that can go along with it. Abroad, where HIV infection rates run as high as 26% and people die every day, we believe we have a responsibility to help.

If you would like to help keep HIV/AIDS on the political agenda or find out about the implications of policy debates for people living with HIV, please contact David Borrow MP, Chairman of the Group or Veronica Oakeshott, its Policy Adviser.

The impact of competition on the price of first-line drugs



Source: www.avert.org

Executive of the AIDS APPG

Chair: David Borrow MP

Vice Chairs:

Neil Gerrard MP

Francis Maude MP

Sandra Gidley MP

Jeremy Hunt MP

Evan Harris MP

Baroness Masham

Lord Fowler

Baroness Northover

No money for Foreign Office commitment on HIV in middle income countries.

The Government's HIV AIDS strategy, launched last summer, puts the Foreign Office in charge of HIV efforts in middle income countries.

However, an answer to a recent parliamentary question reveals the FCO has allocated no extra funding to support this commitment. Chair of the APPG, David Borrow MP, said:

'In middle income countries barriers to HIV prevention are often not financial but political – many countries have laws

that drive men who have sex with men, or drug users underground - and so it is right that diplomacy rather than aid is key to our HIV strategy. However, FCO staff need training on the issues and some funding is important to help facilitate such diplomacy.'

Some of the highest rates of HIV in the world are found in countries classified as middle income, such as Botswana and South Africa. Parts of Eastern Europe and Central Asia also have rapidly expanding epidemics.

UPCOMING EVENTS

1st June: HIV science update for non-scientists

24th June: Testing local leadership on HIV—event for MPs in high prevalence areas 12.30pm, Jubilee Room

1st July: APPG AGM, 1pm, Room M, PCH

14th July: launch of the Treatment Time-bomb Report ,5pm, CPA room

Events are open to all parliamentarians, otherwise by invitation only.

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