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STAC Newsletter is a regular publication of SAARC TB and HIV/AIDS Centre, it includes reports on activities, decisions of important meetings of the Centre and recent information on tuberculosis, HIV/AIDS and their control.

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Editorial

HIV/AIDS is a global catastrophe of immense economic and social proportions. It is the fourth leading cause of death in the world. The global recognition of TB burden, emerging threat of TB-HIV and danger of MDR-TB indicates urgent need to deal with TB and HIV not as a medical or even public health problem alone but as a social problem where creative interventions are essential for effective control of both diseases.

The value of Advocacy, Communication and Social Mobilization (ACSM) is becoming increasingly important in TB and HIV/AIDS control strategies. In order to address the shortcomings and to improve TB and HIV/AIDS policy and systems, advocacy campaigns are an important mechanism to effect change.

Streamlined advocacy on TB and HIV/AIDS is needed to improve coordination between TB and HIV/AIDS programming globally, and to more effectively advocate for sufficient resources to fight both diseases.

For advocacy the first requirement is reliable factual information. Information from country situation analysis and baseline studies needs to be collected to understand high risk practices and behaviours. Based on this information, advocacy work should include creating awareness of the magnitude and seriousness of the problem, diminishing discriminatory practices and removing policy and other barriers for prevention and care activities, and campaigning for effective and sustainable action. It should aim to influence the highest authorities in the country to provide leadership, political support and commitment.

Major progress has been achieved in the Member States in relation to TB control by implementing NEW Stop TB Strategy embracing the fundamentals of DOTS strategy and also in relation to HIV/AIDS control. Advocacy and awareness related to both diseases are the basic blocks to be strong enough to support and scaling up the other interventions for the control of these diseases. This is the focused and priority area in SAARC Regional Strategy on HIV/AIDS. In connection with this strategy, Indian Cine star and Social activist Ms. Shabana Azmi and Sri Lanka’s star Cricketer Mr. Sanath Jayasuriya were nominated as SAARC Goodwill Ambassadors. Ms. Shabana Azmi visited Nepal, from 5th-7th January 2009. She contributed significantly towards advocacy & awareness to increase the understanding about HIV/AIDS and TB and about available services for control of HIV/AIDS and TB problems.

Let’s all work for advocacy on HIV/AIDS and Tuberculosis and contribute for the control of these devastating diseases.

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Report on Activities

1. Ms. Shabana Azmi, SAARC Goodwill Ambassador for HIV/AIDS visited Nepal

Ms. Shabana Azmi, Indian Cine Star and Social Activist visited Nepal as SAARC Goodwill Ambassador for HIV/AIDS from 5th to 7th January 2009. She was nominated as SAARC Goodwill Ambassador for HIV/AIDS, as per SAARC Regional Strategy on HIV/AIDS. Mr. Sanath Jayasuriya, Sri Lankan Star Cricketer was also nominated along with Ms. Azmi as SAARC Goodwill Ambassador for HIV/AIDS.

The SAARC Goodwill Ambassador’s Program was conceived with the objective of facilitating the SAARC Regional Strategy on HIV/AIDS and its work plan.

Ms. Azmi was welcomed by representatives from SAARC Secretariat, SAARC TB and HIV/AIDS Centre and Indian Embassy at the Tribhuvan International Airport, Kathmandu.

Ms. Azmi, during her visit mainly focused on importance of advocacy & awareness programme to increase the understanding about HIV/AIDS and about available services for control of HIV/AIDS.

Ms. Azmi, made a courtesy visit with Mr. Girirajmani Pokharel, Hon’ble Minister for Health & Population, Nepal at Ministry of Health & Population, Kathmandu, on 6th January 2009. Mr. Girirajmani Pokharel, Hon’ble Minister extended a warm welcome to Ms. Shabana Azmi. Discussions were held about the need for scale up of the ART services for eligible HIV infected persons and requirement of initiating Regional Project to tackle cross border issues on HIV/AIDS and Tuberculosis. During interaction she expressed the need for improved Public Health Care infrastructure, improved accessibility of services for poor and marginalized sections of the Society especially women, multisectoral coordination and working at the grass root level.

SAARC TB and HIV/AIDS Centre in collaboration with SAARC Secretariat organized Ms. Shabana Azmi’s Press Conference with media for advocacy on TB and HIV/AIDS Control at Hotel Yak & Yeti.

The Press conference started with welcome address by Dr. Kashi Kant Jha, Director, STAC. He highlighted the contribution made by Ms. Shabana Azmi on different aspects of social and public health issues in India, and her achievements of honor in different areas. Mr. Hassan Shifau, Director, SAARC Secretariat described the importance of SAARC Goodwill Ambassadors programme for HIV/AIDS Control.
In the press conference Ms. Azmi highlighted the role of advocacy through media to control HIV/AIDS and also explained that the stigma, discrimination and other social issues of HIV/AIDS could be mitigated by increasing awareness among general population.

The Press Conference was attended by more than 60 representatives of electronic and print media. There was good interaction in relation to prevalent issues for HIV/AIDS control.

After press Conference, she proceeded to visit Ketaketi Ashram and AIDS Care Centre being run by Nava Kiran Plus, an NGO belonging to the Network of People Living with HIV/AIDS. HIV infected and affected facilitators got good opportunity to share their problems and issues that surround them.

Staff of SAARC TB & HIV/AIDS Centre and National Tuberculosis Centre also had an interaction meeting with Ms. Shabana Azmi at Hotel Yak and Yeti.
2. Public Awareness and Advocacy Programmes on TB and HIV/AIDS

Partnership program with Teachers

SAARC TB and HIV/AIDS Centre (STAC) commemorated the World TB Day with the slogan "I Am Stopping TB" by organizing a Partnership Programme with Teachers under "Advocacy & Awareness Program with School Teachers on TB & HIV/AIDS Prevention & Control" on 19th March 2009 at Thimi, Bhaktapur, Nepal. Around 100 teachers from 50 schools participated in the program.

Dr. Kashi Kant Jha, Director, STAC welcomed the participants and highlighted "the Role of Teachers for the control of TB in General Public" and also explained the influential role of teachers and schools in mobilizing public support, influence on policy makers and reducing social stigma.

He thanked them for the cooperation rendered by the schools and teachers for creating awareness pertaining to TB and HIV/AIDS.

The program was also attended and addressed by Dr. Pushpa Malla, Director, NTC, Mr. Jaya Bahadru Karki, DPHO, Bhaktapur, Mr. Prakash Subedi, Section Officer, District Education Office, Lalitpur district, Nepal, Mr. Madanji Mainali, NATA, Kathmandu and Mr. Tejeshwor Gonga, Principal, Jaycees Secondary School, Bhaktapur, Nepal.

Outcomes:
- Participants were clarified about different issues in relation to TB and HIV/AIDS.
- Teachers group committed to provide co-ordination and cooperation for the provision of updated information regarding TB and HIV/AIDS to students and general people.
- Participants acquainted with role of teachers for the control of TB and HIV/AIDS.

STAC launched the “Green Badge Campaign” on the occasion of World TB Day. Through this campaign STAC envisages to develop a work force of the motivated persons from the general public. The volunteers from the general public will be sensitized by imparting knowledge on TB, its situation and the strategy to control it and they will be enrolled as Green Badge workforce. The Green Badge holders will take the responsibility of improving awareness of the general public on Tuberculosis and provide them information on the availability of services in public / private / voluntary sector. They will help in improvement of community participation and reducing stigma & discrimination associated with Tuberculosis.
Commemoration of World TB Day 2009 by STAC

- Participation in Lok Dohri
On the occasion of World TB Day 2009, Ministry of Health and Population, National TB Centre organized a Lok Dohari (Duet Song) programme at Basantapur Dabali, Kathmandu on 20th March 2009. A group of famous folk singers sang folk songs related with TB, its symptoms, treatment and available facilities in the country. The objective of the programme was to enhance public awareness on TB.

Dr. K. K. Jha, Director along with the other staff from SAARC TB and HIV/AIDS Centre participated in the programme which was inaugurated by Dr. Govinda Prasad Ojha, Director General, Department of Health Services, Government of Nepal as Chief Guest.

- Press Conference:
Dr. K. K. Jha, Director, STAC and staff of the Centre attended the Press Conference with media partners of Nepal, organized as a special event to commemorate World TB day by NTC in Ministry of Health & Population on 22nd March 2009.

- Joint Function
The World Tuberculosis Day is commemorated every year on 24th March, when German bacteriologist, Dr. Robert Koch in 1882, announced the discovery of tuberculosis bacilli, the bacteria that causes tuberculosis. 24th March was announced to be commemorated as World TB Day by WHO and IUATLD in 1982.

On occasion of the Day, SAARC TB and HIV/AIDS Center performed different activities in collaboration with
National TB Control Programme, Nepal. On 24th March 2009, the main function was organized at Nepal Academy Hall Kathmandu. Hon’ble Mr. Girirajmani Pokharel, Minister for Health & Population, Government of Nepal graced the occasion as Chief Guest. The programme was chaired by Dr. D. S. Bam, Secretary (Health), Ministry of Health & Population, Government of Nepal. The programme was attended by Dr. Sudha Sharma, Secretary (Population), Ministry of Health and Population and large number of National and International dignitaries and community leaders, social workers, health care providers, students / teachers and general people.


Dr. Kashi Kant Jha, Director, STAC presented a Vote of Thanks during the function.

- Exhibition:
Information about STAC and its activities for TB and HIV/AIDS control in Member States was developed and displayed in the exhibition hall.

- Publication of Message:
On this occasion, the STAC published a special message of His Excellency Dr. Sheel Kant Sharma, Secretary General, SAARC in the local Newspapers.

- Display of Banners:
Banners explaining the different information related to TB, its symptoms, causes, prevention treatment etc. were displayed at prominent places in the city.

Commemoration of World TB Day 2009 in other Member States

Afghanistan

March 24 marked as World TB Day 2009, an important opportunity to raise awareness about the global fight against tuberculosis (TB). Tuberculosis is a major public health threat in Afghanistan, with approximately 30,000 new cases per year. Almost 70% of Afghanistan's reported cases are women, and without proper treatment, far too many Afghan citizens succumb to the disease.

To increase understanding about TB prevention and treatment, USAID, the Government of the Islamic Republic of Afghanistan, and other members of the international Stop TB Partnership held events in schools across Afghanistan. 152,000 students took part in the day's celebrations, participating in quiz shows, local marches, and sessions with community health workers. They also received baseball caps and flags featuring the Stop TB Partnership slogan, I am stopping TB. Throughout the country, 6.2 million children learned how to prevent the spread of TB through print materials and mass media messages.

Bhutan

Message from Lyonpo Zangley Dukpa, Minister of Health

"Together we can move mountains; together we can eliminate TB"

Hon’ble Minister gave his message on the occasion of World TB Day 2009. Giving emphasis on the theme of the day the Hon’ble Minister stated that each and everyone can play a significant role in stopping this deadly but curable disease. He briefed about the global burden of the disease. He further added in his message that the socio-economic implications of the disease and its control in the country. He also pointed out about the problem of MDR TB, XDR TB as well as TB HIV co-infection. He expressed his satisfaction on improvement of death rate of PTB, that it has declined from 5% to 2% and more than 90% cases were cured in Bhutan. He reiterated the commitment of Government of Bhutan with its development partners in combating the disease and each of us, as a member of the community, shall do our part to advocate and help prevent and cure tuberculosis.
Hon’ble Minister of Health, Mr. Lyonpo Zanglay Dukpa graced the occasion as the Chief Guest at the event organized to observe the World TB Day on 24th March at Motithang Higher Secondary School with the theme: “We simply must stop TB”. Guests and invitees from UN agencies, financial institutions, corporations, business communities, students and teachers from Higher Secondary Schools of Thimphu Thromde, representatives from armed forces and their families, monks and nuns from monasteries gathered to observe the day. There were more than 600 people who gathered in the hall to mark the day. After the arrival of the Chief Guest, Marchang ceremony was held followed by welcome speech by Dr. Ugen Dophu, Director, Department of Public Health. He stated that TB still remains one of the major public health problems across the globe and in Bhutan. Representatives of MHSS, Monk and Indigenous drungtsho gave their commitments in fight against TB. WHO Representative for Bhutan read out message of SEAR, Director for 2009 World TB Day. In his concluding remarks, he said that, Bhutan is doing fairly well in terms of TB control and continued support from WHO will be made available.

The Hon’ble Minister of Health expressed his gratitude for inviting him in this remarkable occasion. In his address he said that although TB is a curable disease by medicines, but many deaths are occurring due to TB worldwide. He informed that TB in Bhutan is still a public health problem and approximately 1000 cases of all forms of TB are reported annually. He informed that after use of DOTS the death rate has declined from 5% to 2%. He also pointed out about the problem created by HIV TB co-infection among PLHA.

Leaflets and facts about TB were displayed. The students of MHSS also prepared posters and messages about TB and were displayed on the board for public to see.

Pakistan

Every year National TB Control Program (NTP), Pakistan implements a number of activities to commemorate World TB Day. This year NTP implemented a special campaign the “One Voice” campaign focused on branding and TB Day, series of consultative meetings with different partners were organized.

Activities at National Level

Message from the Honorable Prime Minister for Pakistani Youth:

A targeted message from the Hon’ble Prime Minister for young people was developed by NTP which was read in the school assemblies on 11th March in public schools throughout the country.

National Poster & Essay Competitions:

National level poster & essay competitions were announced in the

Inauguration of Poster Exhibition on TB by Federal Minister for Health in Islamabad National Arts gallery

The regional theme of this year’s World TB Day was “Engaging Youth” through Million Youth March. NTP engaged more than 500,000 school children and youth in various Stop TB activities during the month of March throughout the country. In order to develop a national plan to implement special activities to commemorate World leading newspapers for the young people. The theme of “Aa Mil Ker Rokian TB Ko” was given for essay competition. Where as for poster competition four different themes were provided including “I am Stopping TB”, “TB & Youth”, TB & Poverty”, “Cure TB to Stop TB”.

Production & Dissemination of ACSM Resource Material:

ACSM resource and promotional material for World TB Day was also developed. This included posters,
t-shirts and caps. These were provided to partners for distribution among the school children and youth during World TB Day activities.

Advocacy Event with Youth & Key Stakeholders:
Hon’ble Minister for Health Mir Ijaz Hussain Jakharani, graced the occasion as Chief Guest in an advocacy event with youth and key stakeholders organized on March 18, 2009 at National Arts Gallery, Islamabad in order to commemorate World TB Day 2009. Honourable Minister for Health in his remarks said that Tuberculosis is a public health problem that requires sustained and concerted efforts and World TB Day provides an opportunity to every one to play their role in stopping TB at every level. He remarked that youth are the future of our country and can play a pivotal role in the fight against TB. He further said that despite that Pakistan has achieved more than 70% TB detection and treatment success of more than 80% of TB patients in the country; however, we have to go a long way ahead. TB is not just a medical problem; it is also a socio-economic issue that requires diligent management of micro and macro socioeconomic issues in the country. The Government has ensured free supply of TB medicines for the next 5 years. Hon’ble Minister also distributed shields and certificates among the volunteers and NTP partners to acknowledge their efforts.

The Secretary Health Mr. Khushnood Akhtar Lashari, WHO Representative Dr. Khalife Bile, National Programme Manager NTP, Dr. Noor Ahmad Baloch, and literary Personality Mr. Amjad Islam Amjad were also presented in the event.

The Honourable Minister for Health inaugurated the poster exhibition. The top 20 posters were received from different parts of the country for exhibition.

Dr. Noor Ahmad Baloch, NPM, NTP delivered welcome remarks. He acknowledged the efforts and contributions of young volunteers from various organizations and also thanked media for their support and Mr. Amjad Islam Amjad, Mr. Abrar ul Haq, Mr. Jawad Ahmed, Mr. Amanat Ali Khan and Mr. Tariq Tafoo for developing song on TB. He paid gratitude to all PTP managers and coordinators, Global Fund and non Global Fund partners, bilateral and multi-lateral organizations and NTP team for making World TB Day a success.

Dr. Khalife Bile, WHO Representative delivered his address. He appreciated the efforts of NTP on organizing a youth specific event and on engaging more than 500,000 children and young people throughout the country to mark World TB Day.

Quiz Competition:
A quiz competition among girl guides and boy scouts was also part of the event.

Launch of TB Song "Aao Irada Karain":
The event packaged numerous activities including the launch of TB song "Aao Irada Karain, Mil Keyeh Wada Karain", written by Mr. Amjad Islam Amjad and sung by a group of eminent artists including Jawad Ahmed, Amanat Ali Khan, Shabnam Majeed and Tariq Tafoo.

City Branding:
All major cities of the country were branded with streamers, banners and billboards containing messages of TB control, role of youth in this regard and messages clarifying myths attached with the disease. The issue of stigma was also highlighted.

Sharing of Activities at National & International Level
The activities carried out during World TB Day were shared with EMRO and other national and international key stakeholders.

Way Forward
Keeping in view the meaningful participation of young volunteers during World TB Day 2009, motivated ACSM, and NTP to develop a critical mass of young volunteers and utilize them for TB services. NTP therefore foresees for structured national volunteer program with defined policies and procedures. Once the program is established, young volunteers from all over the country will be registered with NTP’s volunteers program "TB Sey Nijat Naujawano Key Sath". NTP is in a process of collaborating and coordinating with the already established structured volunteer organizations in order to learn from their experiences and build its capacity in this regard. The main objective of this collaboration is to utilize these organizations and volunteers potentially for TB services.

(The information on commemoration of World TB Day 2009 has been made available from Afghanistan, Bhutan, Nepal & Pakistan till date. The information received for rest of the SAARC Member States shall be published in the next issue)
3. SAARC Training on Leadership and Management Skills for National/Regional Level TB and HIV/AIDS Control Programme Managers in Bangladesh

In accordance with the decision of the Eighteenth Governing Board Meeting of SAARC TB and HIV/AIDS Centre, a five day programme on "SAARC Training on Leadership and Strategic Management for National/Regional Level Managers in National TB and HIV/AIDS Control Programmes in Bangladesh" was organized by STAC with the coordination of National Tuberculosis Control Programme and National HIV/AIDS Control Programme of People’s Republic of Bangladesh. The Training Programme was held on 01st to 05th of June 2009 in Dhaka with the objectives to improve the existing understanding, knowledge and skills on management and leadership among Programme Managers at National and Regional levels of National TB and HIV/AIDS Control Programmes and to scale-up and strengthen the National and Regional TB and HIV/AIDS prevention and control activities in Bangladesh.

Prof. Dr. [Mrs.] Hosne Aara Tahmin, Additional Director General, Department of Health Services, People’s Republic of Bangladesh graced the occasion as the Chief Guest in the opening ceremony. Dr. Anowar Hossain Munshi, the Joint Secretary (Public Health and WHO), Ministry of Health, People’s Republic of Bangladesh attended as the Special Guest in the opening ceremony.

Dr. Kashi Kant Jha, the Director, STAC delivered his remarks by thanking the People’s republic of Bangladesh’s both National TB and HIV/AIDS Control Programmes for facilitating organization of the training programme in Bangladesh successfully.

For this five day-training programme, twenty one Programme Managers at National and Regional levels of National TB Control Programme and National HIV/AIDS Control Programme in Bangladesh participated.

Prof. [Dr.] Shah Monir Hossain, Director General, Department of Health Services, People’s Republic of Bangladesh graced the occasion as the Chief Guest in the closing ceremony.

Following Outcomes were achieved:
3. Availability of a group of motivated Programme Managers equipped with improved managerial skills and leadership qualities at National and Regional levels of the National TB and HIV/AIDS Control Programmes to achieve the time bound pledges; universal access to HIV prevention, treatment, care and support by 2010, Millennium Development Goals and to scale-up the control activities further.
4. Welcome News

SAARC Tuberculosis & HIV/AIDS Centre has the honour to welcome Hon’ble Mr. Umakant Chaudhary, Minister for Health and Population, Government of Nepal and Hon’ble Mr. Khadka Bahadur Basyal Sarki, State Minister for Health and Population, Government of Nepal.

Visit of Her Excellency Ms. Susan Grace

Her Excellency Ms. Susan Grace, Ambassador from Government of Australia to Nepal visited SAARC TB & HIV/AIDS Centre, Thimi, Bhaktapur on 31st March 2009 and observed the functioning of the Centre. She was accompanied by Mr. Mark Bailey, Regional Counsellor for South Asia, AusAID, Ms. Elaine Ward, Director of Asia Section, AusAID, Ms. Tara Gurung, Nepal Country Manager, AusAID. Her Excellency Ms. Grace discussed on various activities being done and challenges faced by the Centre in prevention and control of TB and HIV/AIDS in the Region.

5. Brief News

Dr. K. K. Jha, Director, STAC attended 35th Session of the Programming Committee Meeting of SAARC held in Colombo, Sri Lanka on 23rd to 24th Feb. 2009

Dr. K. K. Jha, Director, STAC attended All Nepal Medical Association Conference (ANMECON) organized by Nepal Medical Association in Kathmandu held from 14th - 16th April 2009.
6. Special Articles & Technical Information

Swine Flu

Dr. K. K. Jha, Dr. V. S. Salhotra, Dr. L. Shrestha
SAARC TB and HIV/AIDS Centre

A pandemic is declared

On June 11, 2009, the World Health Organization (WHO) raised the worldwide pandemic alert level to Phase 6 in response to the ongoing global spread of the novel influenza A (H1N1) virus. A Phase 6 designation indicates that a global pandemic is underway.

More than 70 countries are now reporting cases of human infection with novel H1N1 flu. This number has been increasing over the past few weeks, but many of the cases reportedly had links to travel or were localized outbreaks without community spread. The WHO designation of a pandemic alert Phase 6 (in addition to the criteria defined in Phase 5, the same virus has caused sustained community level outbreaks in at least one other country in another WHO region. Phase 5 – The same identified virus has caused sustained community level outbreaks in two or more countries in one WHO region) reflects the fact that there are now ongoing community level outbreaks in multiple parts of world. (Report from CDC, on June 26, 2009).

What is Swine Flu?

Swine Influenza (swine flu) is a respiratory disease of pigs caused by type A influenza viruses (H1N1 subtype) that causes regular outbreaks in pigs.

What is the new influenza A (H1N1)?

This is a new influenza A (H1N1) virus that has never before circulated among humans. This virus is not related to previous or current human seasonal influenza viruses.

How do people become infected with the virus?

The virus is spread from person-to-person. It is transmitted as easily as the normal seasonal flu and can be passed to other people by exposure to infected droplets expelled by coughing or sneezing that can be inhaled, or that can contaminate hands or surfaces.

Signs and symptoms

The symptoms of swine flu in people are similar to the symptoms of regular human flu and include fever, cough, sore throat, body aches, headache, chills and fatigue. Some people have reported diarrhea and vomiting associated with swine flu.

How can someone with the flu infect someone else?

Infected people may be able to infect others beginning 1 day before symptoms develop and up to 7 or more days after becoming sick. That means that one may be able to pass on the flu to someone else.

What should I do to keep from getting the flu?

First and most important: wash your hands. Try to stay in good general health. Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids, and eat nutritious food. Try not touch surfaces that may be contaminated with the flu virus. Avoid close contact with people who are sick.

Is an effective vaccine against the new influenza A (H1N1) virus already available?

No, but work is already under way to develop such a vaccine. Making a completely new influenza vaccine can take five to six months.

How important will influenza A (H1N1) vaccines be for reducing pandemic disease?

Vaccines are one of the most valuable ways to protect people from getting the disease during influenza epidemics and pandemics. Other measures include anti-viral and other drugs, social distancing and personal hygiene.

How quickly will influenza A (H1N1) vaccines be available?

The first doses of influenza A (H1N1) vaccine could be available within five to six months after identification of the new virus. Prior to this date, small quantities of experimental vaccine will be made available to immunize volunteers in clinical trials to select the best vaccine formulations. Regulatory approval for the vaccines will be conducted by national authorities in parallel with the manufacturing process. National regulatory authorities have put
into place expedited processes that do not compromise on the quality and safety of the vaccine. Delays in production could result from poor growth of the virus strain used to make the vaccine.

**What drugs are available for treatment?**

There are two classes of antiviral drugs for influenza: inhibitors of neuraminidase such as Oseltamivir and Zanamivir; and Amantadines, such as Amantadine and Rimantadine. Tests on viruses obtained from patients in Mexico and the United States have indicated that current new H1N1 viruses are sensitive to neuraminidase inhibitors, but that the viruses are resistant to the other class, the amantadanes.

### Global Situation on 1st July 2009

According to World Health Organization, total cumulative numbers of cases reported are 77201 and 6308 are laboratory confirmed cases of influenza A (H1N1). There have been 353 deaths.

**Situation in SAARC Region**

Laboratory-confirmed cases of pandemic (H1N1) 2009 have been officially reported to WHO by Bangladesh, India, Nepal and Sri Lanka among eight SAARC Member States.

**References:**

- www.who.int
- CDC website

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**National HIV Testing Day: A Novel Initiative to Combat HIV/AIDS**

*Dr. Kashi Kant Jha, Dr. V. S. Salhotra, Dr. Ganga C. Pathirana*  
SAARC TB and HIV/AIDS Centre

The HIV/AIDS epidemic is a global threat and it might be more of a threat to each and every one of us than we thought. However, we can prevent HIV by joining hands in implementing the prevention and control activities. One way of doing it is by encouraging all who indulge in high risk behaviour and all who are at risk of acquiring HIV to get themselves voluntary tested. By getting tested all HIV infected can take better care in controlling their own health.

Individuals infected with HIV can take steps to avoid the onset of AIDS. There are effective treatments available today that can help People Living with HIV/AIDS [PLHA] to stay healthy longer than ever before.

Early HIV diagnosis is critical. If diagnosed early, people who are infected can obtain full benefits from available life saving treatments. Currently, even in a developed country like United States of America almost 40% of PLHA are not diagnosed until they already have developed AIDS. Figure 01 shows the Anti-Retro Viral [ARV] coverage of countries with generalized and concentrated epidemics by the end of the year 2007, despite of the scaling up activities since 2004 [source: UNAIDS AIDS Update 2008].

![Figure 01: Scale up of Anti-Retro Viral Coverage in countries with generalized and concentrated HIV epidemics 2004 – 2007](Source: UNAIDS AIDS Update 2008)

Finding out whether an individual is infected with HIV, is the first step to improve his or her health and the health of his or her partner, as well as their family. Highly Active Anti-Retroviral Therapy [HAART] in many countries is likely to be a cost saving intervention as it enables people living with HIV to lead an almost normal socially and economically active life.

Low rates of testing reduce the impact of HIV treatment, care and support, because individuals who are diagnosed late in the course of infection have a poorer prognosis. A number of countries including Member States of the SAARC Region, however, are successfully using a range of approaches to increase the knowledge of general public on HIV infection and also to know their HIV status.

A commendable initiative has been taken by the National Association of People With AIDS [NAPWA] in United States of America to scale up the HIV testing, the crucial gateway for new life for the already infected people and the most important finding for the uninfected people to stay responsible to remain negative NAPWA was established in 1983 in United States of America by
National Network of PLHA. It advocates that people at risk of infection should seek out Voluntary HIV Counselling and Testing services [VCT] to make informed decisions about their own lives. Hence, NAPWA took one step further in 1995 by launching the “National HIV Testing Day” campaign.

Figure 02: Two Posters of the National HIV Testing Day Campaign organized by National Association of People With HIV in partnership with Centre for Disease Control, USA

National HIV Testing Day [NHTD] is an annual campaign coordinated by the NAPWA to encourage people of all ages to take up the HIV testing with the following slogan “Take the Test, Take Control”. Since 1995, every year on 27th of June local organizations across the United States of America engage with communities to promote early diagnosis and HIV testing. This event is organized in partnership with the Centres for Disease Control and Prevention [CDC] and other national and local entities across the United States of America.

This unique initiative is an important intervention for the welfare of people infected with HIV as lack of access to treatment and care can make living with HIV difficult. With early diagnosis, uncertain individuals will know their HIV status and should be placed under appropriate treatment, care and support. All the HIV/AIDS Care Providers strongly believe that HIV testing is a critical step in taking control and responsibility over own health and that of their loved ones.

According to the latest data available, in SAARC Region, an estimated 2.49 million PLHA were living in eight Member States at the end of year 2007. Of that 2.31 million were living in India alone. The reported number to the National AIDS Control Programmes of Member States of SAARC Region was well below 0.25 million as on December 2007 [<10% of the estimated number of PLHA]. Hence, more than 90% of the PLHA in the region do not know their HIV status. Lack of knowledge of the HIV status is a crucial factor in impeding the rate of achieving the time bound pledges of the United Nations General Assembly on Special Session on HIV/AIDS [UNGASS] and the Millennium Development Goals.

National HIV Testing Day or National HIV Testing Week can be regarded as an effective strategy to scale up the HIV testing in the SAARC Region. This strategy may be adopted by the Member States with comparatively higher prevalence of HIV infection and/or lower numbers of diagnosed persons compared with the estimates. As SAARC Region is having the committed Political Leadership, the dedicated Stakeholders and availability of the active National AIDS Council, National AIDS Committee, Provincial and District AIDS Committees, National HIV Testing Campaign may be selectively used as an annual event to scale up the ongoing efforts in case finding.
In conclusion, it is important to emphasize the importance of learning from countries which contributed the success stories in containing the HIV epidemic. It will be better if we put the lessons learnt into practice, by joining hands with each other to take the initiatives in our territory in a culturally acceptable manner to contain HIV/AIDS in the SAARC Region by consolidating and scaling up of existing efforts.

References:
4) UNAIDS AIDS Update 2008
5) SAARC Epidemiological Update 2008

7. Programmes by STAC in 2009

- SAARC Training on Leadership and Strategic Management for at National/Regional Level TB and HIV/AIDS Control Programme Managers in Bangladesh – 1\textsuperscript{st} – 5\textsuperscript{th} June 2009 (conducted)

- SAARC Regional Training for Operational Research in India 4\textsuperscript{th} – 7\textsuperscript{th} Aug. 2009 (conducted)

- SAARC Regional Training of Microbiologist for sputum culture/sensitivity in collaboration with NTI, Bangalore in Indial 20\textsuperscript{th} – 28\textsuperscript{th} Aug. 2009 (conducted)

- SAARC Regional Training on counseling, testing, care & support and ART (21\textsuperscript{st} – 26\textsuperscript{th} Oct. 2009), Nepal

- SAARC Regional Workshop to revise SAARC Regional Strategy on TB/HIV Co-infection (16\textsuperscript{th} – 20\textsuperscript{th} Nov. 2009), Bhutan

- The Meeting of the Managers of the NTP & NACP Program Managers of the Member States, Maldives (21\textsuperscript{st} -23\textsuperscript{rd} Dec.09)

- SAARC Regional Training of Program Managers on DOTS Plus (MDR-TB) (28\textsuperscript{th} Dec. 2009 – 1\textsuperscript{st} Jan. 2010), Pakistan

- Situation Analysis of National TB and HIV/AIDS Control Activities (tentative date 14\textsuperscript{th} – 16\textsuperscript{th} Dec. 2009), Afghanistan

- SAARC Regional Training on Data Management, Sri Lanka (to be decided)

- A study to determine the Constraints in involvement of Private Practitioners, Sri Lanka

- Baseline CD4 counts in the adult population, Pakistan

- Estimation of under/over diagnosis of the sputum negative & extra pulmonary TB cases in TB/HIV Co-infection in resource limited settings in National TB Institute, Bangalore, India

- Study on culture positivity amongst smear negative patients, Nepal

- SAARC Goodwill Ambassador’s Program

- Sixth round External Proficiency testing in National Laboratories of SAARC Member States
“TB is the most common opportunistic infection in People Living with HIV/AIDS (PLHA)”

Collaborative activities to tackle TB/HIV co-infection are likely to impact control of both epidemics

- TB is the first manifestation of AIDS in over 50% of cases in developing countries
- Treating TB disease in HIV infected will improve their quality of life and prevent further transmission of TB

To

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