

Natalia, 330 Langalibalele Street, Pietermaritzburg, 3201 Private Bag X 9051, Pietermaritzburg, 3200

Tel.: 033- 395 2220, Fax.: 033-845 0141 or 033 342 0429

Email.:mbali.thusi@kznhealth.gov.za www.kznhealth.gov.za

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KZN HAS HIGHEST NUMBER OF PEOPLE ON ARV TREATMENT

In May 2004 the KwaZulu-Natal Department of Health kick-started the ARV rollout programme in eight hospitals with 100 patients receiving the life prolonging drugs. The number of people receiving the lifesaving drugs has continued to grow steadily. The recorded number of people on this antiretroviral treatment (ART) programme currently stands at over 54 000 making it the highest in the country, if not in the world.

The MEC for Health in KwaZulu-Natal Mrs. Peggy Nkonyeni says through this programme the department has made great strides in making antiretroviral treatment accessible to thousands of people including children in the province, "When we first started dispensing ARV's in May 2004 there were 100 people on the programme and there were only eight hospitals which were accredited to administer ARV's. We now have 60 accredited sites that dispense these drugs. This is part of the comprehensive plan for care, management and treatment of HIV and AIDS. We take pride in this great achievement," says the MEC.

King Edward VIII, Mahatma Gandhi Memorial, EG Usher Memorial, Church of Scotland, Ngwelezana, Stanger and Benedictine hospitals were the first hospitals who were given accreditation status and were ready to embark on the rollout programme.

Prior to this the KZN Department of Health did not have any public health facility providing antiretroviral treatment (ART) although most facilities were offering voluntary counselling and testing, ART prophylaxis for pregnant women, occupational exposure and non-occupational exposure as well as management of opportunistic infections. The initial start of the programme did not only pose a daunting task for the department, but it also brought a ray of hope to those living with HIV and AIDS in the province. Only people with AIDS and/or a CD4 count less than 200 are eligible for ART. People who are HIV positive but do not require treatment and those who are negative receive ongoing counselling, psychosocial support, healthy lifestyles, and nutritional services.

The comprehensive plan can be viewed in the following stages:

UNINFECTED PEOPLE

Under this group of people the plan puts in place educational campaigns, services for the screening and treatment of Sexually Transmitted Infections, Voluntary Counselling and Testing, Encouragement of Behavioural Change etc, nutritional services, etc.

EXPOSED PEOPLE

Post Exposure Prophylaxis (PEP) is given to individuals who have been exposed to HIV and AIDS for example, sexual assault victims, occupational exposure, etc. Prevention of Mother to Child Transmission (PMTCT) programme to pregnant women. Treatment of STI's and VCT services is also offered.

PEOPLE LIVING WITH HIV

Treatment of opportunistic infections, diagnosis, and treatment of other related illnesses is done at this stage as well as psycho-social and nutritional services are offered.

PEOPLE LIVING WITH AIDS

Antiretroviral therapy is provided at designated ART Service Points (hospitals and clinics) at this stage as well as psycho-social support through counselling other support systems e.g. home based carers. Currently, the down referral of all stable ART patients to clinics which are nearer to their homes is being done. This will assist patients to comply with treatment as they do not have to spend a lot of money travelling to hospitals, as some are unemployed and end up not being able to collect their medicines because of travel costs, and it will also improve the public access to this life prolonging treatment as most clincs are within walking distance and people can also access other services available to them at these clinics. Treatment of opportunistic infections and other related illnesses is also done and macro nutrients issued to clients.

TERMINALLY ILL

Antiretroviral therapy, home based care, palliative care, psycho-social and spiritual support is offered to these people.

These facilities are located throughout all the 11 health districts and provide equitable access to people living in both urban and rural settings. The service caters for adults, children and pregnant women.

This programme has come a long way when looking at the hand full of sites, which were accredited to dispense ARV's when the programme first started. Infrastructure development, staff recruitment and capacity building and the development and implementation of tools to monitor and evaluate and plan activities are some of the challenges that are currently evident and it should always be noted that these challenges face the entire country not just KZN alone. There are strategic plants to overcome these challenges such as the establishment of relationships with relevant partners and non-governmental organisations to help alleviate the impact of these challenges. The hallmarks of the programme are the team-based approach to care, service provision that takes into account the holistic nature of health, patient empowerment to promote informed decision making and the establishment of support groups to provide ongoing care.

As HIV is chronic, progressive infection consisting of different clinical stages, not all infected persons require ART. In the early stages a person may have a good

