

AIDS: BASIC FACTS SUMMARY SHEET

Definitions

HIV -Human Immunodeficiency Virus: the cause of the infection that can lead to AIDS.

HIV+ve -HIV Antibody Positive, also described as *Seropositive*. A person's blood contains ineffective antibodies formed on average 2-3 mths after HIV infection.

ARC -Aids Related Complex: some HIV infected get minor symptoms such as swollen lymph glands, weight loss, sweating, or minor infections. High risk of going on to get AIDS.

AIDS -Acquired Immune Deficiency Syndrome: immune system so damaged by HIV that susceptible to range of infections, in particular pneumocystis carinii pneumonia; also Kaposi's sarcoma (a skin cancer). Other symptoms: diarrhoea, profound fatigue, weight loss, swollen lymph glands, night sweats, and sometimes dementia. AIDS defined as existence of at least 2 of the major signs with 1 minor one. Currently thought up to 30% HIV infected will develop AIDS on average 5 yrs after infection; but for planning purposes prudent to assume *majority* will get AIDS. Average time from diagnosis of AIDS to death rather more than 1 year.

Transmission of HIV infection

Blood, Semen and Vaginal fluids main vehicles of transmission. Three current routes in UK are:

- penetrative homosexual and heterosexual intercourse;
- shared injecting equipment; and
- an infected mother to her baby before or during birth (and possibly through breast milk).

HIV not shown to be transmitted through:

saliva; tears; swimming pools; animals; insects; shared utensils; touching; coughing; toilet seats; or normal social contact.

Blood Donations

All donations screened. Risk groups asked not to give blood. Blood products given additional treatment. Organ & tissue donations screened too. Only minute risk remains in UK.

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Containing the spread

Main message must be to avoid high risk behaviour. Can be achieved by:

* not abusing drugs; if you can't stop then don't inject - *never share* equipment;

* chastity or monogamy for you *and* your partner - if you can't accept this then always use a condom and reduce the number of your partners.

Statistics

AIDS cases:

- 750 reported by end of Apr 87;
- 420 have already died.

Actual no. higher because of late reporting. Perhaps about 1000 now. UK cases doubling every 10 months; US every 13 months. Three-quarters in NW, NE & SE Thames regions. Over 90% in risk groups.

HIV cases:

- 4,471 E,W&NI by end Mar 87;
- 1,100 Scot. by end Feb 86.

Actual no. higher, poss 30-40,000. nearly half in 3 main Thames regions. Over 90% in risk groups.

Provisional projections:

	AIDS cases	
	new	total
1987	1,300	2,300
1988	3,000	5,300

Perhaps 4,000 deaths by 1990 and 5-10,000 by 1992. Not sensible to project new HIV cases - we hope behaviour will be modified. But currently poss 25-50 new cases *daily* (av. 180 +ve test results/mnth).

Spending

- * £20m committed to public education.
- * £2.8m up to 1987 on research.
- * £3m allocated for 1987-8 research plus additional £14.5m to MRC for directed research over next 3 years.
- * £4.6m aid from ODA for 1987-8.
- * £3m central allocations 1986-7.
- * £7m central allocations 1987-8.
- * £3.8m est. hospital care 1986-7.
- * £13m est. hospital care 1987-8.

AIDS: ISSUES SUMMARY SHEETS (2 pages)

AIDS (Control) Bill Sponsored by Gavin Strang. Completed passage through Commons, now in Lords. Full Government support. Imposes duty on every HA to produce annual detailed reports on AIDS in its area, and on how it is tackling the problem.

Armed Forces HEC leaflet with special service insert issued to all personnel. High priority given to informing personnel. [NOT for use - 1 AIDS & 5 HIV cases recorded].

Blood Supply All UK donations tested. Those who may be exposed to particular risk asked not to donate. Minimal chance of infection. Blood products screened and heat treated. No need for private blood banks which store and freeze your own blood.

Brothels Legalisation unlikely to prevent spread. Infected prostitutes still likely to work illegally. Could instil false sense of security in clients.

Condoms Experts agree the use of condoms helps the reduce risk of transmission - a central theme in the public education campaign. Reject arguments that condoms should be universally free: already free through family planning clinics and some STD clinics, widely and cheaply available commercially. Govt. monitoring position and keeping options open.

Confidentiality Vital that patients can be completely assured of confidential consultation with their doctor. Co-operation of patients needed. Alternative could drive patients underground and/or prevent them from seeking medical help.

Dental Treatment No risk if dentist following guidelines. FPCs asked to ensure dentists have proper equipment. FPCs job to find a dentist willing to give NHS treatment.

Employment The Department of Employment leaflet has been issued to all major employers. Transmission does not occur during normal work activities. Occupational risk only in the case of the health care sector, and there it is minimal if normal infection control procedures followed. Specific guidance issued to health care workers, only one confirmed case of contraction of HIV in UK through needle accident (4 world-wide). No restrictions on employment of asymptomatic HIV+ves recommended. HIV+ve not an adequate cause for dismissal from employment.

Haemophiliacs Greatest sympathy for those affected. It was not until knowledge grew, that safe blood products could be made and used. There has never been a general State scheme to compensate unavoidable, adverse effects from medical procedures. If negligence then can take action through courts.

Immigration General powers available to exclude people judged to be risk to public health or who do not have financial resources to pay for private treatment. Currently considering how these powers should be applied in relation to AIDS. [See also section on Screening].

Insurance One can understand the cautious approach by Insurers. They have to assess risk and have duty to existing policy holders. Not sure that insurers should shut their eyes to positive test results. Other conditions command high premiums. Do not accept that Govt. should be insurer of last resort. Social security benefits available subject to usual qualifying conditions.

Intravenous drug abusers Contaminated needles are a major source of HIV spread, which also leads to birth of HIV infected babies in some instances. Main message: give up drugs, if you can't give them up then don't inject and *never share*. Extra £1m 1987-8 for more counselling to enable drug misuse services to reach more misusers and provide counselling on AIDS. Introducing 12 pilot needle exchange schemes which will be monitored and evaluated (£126,000 made available for evaluation).

Moral issues AIDS is a serious public health problem and Govt. must take practical steps to reduce spread. Discussions are taking place with church leaders. The Govt's message of prudence is complementary to Church teachings.

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New strains of HIV All strains of HIV apparently detectable by current test. Recently, LAV2 has been identified in a very few patients - none in UK: new test will be required. Yet another new virus (HTLV IV) may be identical to LAV 2.

Notification We see no benefit in compulsory notification. A voluntary system in operation since 1982. Statutory system would probably not produce as accurate reporting. STDs are not notified at present because confidentiality and co-operation re essential. Also HIV can be present for a number of years before symptoms develop, so contact tracing can be very difficult.

Origins of HIV All sorts of rumours from US/Soviet laboratories to space. The most plausible explanation so far is that it originated from natural mutation of virus endemic in monkeys in central Africa. The key point not where it comes from but what we do about it.

Predictions Small scientific conference held 23 March of leading international experts to look at ways of improving knowledge of spread of disease. Group announced by SofS chaired by Dr Joe Smith, Director of Public Health Laboratory Service, to look at ways of improving data.

Prisons 45 HIV cases & nil AIDS cases recorded (at 24 Feb) [previously 1 AIDS case but died] out of population of 47,000 in E&W. Governors and prison MOs have received HEC material and have been asked to make local arrangements for access to the material. A high priority is given to staff training. Blood tests are available on request. There is no medical need to isolate HIV+ves - those who have AIDS and who are ill could go to NHS hospital for treatment or when ready, to the new development announced recently for a twelve bed unit at Brixton Prison hospital. Sufferers may occasionally need protection from other prisoners who do not understand nature of infection.

Screening Raises many complex domestic and international issues. Not straightforward. Profound implications for carriers and for the general public. Key question: what happens to those found positive - quarantine? **Compulsory mass screening rejected**, but vol. tests available at STD clinics. **Screening of blood & organ donations** essential to provide safe supply. **Screening travellers/immigrants** would have very little effect on the spread of infection in the UK; also practical problems - screening in the country of origin may be unreliable, screening at UK port of arrival would produce enormous congestion. **Screening of pregnant women** on voluntary basis has been proposed for surveillance and clinical reasons - Dr Joe Smith's predictions group may consider this in context of their enquiry. Any decision must await their recommendations.

Sexual Offences Legislation There are no plans to make changes. A reduction of the age of homosexual consent must be considered against disturbing implications of AIDS. Banning homosexual acts would not have significant effect on HIV spread, as it could drive infected homosexuals underground. The prime concern is to prevent the spread of HIV and to encourage people to seek help. Use of the criminal law could be counter productive. [See also section on brothels].

Testing kits A number of new, quick tests are being developed but they need to be properly evaluated.