



Transcript

SA HIV Clinicians Society Quarterly Newsletter

Editor: Chloe Hardy

June 2008 – Special Edition

Index:	1. Call to action	P1	8. Conferences 2008	P5
	2. Society contact details	P1	9. Conference bursaries	P6
	3. Sponsored article	P2	10. Branch meeting dates	P6
	4. Organizations that need the assistance of health care workers	P2	11. Nutritional HIV focus groups	P9
	5. The silent killer after the acute storm	P3	12. Important information on CPD points	P9
	6. Displacement of non – nationals: The need to ensure continued access to ART	P4	13. Services available	P9
			14. Job opportunities	P10
			15. ARV price list	P10

SPECIAL EDITION: TAKE ACTION AGAINST XENOPHOBIA

“...South Africa belongs to all who live in it, united in our diversity” – Preamble to the Constitution of the Republic of South Africa

Call to action

As an African organisation, we have been profoundly shocked and dismayed by the recent violence in South Africa against foreign nationals.

Many of us have already donated food, money and clothing to people displaced by xenophobic violence, but as our member, Dr Ute Feucht, writes in her article on page 3, we are now facing an ongoing medical and humanitarian crisis.

We cannot let this crisis continue unhindered, even though the images of violence have faded from our TV screens. We call on our members to assist organisations working with displaced persons, particularly those who need the services of doctors and nurses.

Many people displaced by violence in South Africa are now returning to their countries of origin, or seeking refuge in other countries. They join the many thousands of our fellow Africans already displaced for political or economic reasons. We are therefore reissuing our Clinical Guidelines on for ARV Therapy Management for Displaced Populations with this edition of Transcript.

We remain committed to promoting the highest quality of clinical care for all people living with HIV, including vulnerable groups such as displaced persons.

Dr Francois Venter
President
Southern African HIV Clinicians Society

Society contact details

Tel: + 27 (011) 341 0162

Fax: +27 (011) 341 0161

Website: www.sahivsoc.org

Chloe Hardy, Office Manager: hardyc@sahivsoc.org

Fatima Shaik, General Manager: fatimas@sahivsoc.org

Natalie Martyn, AP Project Manager: nataliem@sahivsoc.org

Mick Graham, Development Worker: mickg@sahivsoc.org

Pat & Jean Solan, Database and Finance Managers: patsolan@global.co.za

THIS EDITION OF TRANSCRIPT IS SPONSORED BY ABBOTT LABORATORIES

Sponsored article by Abbott

Dear Doctor

Abbott is pleased to support this edition of Transcript and its focus on a critical, and timely topic.

Patients who are moving between homes, countries, and clinics face a unique set of challenges in HIV treatment. The potential for adherence issues, and associated resistance, is increased for patients who may not know where they will spend the next night. Safe, refrigerated storage for ARVs may be impossible, and meals may not come at regular times.

The new Aluvia Tablet is designed for these realities. It provides the trusted durability and efficacy of Kaletra capsules, but does not require refrigeration or dosing with food. The new formulation has been available in South Africa since the 2nd of June . To get a dosing poster or more information, please send an email with your contact details to aluvia@abbott.com.

Regards,

Tom Wistar

Director - Aluvia/Continent of Africa

Aluvia film-coated tablets (200 mg lopinavir/50 mg ritonavir) Reg. No. 41/20.2.8/0217

Kaletra Capsules (133.3 mg lopinavir/33.3 mg ritonavir) Reg. No. 35/20.2.8/0254

0006-0608-P725-A-0684 June 2008

Organisations that need the assistance of health care workers:

SA Red Cross Gauteng:

Volunteer nurses and doctors required to assist in providing medical support to displaced persons.

Contact Odney at 079 499 9592, or fax your details to: 011 873 5590.

SA Red Cross Western Cape:

Volunteer nurses and doctors required to assist in providing medical support to displaced persons.

Contact David Stevens at 084 300 4497 or 021 535 0202.

Médecins Sans Frontières (MSF) / Doctors Without Borders:

Médecins Sans Frontières (MSF) / Doctors Without Borders is a world leading international medical organisation providing humanitarian assistance for people in need, active in more than 70 countries worldwide. MSF has been present in South Africa since 1999, providing comprehensive HIV and TB care and treatment in Khayelitsha, Cape Town, and Lusikisiki, in Eastern Cape Province. Since December 2007 MSF has also been working in central Johannesburg and in Musina, at the Zimbabwean border, to provide Zimbabweans seeking refuge in South Africa with access to medical care. Following the recent violence and unrest, MSF has been providing assistance to the affected population in Cape Town and Johannesburg. To join its existing team in Johannesburg, MSF is urgently looking to **employ:**

1. FULL TIME OR SESSIONAL MEDICAL OFFICER(S) motivated to work in PHC programme

Responsibilities:

- To provide direct clinical care mainly focused on essential medical needs for displaced populations
- To refer patients to an identified network of appropriate and supportive services for medical care and/or hospice care.

Required skills:

- Registration with the HPCSA as a Medical Officer
- Good clinical experience and knowledge in management of basic illnesses including HIV/TB – related conditions.

2. CLINICAL NURSE PRACTITIONER(S) / PROFESSIONAL NURSE(S) motivated to work in PHC programme

Responsibilities:

- To ensure that good quality nursing care is rendered and a comprehensive service is provided

- To provide basic diagnostics and curative services.

Required Skills:

- Clinical Nurse Practitioner / Professional Nurse with at least 2 to 3 years experience in a Primary Health Facility
- Registration with the South African Nursing Council as Clinical Nurse Practitioner / Professional Nurse in General Nursing, Midwifery and Primary Health Care.

Working conditions:

Locations: mobile clinics within Johannesburg's camps for displaced people

Mobile clinic hours : week days / week-ends from 9am to 17pm (day shift) and/or from 16pm to 22pm (evening shift).

General requirements:

- Minimum of 1 month commitment (full time or sessional)
- Ability to work independently and within a team
- Genuine commitment to MSF's humanitarian principles
- Willingness to work in a resource limited setting and creative sort out medico-social situation capacity to cope with inherent constraints
- Self reliance, initiative, team spirit and a proactive approach completes the profile.

Job advantages and career opportunities:

- Gain experience in a world leading medical international humanitarian organisation • Sessional hourly rate / salary package comparable to public sector.

How to apply:

Send your comprehensive CV and motivation letter with 2 contactable references to:

recruitment@joburg.msf.org OR fax applications to 11 403 4443. Please mark your motivation letter 'subject' as the position you are applying for.

ONLY SHORT LISTED CANDIDATES WILL BE CONTACTED.

For more information on MSF please log onto www.msf.org and for more detailed information on the positions please call Sylvie Kaczmarczyk at 082 852 1885 or James Kamari at 078 054 7413.

The silent killer after the acute storm

By Dr Ute Feucht

As South Africans we have again been shocked by intense images of violence: this time it was the recent spate of xenophobic attacks in our country. Large numbers of people were left homeless and were robbed of their ability to provide shelter, food, clothing and a means of transport and communication for themselves and their families.

In a country with large-scale dual epidemics of HIV and TB, displacement of people also has the additional risk of treatment interruptions for patients needing chronic medication. Although this is true for all who need chronic medication, my current concern is regarding the patients on ART (antiretroviral therapy) and TB treatment, as these are patients I work with on a daily basis in my role as a paediatrician at a public sector ART clinic.

At our ART clinic we are concerned that children's lives have been put at risk through treatment interruptions due to the loss of their medication or the missing of clinic appointments as a result of the recent turmoil. Many of the patient's caregivers are HIV-infected themselves and have the same need to access treatment. Our clinic's ability to trace patients who do not return for clinic visits is limited to the attempt to contact them telephonically. If this is unsuccessful, we need to wait and see whether or not the patient returns into our care. And if this does not happen, the child becomes one of the "lost-to-follow-up" statistics, with reasons unknown.

During the emergency situation after the acute displacement of people, assistance has mainly focussed on the visibly pressing needs: provision of shelter, food, clothing and basic sanitation. ART and TB treatment are both chronic treatment modalities in which treatment interruptions need to be avoided at all cost - not so much because this causes acute morbidity and mortality, but because it causes problems that will only become visible at a much later stage: drug resistance and treatment failure and possible poor outcome in the affected person as well as the possible spread of drug-resistant diseases to others.

With HIV and TB being such common conditions in our country, we can not afford to ignore the need for treatment access during times of emergencies, and this needs to be part of the planning for all types of disasters.

Dr Ute Feucht is a paediatrician at Kalafong Hospital, Pretoria. This article is written in her personal capacity.

Displacement of non-nationals: the need to ensure continued access to ART

By Jo Veary, Health and Migration Initiative, Forced Migration Studies Programme, Wits

Recent xenophobic violence has resulted in the death of at least 62 people and the displacement of an estimated 200,000 foreign nationals¹.

Whilst South Africa has an integrative refugee policy - whereby refugees and asylum seekers are encouraged to self-settle and integrate, rather than be confined to camps - challenges to successful implementation exist².

Temporary shelters and camps have recently been established within the Western Cape and Gauteng in response to the need to provide safe shelter to non-nationals who have been displaced by the recent violence. It is essential that adequate (temporary) spaces of safety and shelter are provided to displaced persons whilst recognising that displaced persons require continued access to their places of work, schools and healthcare facilities. In addition, responses must effectively address the increased public health risks associated with displacement and the (temporary) settlement of individuals within shelters and camps. This includes ensuring continued access to ART and TB treatment.

Whilst the numbers of displaced people currently accommodated within shelters and camps is significant, the majority of foreign nationals affected by the recent violence remain self-settled. The impact of violence and displacement upon the health of non-nationals who remain self-settled is currently unknown. Of particular concern are individuals in need of treatment for TB and HIV as access to public health services may now be even more challenging for non-nationals³. Self-settled non-nationals may be afraid to access public health facilities for fear of being identified as foreign. In addition, it is unclear whether staff attitudes have become more negative toward foreign nationals. Research is currently underway to understand these concerns⁴. A range of rights, including access to basic healthcare, are provided to non-nationals through the Refugee Act (1998) and the South African Constitution. The current HIV/AIDS and STI National Strategic Plan for South Africa (NSP) specifically includes non-nationals – international migrants, refugees and asylum seekers – and outlines their right to HIV prevention, treatment and support. In September 2007, the National Department of Health (NDOH) released a Revenue Directive⁵ clarifying that refugees and asylum seekers – with or without a permit – shall be exempt from paying for antiretroviral treatment (ART) in the public sector.

A key guiding principle to the successful implementation of the NSP is towards “ensuring equality and non-discrimination against marginalised groups”; refugees, asylum seekers and foreign migrants are specifically mentioned as having “a right to equal access to interventions for HIV prevention, treatment and support”⁶. However, many challenges are experienced by refugees and asylum seekers as protective policy is not transformed into protective practice. Recent research conducted in Johannesburg indicates that non-citizens in need of ART – including refugees and asylum seekers – report more challenges in accessing ART within the public sector than citizens⁷. This study indicates that protective frameworks and NDOH policies are not applied uniformly as public institutions appear to determine their own policies that counter existing legislation. Non-nationals report being denied ART in the public sector as they are not in possession of a green bar-coded South African identity booklet, as well as for ‘being foreign’. Rather than referring to an appropriate government ART roll-out site, local government clinics refer non-nationals out of the public sector and directly into the NGO sector in order to access ART. Many non-nationals, regardless of immigration status, who test positive for HIV at government clinics, are referred out of the public health sector as soon as they are in need of ART (which in many cases is at the time of testing). This results in a dual-health care system, public and non-governmental, providing ART through separate routes, to different groups of people. This raises concern in terms of (1) logistical issues, particularly through cross-referrals, and (2) the responsibility of the

¹ For further discussion see CoRMSA (2008) Protecting Refugees, Asylum Seekers and Immigrants in South Africa.

² For further discussion see Landau, L (2006) Protection and Dignity in Johannesburg: Shortcomings of South Africa’s Urban Refugee Policy *Journal of Refugee Studies* 19(3) 308

³ For details of health access challenges experienced by non-nationals, see: CoRMSA (2008) Protecting Refugees, Asylum Seekers and Immigrants in South Africa, and *Challenges to the successful implementation of policy to protect the right of access to health for all in South Africa*, Report prepared on behalf of the Migrant Health Forum for Dr Patrick Maduna Chief of Services: Gauteng Department of Health, June 2008 available online: <http://migration.org.za/>

⁴ Forced Migration Studies Programme, University of the Witwatersrand

⁵ Ref: BI 4/29 REFUG/ASYL 8 2007

⁶ Department of Health (2007) HIV & AIDS and STI Strategic Plan for South Africa, 2007 – 2011. April 2007: Pretoria: Department of Health, p56

⁷ Vearey, J. and Palmay, I. (2007) Assessing non-citizen access to antiretroviral therapy in Johannesburg. Forced Migration Studies Programme, University of the Witwatersrand

public sector being met by NGO providers.

The study found that these individuals are not health migrants – they did not migrate to South Africa in order to access ART. Most first tested for HIV in South Africa, having been here for a period of time. The majority of respondents reported first testing for HIV only when they were already sick, this was found to be the same for the citizen group with no significant difference observed between the two groups.

Another important finding that lends support to the provision of ART to all individuals within South Africa is that no significant difference was found between non-citizen and citizen clients in their reports of either not collecting treatment, or not taking treatment.

Recommendations: the need to ensure continued provision of ART to all non-nationals

HIV is a public health issue and ensuring the free – and uninterrupted - provision of ART to all displaced individuals within South Africa has a public health benefit. Whilst the numbers of non-nationals within South Africa are small, they are significant. Without providing ART to those who require it, morbidity – and ultimately mortality – will increase.

The South African public health sector has a responsibility to ensure the continued, uninterrupted provision of free basic health services and ART to all displaced non-nationals – including those who remain self-settled, and those accommodated in temporary shelters and camps. It is essential that the right to ART is upheld for all within South Africa. Existing guidelines for the provision of ART to displaced persons will be of use to all ART providers, within the public and NGO sectors (see the Clinical guidelines on antiretroviral therapy management for displaced populations attached to this edition of *Transcript*).

Appropriate awareness raising and training within the public health care sector relating to the rights of displaced persons – both those within camps and those who remain self-settled - is urgently required.

The Society Guidelines

A copy of the **Clinical Guidelines for ARV Therapy Management for Displaced Populations** is attached to this newsletter. To order additional copies or the French language version of the guidelines, please contact Chloe at (+) 11 341 0162 or hardyc@sahivsoc.org

The following guidelines are available on our website www.sahivsoc.org and will eventually be available on www.sajhivmed.co.za

- **Nutrition:** Chapters 1 & 2 published in June 2007. Chapters 3 - 6 published in April 2008.
- **Adult ART:** Guidelines published in April 2008.
- **Cryptococcal Meningitis:** Published in December 2007, with poster.
- **Prisoners:** Now finalized - to be published in June 2008, with poster.
- **Renal Replacement Therapy:** To be published in June 2008.
- **Displaced Populations:** Published in 2007.

All the published guidelines are printed in the Journal of HIV Medicine and available on the Society website www.sahivsoc.org and will eventually be available on www.sajhivmed.co.za

The Society would like to thank the following companies, organizations and donors for their financial support in producing the above guidelines:

ASPEN, ATLANTIC PHILANTHROPIES, CIPLA MEDPRO, PFIZER, THE UNHCR

Conferences 2008

TB Conference:

Venue: ICC, Durban
Date: 1 – 4 July 2008
Registration deadline: Pre-conference registration extended to 20 June 2008
For more information: <http://www.tbconference.co.za/>

Botswana International HIV Conference:

Venue: Gaborone International Conference Center (GICC)
Date: 17 – 20 September 2008
Registration deadline: 30 June 2008 (Registration fee before 30 June: 1 000 Pula - Late registration: 1 250 Pula)
For more information: <http://www.botshiv.org.bw/>

Rural Doctors Association Conference on Rural Health:

Venue: Beaufort West, Western Cape
Date: 18 – 20 September 2008
For more information: <http://www.rudasa.org.za/>

Internal Medicine Annual Update 2008:

Venue: Linder Auditorium, Wits Education Campus, Parktown, Johannesburg
Dates: 8 – 9 August 2008
For more information: Contact Jean Johnstone: tel: +27 11 933 2040; fax: +27 11 938 1454
E-mail: jean.johnstone@wits.ac.za or website: <http://web.wits.ac.za/NewsRoom/Conferences/Medicine/>

Conference bursaries

The Society offers bursaries to enable doctors, clinicians and other healthcare workers to attend the following conferences in 2008:

- **Botswana AIDS Conference, Gaborone, 17 - 20 September 2008**
- **Rural Doctors Association Conference, Beaufort West, Western Cape, 18 - 20 September 2008**

The above bursaries are available to doctors, clinicians and healthcare staff, working in the field of HIV, particularly in **rural and other under-resourced areas**, to attend **ONE** of the above conferences.

Bursaries will cover the relevant conference registration fee, and each successful applicant will receive the sum of R2, 200.00, to assist with travel and accommodation costs, upon proven attendance at the conference. **NB:** The Society will organize the registration of successful applicants and pay the registration fee directly to the conference. **Please note the Society cannot arrange, or pay for transport and accommodation – this will be the responsibility of the individual.**

Closing date for bursary applications: **30 July 2008**

Applicants for the bursaries should submit the following:

1. A brief outline of involvement in the field of HIV in a rural area.
2. A letter of support from applicant's manager/superior.
3. An abstract supporting the application.
4. A letter detailing a commitment to feed back, to colleagues, information gained at the conference.

Applications can be submitted by fax or e-mail to: Fax: + 11 341 0161 or e-mail: hardyc@sahivsoc.org

Branch Meeting Dates July – December 2008

IMPORTANT NOTICE:

Johannesburg branch meeting: September branch meeting: When we booked our meeting dates last year, we were informed by the venue that several Thursdays were already booked by other clients, and we therefore agreed to hold a few of our meetings on the last Tuesday of the month instead. One of these dates is **Tuesday 30 September**. As the calendar of religious holidays was not available at the time of making the booking, we were unaware that this is the date of **Rosh Hashanah** (Jewish New Year) in 2008. We have subsequently made every attempt to find an alternative date for the meeting, but the venue is now fully booked for the year, and we have been unable to change this date. We would like to express our sincerest apologies to our Jewish members who will not be able to attend the meeting as a result. We will do our best to ensure that such a mistake never occurs again.

Pretoria branch meeting: July meeting: Due to the fact that many of our members will be attending the TB Conference in Durban from 1 to 4 July, the date for the Pretoria branch meeting has been changed to **10 July 2008**.

EASTERN CAPE

East London:

Dates 2008: Dates to be confirmed. **Venue:** Drs du Buisson & Partners, Ampath Laboratory, 58 St James Rd, Southernwood, East London.

Time: 19:00. **More information:** Denise Lloyd: tel: (043) 743 4313, cell: 082 787 0755 or e-mail: lloyd@ampath.co.za

Mthatha:

Dates 2008: 13 September, 22 November. **Venues:** various. **More information:** Dr L. Nojoko: tel: (041) 485 3985, cell: 072 786 0207 or e-mail:

lungisa@iafrica.com

Port Elizabeth:

Dates 2008: 23 October. **Venue:** To be confirmed. **Time:** 19:00 for 19:30. **More information:** Dr Kas Kasongo: tel: (041) 451 4423 or e-mail:

kasongo@pathcare.co.za

FREE STATE

Bloemfontein:

Dates 2008: 7 August. **Venue:** Prosperitas Auditorium, Central University of Technology. **Time:** 18:00 for 18:30. **More information:** Prof Derick

Veldman tel: (051) 507 3266 or e-mail: dveldman@cut.ac.za

GAUTENG

East Rand / Benoni

Dates 2008: Dates for quarterly meetings to be confirmed. **More information:** Dr Nana or Dr Sarang. tel: (011) 421 1589, cell: 084 981 7101 or e-mail: blinds@iafrica.com

Johannesburg:

Dates 2008: 31 July, 28 August, 30 September, 30 October, 27 November **Time:** Finger supper: 19:00 and meeting: 19:30. **Venue:**

Pharmaceutical Society of SA, 52 Glenhove Rd, Houghton, JHB. **More information:** Chloe Hardy: tel: (011) 341 0162 or e-mail:

hardyc@sahivsoc.org

Pretoria:

Dates 2008: 10 July, 7 August, 4 September, 2 October, 6 November. **Times:** Light meal: 18:30 and talk: 19:15. **Venue:** Muelmed Hospital,

Boardroom, Pretorius St, between Hamilton and Leyds Streets. **More information:** Dr Mariette Botes: mariette@hivpractice.co.za; Dr Lynne

Webber: webberl@lancet.co.za; or Elizabeth Malela cell: 082 631 1588.

KWAZULU NATAL

Durban:

Dates 2008: 16 July, 13 August, 17 September, 15 October, 19 November. **Venue:** Susser and Stein Seminar room, Nelson R Mandela School of

Medicine. **More information:** Dr Nombulelo Magula: tel: 031 260 4231 or e-mail: magulan@ukzn.ac.za or Dr. Nokukhanya Mdlalose at

khanyi@uvolwethu.co.za

Pietermaritzburg:

Dates 2008: 8 July, 9 September, 11 November. **Venue:** Grey's Hospital Lecture Theatre, first floor. **Time:** 18:30 for 19:00. **More information:**

Ms Spume Ntuli: tel: 033-3954146 or e-mail: doug.wilson2@kznhealth.gov.za

LIMPOPO

Thohoyandou

New branch launching soon: watch this space for details.

MPUMALANGA

Seeking a new volunteer Branch Coordinator. Please contact Chloe if you are interested.

NORTHERN CAPE

Bo Karoo

Dates 2008: To be confirmed. **Venue:** To be confirmed. **Time:** 14:00. **More information:** Tsietsi Shushu: tel: (053) 343 0011; cell: 083 993 6976.

NORTH WEST PROVINCE

KOSH (Klerksdorp, Orkney, Stilfontein and Hartebeestfontein):

Dates 2008: 3 September, 3 December. **Venue:** Boardroom: Klerksdorp Hospital. **More information:** Tanya Nielson: tel: (018) 406 4241, cell: 083 511 0075 or e-mail: t Nielson@auruminstitute.org

Lichtenburg:

Dates 2008: 7 August, 2 October. **Time:** 18:30 **Venue:** Scott's Manor Guest House, 21 Bree St, Lichtenburg (Venue website: <http://www.scottsmanor.com/>). **More information:** Dr John Musonda: tel: (018) 632 3041, cell: 078 360 9595 or e-mail: jmusonda@nwpg.gov.za

Rustenburg:

Seeking a new volunteer Branch Coordinator. Please contact Chloe if you are interested.

WESTERN CAPE

Cape Town:

Dates 2008: 29 July, 26 August, 30 September, 28 October, 5 November. **Time:** snacks: 17:45 and meeting: 18:15. **Venue:** Main Lecture Hall, Institute of Infectious Diseases and Molecular Medicine, UCT. **More information:** Glenda: tel: (021) 671 7551 or e-mail: glenda.hardy@hivaidclinic.com

BOTSWANA

Gaborone (Southern Branch):

Dates 2008: Meetings are held on the first Thursday of every month. **Time:** 18:00. **Venue:** Boehringer Institute. **More information:** Dr. Victoria Nakimbugwe: e-mail: sahivcs@gmail.com

Francistown (Northern Branch):

Dates 2008: Meetings held on the first Wednesday of every month. **Venue:** Conference Room, Nyangabgwe Hospital. **Time:** 19:00. **More information:** Dr KF Mompoti: tel: (00) 267 713 09897, cell: (00) 267 241 2518 or Dr Samba Nyirenda: tel: (00) 241 5222 ext 216/241 7105, fax (00) 241 4704 or cell (00) 7131 8255.

LESOTHO

Dates 2008: 30 July, 27 August, 24 September, 29 October, 26 November, 17 December. **Venue:** Lehakoe Conference Hall (next to Central Bank of Lesotho). **More information:** Dr TG (Prithi) Prithiviraj: cell: (00) 266 6309 7068 or e-mail: prithidel@gmail.com

MALAWI

Seeking a new volunteer Branch Coordinator. Please contact Chloe if you are interested.

NAMIBIA

Windhoek and other centres

Dates 2008: To be confirmed. **More information:** Dr Flavia Mugala-Mukungu: tel: (00) 26 461 246 917 or e-mail: namhivsoc@namibnet.com

NIGERIA

Lagos

Dates 2008: to be confirmed. **More information:** Dr Austin N Nwokedi, e-mail: kediaustin@yahoo.com

ZAMBIA

Kitwe

Seeking a new Branch Coordinator. Please contact Chloe if you are interested.

Lusaka

Dates 2008: Third Wednesday of **every other** month. **Time:** 17:30. **Venue:** Variable location. **More information:** Dr Timothy Meade: tel: (+26) 097 865 279; e-mail: corpmed@zamnet.zm or Dr. Mike Bush: tel: (+26) 096 750 999 email: bush.doctor@zamnet.zm

Ndola

Dates 2008: Last Tuesday of every month **Time:** 18:00. **Venue:** Savoy Hotel. **More information:** Dr Mulenga Joseph: tel: (+260) 955 889 571, (+260) 966 780 608, (+260) 977 572 462 or e-mail: docmulengajo@zamtel.zm

ZIMBABWE

Harare

Dates 2008: To be confirmed. **More information:** Dr Ingrid Landman: tel: (00) 2634 704326 or email: sharinghealth@zol.co.zw

Mutare

Dates 2008: 16 July, 27 August, 24 September, 22 October, 19 November, 17 December. **More information:** Dr Munyaradzi Mukuzunga: drmukumunya@yahoo.co.uk or Dr Nyaradzai Sthole: nyariesit@yahoo.com

If you are interested in starting up a Branch in your area please contact Chloe at (+27) 11 341 0162 or hardyc@sahivsoc.org

Please note that branch coordinators are volunteers and do not receive a salary from the Society.

Nutritional HIV Focus Group

The group meets on alternative months, immediately prior to the Johannesburg Branch meetings, at the Glenhove Conference Centre.

Next meeting on: Thursday 28 August.

If you wish to join this discussion group, please send your first name, surname and email address to fatimas@sahivsoc.org

Important information on CPD Points

Meetings

All Society branch and focus group meetings held in South Africa are accredited with the HPCSA and SAMA. In terms of SAMA guidelines, health care workers who attend accredited meetings will receive **one CPD point for each hour** of the presentation (points are not awarded for time spent in registration, refreshment breaks or question and answer sessions). In order to receive your CPD certificate from us, you must complete the meeting register at each branch meeting that you attend. **If you do not complete the register in full, or if your details are not legible, we cannot provide you with a certificate.**

Questionnaires

Three points are awarded for the completion of each multiple choice questionnaire in the *Journal of HIV Medicine*, with a pass rate of 70%. Please note that the Autumn edition of the Journal, published in June, will be the last edition to contain a paper copy questionnaire that must be completed by hand. Questionnaires will in future be completed and submitted online. The online submission of completed questionnaires will enable members to not only check their answers but to instantly collect the relevant CPD points for correct answers. Full details will be included in the Autumn edition of the Journal.

Publications

The Society is always willing to accept articles from authors for consideration for inclusion in the *Journal of HIV Medicine*. Articles should be submitted to the editor online at www.sajhivmed.org.za. Once an article has been submitted, the author will receive an acknowledgement of receipt, and the article will then be subject to a peer review. The authors of all accepted and published articles will be awarded 15 CPD points, and co-authors will receive 5 CPD points. Reviewers of published articles will receive 3 CPD points. We are happy to accept articles from people writing for publication for the first time, and provide support to first-time authors.

Services Available

1. PROBONO.ORG HIV / AIDS LEGAL CLINIC

When: 9h00 – 12h00 every Tuesday

ProBono.Org, a non-profit clearing house for public interest law matters currently operating in Gauteng, provides a weekly legal clinic offering **free legal advice and services** to people experiencing **HIV/AIDS related discrimination**.

The Clinic operates as follows:

- The clinic will open from 9:00 to 12:00 every Tuesday of the year (unless it is a public holiday).
- The clinic will be staffed by attorneys who make themselves available on a pro bono basis.
- Clients will be consulted on 'first come first serve' basis.
- Attorneys will assist clients with: advice, opinions, non-litigation interventions, alternative dispute resolution, and/or litigation.
- As far as possible, attorneys will attempt to resolve the problems immediately. Where this is not possible, the client will become a client of the relevant firm, and the attorney will finalise the matter on a pro bono basis.

For more information on the HIV/AIDS Legal Clinic: tel: 011 336 9510 or fax: 011 336 9511 or e-mail: esther@probono.org

2. TOLL-FREE NATIONAL HIV HEALTH CARE WORKER HOTLINE

The Medicines Information Centre (MIC) is situated within the Division of Clinical Pharmacology, Department of Medicine at the University of Cape Town's Faculty of Health Sciences. It is the largest and only clinically-based medicine information centre in South Africa and provides information to both public and private sector health care professionals. The MIC in collaboration with the Foundation for Professional Development and USAID / PEPFAR, provides a **toll-free** national HIV hotline to all health care workers in South Africa for **patient treatment** related enquiries.

Tel: 0800 212 506

E-mail: pha-mic@uct.ac.za

Fax: 021 448 0503

The hotline operates from **Mondays to Fridays 8:30 – 16:30**.

Job Opportunities

Pepfar Fellow position available in Jozi Family Medicine:

There is a position for a Pepfar-funded Fellow in Jozi Family Medicine. With South African citizenship, the right experience and current postgraduate studies you could be eligible for this with over R300 000 pa. The person will support the rollout of PMTCT/Dual Therapy in the context of the Family Medicine Registrar programme and community practices in Sub-District F in Johannesburg. See www.edistrictnews.com for [details](#) and [brochure / application forms](#). Please contact Dr Moosa at shabir@drmoosa.co.za urgently or call Ayesha at 083 7247674.

The latest Antiretroviral (ART) SEP Prices Direct from the Manufacturer

NB WARNING: an additional fee may be incurred when purchasing per prescription, per month, for dispensing and door to door delivery from pharmacies. Prices are accurate at time of going to press. Updated prices are available at: <http://www.sahivsoc.org/index.php/arvpricelist>

NAME	STRENGTH	NAPPI CODES	COMPANY	QUANTITY	PRICE DIRECT FROM MANUFACTURER	GSK ACCESS PRICE
KALETRA CAPSULES		700922	ABBOTT	180	R 319.07 INC VAT	
KALETRA SYRUP		700924	ABBOTT	300ML	R 319.07 INC VAT	
NORVIR CAPSULES	100MG	836095	ABBOTT	84	R 74.44 INC VAT	
NORVIR SYRUP	80MG/ML	838527	ABBOTT	90ML	R 63.74 INC VAT	
ALUVIA TABS		710028	ABBOTT	120	R 319.07 INC VAT	

ADCO-LAMIVUDINE	150MG	707962001	ADCOCK	60	R 81.50 INC VAT	1
ADCO-LAMIVUDINE <small>alcohol and sugar free</small>	10MG/1ML	708713001	ADCOCK	240ML	R 64.88 INC VAT	1
ADCO-LUMIVUDINE SOL	10MG/1ML	708708001	ADCOCK	240ML	R 64.88 INC VAT	1
ADCO-ZIDOVUDINE <small>(blister)</small>	300MG	703809001	ADCOCK	60	R 225.00 INC VAT	1
ADCO-ZIDOVUDINE SYR	50MG/5ML	708709001	ADCOCK	200ML	R 68.89 INC VAT	1
ADCO-ZIDOVUDINE <small>alcohol and sugar free</small>	50MG/5ML	708711001	ADCOCK	200ML	R 68.89 INC VAT	1
ADCO-NEVIRAPINE <small>(blister)</small>	200MG	707961001	ADCOCK	60	R 175.00 INC VAT	1
ADCO-EFAVIRANZ	600MG	709545001	ADCOCK	30	R141.36 INC VAT	1
ASPEN LAMIVUDINE	150MG	703716001	ASPEN	60	R 86.91 INC VAT	
ASPEN LAMIVUDINE SYR	10MG/ML	703715001	ASPEN	240ML	R 66.45 INC VAT	
ASPEN LAMZID	150/300MG	703627001	ASPEN	60	R 274.39 INC VAT	
ASPEN ZIDOVUDINE	100MG	705452001	ASPEN	100	R 110.12 INC VAT	
ASPEN ZIDOVUDINE	250MG	705455001	ASPEN	60	R 219.97 INC VAT	
ASPEN ZIDOVUDINE	300MG	703712002	ASPEN	60	R 243.79 INC VAT	
ASPEN ZIDOVUDINE	10MG/ML	703713001	ASPEN	200ML	R 72.42 INC VAT	
ASPEN NEVIRAPINE	200MG	703718001	ASPEN	60	R 182.12 INC VAT	
ASPEN NEVIRAPINE	10MG/ML	704731001	ASPEN	240ML	R 112.47 INC VAT	
ASPEN DIDANOSINE	25MG	703330001	ASPEN	60	R 95.77 INC VAT	
ASPEN DIDANOSINE	50MG	703332001	ASPEN	60	R 107.26 INC VAT	
ASPEN DIDANOSINE	100MG	703333001	ASPEN	60	R 117.48 INC VAT	
ASPEN DIDANOSINE	150MG	703392001	ASPEN	60	R 176.22 INC VAT	
ASPEN STAVUDINE	15MG	704885001	ASPEN	60	R 27.46 INC VAT	
ASPEN STAVUDINE	20MG	701172001	ASPEN	60	R 30.65 INC VAT	
ASPEN STAVUDINE	30MG	701174001	ASPEN	60	R 36.39 INC VAT	
ASPEN STAVUDINE	40MG	701175001	ASPEN	60	R 42.92 INC VAT	
TRUVADA		708254001	ASPEN	30	R 351.35 INC VAT	
VIREAD (TENOFOVIR)	300MG	708253001	ASPEN	30	R 212.25 INC VAT	
ASPEN EFAVIRENZ	600MG	710019001	ASPEN	60	R 136.80 INC VAT	
VIDEX TABLETS	25MG	793221	BMS	60	R 114.23 INC VAT	
VIDEX TABLETS	50MG	842961	BMS	60	R 114.23 INC VAT	
VIDEX TABLETS	100MG	793213	BMS	60	R 121.06 INC VAT	
VIDEX TABLETS	150MG	793205	BMS	60	R 167.69 INC VAT	
VIDEX POWDER		847518	BMS	1	R 112.79 INC VAT	
VIDEX EC TABLETS	250MG	704783	BMS	30	R 164.42 INC VAT	
VIDEX EC TABLETS	400MG	703785	BMS	30	R 212.19 INC VAT	
ZERIT CAPSULES	15MG	841315	BMS	60	R 44.71 INC VAT	
ZERIT CAPSULES	20MG	837458	BMS	56	R 44.63 INC VAT	
ZERIT CAPSULES	30MG	841323	BMS	60	R 44.63 INC VAT	
ZERIT CAPSULES	40MG	837407	BMS	60	R 44.63 INC VAT	
ZERIT SOLUTION	1MG/ML	846074	BMS	200ML	R 13.22 INC VAT	
REYATAZ	150MG	708257	BMS	60	R 284.18 INC VAT	
REYATAZ	200MG	708258	BMS	60	R 357.56 INC VAT	

HYDREA CAPSULES	500MG	731706	BMS	100	R 184.23 INC VAT	
VIRAMUNE TABLETS	200MG	840645	BOEHRINGER-INGELHEIM	60	R 180.52 INC VAT	
VIRAMUNE SYRUP	10MG/ML	861855	BOEHRINGER-INGELHEIM	240ML	R 125.37 INC VAT	
CIPLA –EFAVIRENZ	600MG	709331001	CIPLA	30	R 136.80 INC VAT	
CIPLA-DUOVR		707300001	CIPLA	60	R 257.64 INC VAT	
TRIOMUNE -30		707970001	CIPLA	60	R 235.98 INC VAT	
TRIOMUNE -40		705968001	CIPLA	60	R 235.98 INC VAT	
CIPLA-LAMIVUDINE	300MG	709337001	CIPLA	30	R 85.50 INC VAT	
CIPLA-LAMIVUDINE Tabs	150MG	701282003	CIPLA	60	R 85.50 INC VAT	
CIPLA-LAMIVUDINE Oral Sol	50MG/5ML	704041002	CIPLA	240ML	R62.88 INC VAT	
CIPLA-LAMIVUDINE Oral Sol	50MG/5ML	704041001	CIPLA	100ML	R 26.20 INC VAT	
CIPLA-NEVIRAPINE Tabs	200MG	704036001	CIPLA	60	R 171.00 INC VAT	
CIPLA-NEVIRAPINE Oral Susp	50MG/5ML	704040001	CIPLA	240ML	R 101.46 INC VAT	
CIPLA-ZIDOVUDINE Capsules	100MG	704037001	CIPLA	120	R 172.37 INC VAT	
CIPLA-ZIDOVUDINE Tabs	300MG	704038001	CIPLA	60	R 228.91 INC VAT	
CIPLA-ZIDOVUDINE Oral Sol	50MG/5ML	704039001	CIPLA	100ML	R 33.39 INC VAT	
CIPLA-ZIDOVUDINE Oral Sol	50MG/5ML	704039002	CIPLA	200ML	R 66.78 INC VAT	
STAVIR 30	30MG	701342001	CIPLA	60	R 33.09 INC VAT	
STAVIR 40	40MG	701344001	CIPLA	60	R 38.30 INC VAT	
3TC TABLETS	150MG	821632	GSK	60	R 112.18 INC VAT	R 45.68 INC VAT
3TC SYRUP	10MG/ML	821640	GSK	240ML	R 79.62 INC VAT	R 47.31 INC VAT
COMBIVIR TABLETS		875821	GSK	60	R 365.94 INC VAT	R 139.27 INC VAT
RETROVIR CAPSULES	100MG	784265	GSK	100	R 214.32 INC VAT	R 104.94INC VAT
RETROVIR CAPSULES	250MG	837350	GSK	60	R 294.12 INC VAT	R 142.25 INC VAT
RETROVIR CAPSULES	300MG	885317	GSK	60	R 320.45 INC VAT	R 114.08 INC VAT
RETROVIR INFUSION		825018	GSK	5X20ML	R 319.46 INC VAT	R 115.87 INC VAT
RETROVIR SYRUP	10MG/ML	794236	GSK	200ML	R 83.85 INC VAT	R 55.25 INC VAT
ZIAGEN TABLETS	300MG	898531	GSK	60	R 895.41 INC VAT	R 307.65 INC VAT
ZIAGEN SYRUP	240ML	898538	GSK	240ML	R 339.13 INC VAT	R 129.79 INC VAT
TRIZIVIR		703537	GSK	60	R 1517.72 INC VAT	R 459.63 INC VAT
CRIVAN CAPSULES	400MG	824445	MSD	120	R 281.37 INC VAT	
CRIVAN CAPSULES	400MG	824445	MSD	180	R 422.06 INC VAT	
STOCRIN CAPSULES	50MG	893536	MSD	30	R 25.75 INC VAT	
STOCRIN CAPSULES	200MG	862371	MSD	90	R 277.29 INC VAT	
STOCRIN TABLETS	600MG	703318	MSD	30	R 166.90 INC VAT	
INVIRASE CAPSULES	200MG	825697	ROCHE	270	R 655.71 INC VAT	
HIVID	0.375MG	797179	ROCHE	100	R 160.26 INC VAT	
HIVID	0.75MG	797189	ROCHE	100	R 325.38 INC VAT	

BACTRIM DS		706442	ROCHE	10	R 61.11 INC VAT	
BACTRIM INFUSION		706418	ROCHE	AMPULES	R 182.12 INC VAT	
BACTRIM		706434	ROCHE	20	R 53 .30 INC VAT	
VIRACEPT POWDER	50 MG/G	857211	ROCHE	144	R 288.15 INC VAT	
VIRACEPT TABLETS	250 MG	857203	ROCHE	270	R655.55 INC VAT	
FORTO-VASE CAPSULES	200MG	857181	ROCHE	180	R 903.63 INC VAT	
SONKE LAMIVUDINE	150MG	703378	SONKE	60	R 44.40 INC VAT	
SONKE LAMI+ZIDO		707971	SONKE	60	R 250.80 INC VAT	
SONKE NEVIRAPINE	200MG	709533	SONKE	60	R 171.00 INC VAT	
SONKE LAMI NEV STAV		709840	SONKE	60	R 231.19 INC VAT	
SONKE ZIDOVUDINE	300MG	709531	SONKE	60	R 228.00 INC VAT	

Disclaimer: The views of the editor and contributors do not necessarily reflect the views of the Southern African HIV Clinicians Society's President, Executive Committee or the Society's 14 500 members.