



Politics must move mainstream on AIDS

Medical journals have a responsibility to put all sides of important questions to readers. However, there comes a time when continuing to pander to tangential viewpoints serves no useful purpose and may indeed be harmful. At an early stage of the propagation of the beliefs of the AIDS dissidents it could be argued that those supporting establishment views should be informed of the dissidents' beliefs in order to test their hypotheses, or blow them out of the water. That stage was reached some time ago when the small group of dissidents had spent their tolerance capital for space in mainstream medical journals. With the medical and scientific facts so clearly demonstrated, printing their repetitive arguments detracts from the main task of dealing with the pandemic. It also takes time and effort repeatedly to have to refute outlandish claims. The SAMJ therefore does not accept such material.

Despite the outstanding contributions of South African scientists, clinicians, NGOs and others, our record in addressing the HIV/AIDS pandemic is not one of the many things that South Africans can be proud of. While the whole of society has a role to play in combating the pandemic, the main missing ingredient is clear and unambiguous political leadership. What is the leadership we so desperately need?

Firstly, we need a clear acknowledgment that real people and not statistics suffer from HIV/AIDS. It does not provide comfort if high-profile people die early of vaguely undefined illnesses, clearly resembling AIDS, while vehemently denying the existence thereof, and our political leaders remain silent. This denial is clearly understood by an intelligent electorate, who deserve better. Many of them have lost loved ones to the pandemic and follow the example of their leaders by embracing the tyranny of denial and silence. Effective treatment and prevention will only be possible when affected people know and acknowledge that they have the disease. Several courageous citizens have taken the lead in this respect. Through his public admissions of his positive HIV status Judge Edwin Cameron has provided a beacon of enlightenment and hope for the community. Taking a different tack Mr Zackie Achmat of the Treatment Active Campaign (TAC) has highlighted the plight of the majority living with HIV/AIDS by personally refusing medication until it is more readily available to the general population.

Secondly, politicians must contribute to the understanding and destigmatisation of HIV/AIDS. This is a condition that affects ordinary members of society at all social levels. People indulging in normal human activities largely cause it and many of those affected are innocent victims. Those affected have a desperate need for love and understanding. It is therefore tragic that many are abandoned by friends and family once their positive status is known. That some have been killed for disclosing their positive status is tragic and barbaric and harks back to the times of burning of witches.

Thirdly, deracialise HIV/AIDS. The pandemic does not

recognise ethnic boundaries. That many white people suffer from a misconception that their lack of dermal pigment somehow protects them, and some black people claim that it is all a white or pharmaceutical industry plot, serves to detract from the truth: we are all vulnerable, and the pandemic affects us all.

Fourthly, value and heed our experts and professionals. South Africa is fortunate to have a body of dedicated medical scientists and clinicians who know and understand HIV/AIDS. Their advice and their role in the measurement and management of the pandemic is crucial. That important reports emanating from bodies such as the Medical Research Council are delayed and fudged when released serves to discourage such key people. They also often feel that their contributions on governmental advisory committees are either unappreciated or ignored. Persecution by the health authorities of some doctors who have put their patients first by supporting the provision of antiretroviral agents in cases of rape and other situations has sinister similarities to the apartheid era treatment of doctors such as Dr Wendy Orr, who incurred the wrath of the authorities for reporting injuries of prisoners as a result of police detention. Winning nations celebrate, support and reward their experts and professionals!

Fifthly, abandon the dissidents and the daft. Human minds are programmed to have beliefs, but regrettably beliefs are often totally irrational. An example of a misplaced belief is that rhino horn can enhance sexual performance — consuming rhino horn is in fact akin to chewing our nails! This belief literally endangers the survival of rhino as a species through lucrative poaching. The beliefs of the HIV/AIDS dissidents may be placed in the same category. The human brain is also capable of rational thought and of problem solving. Through this process of questioning and of providing experimental proof the world has overwhelmingly understood and accepted the cause and effects of the HIV. Our world standing is severely dented when continued credibility is given to dissidents such as Roberto Giraldo, who was invited to address the Southern African Development Community health ministers in January 2003. More serious still is the ambiguous message given to our electorate. If we do not abandon the daft we are likely to be classified with them.

HIV/AIDS is the mainstream disease of our times. It behoves our politicians to help our people navigate these difficult waters rather than to divert them into dead-end tributaries.

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