

Downturn squeezes health programs

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<p>Nanditasingh</p> <p>feel the pinch, India included.</p>	<p>Downturn is taking its toll on India's health programs. UN AIDS has put a freeze on the Global Fund spend until 2014. The decision came about recently, while reviewing the applications for its latest round of funding that would have released money for 2011-13. About 150 countries will</p> <p>The impacted diseases are Tuberculosis, Malaria and AIDS.</p>
<p>Image not found or type unknown</p> <p>Nandita Singh</p> <p>The author is</p> <p>Editor of BioSpectrum</p> <p>nanditas@cybermedia.co.in</p> <p>are yet to be outlined.</p>	<p>This Global Fund, since its creation in 2002, has spent over \$20 billion for improving health outcomes in these countries. Of this, almost \$2 billion came to India as free money, as India was classified as low-income developing country. Now, India will have to summon its own resources to bridge the funding gap. A step in the direction has already been taken with the health spend increase as a percentage of GDP. On the recommendation of a High Level Expert Group (HLEG), the Planning Commission has increased the budget-share for the health sector to 2.5 percent of GDP from the earlier 1.8 percent. The HLEG has proposed that every Indian citizen should be entitled to a National Health Package of free services. The specific services</p>
<p>not suffer.</p>	<p>But since India's health spend was one of the lowest globally, this one step cannot fill in for the billions of dollars of foreign funding that will no longer be available for research and development. And, if the GDP gets a hit the net effect on health spend will be negligible. The country needs to revise plans and devise means to ensure that its disease specific programs do</p>
<p>is a significant achievement</p>	<p>Meanwhile, in 2011, December 1, which is celebrated as the World AIDS Day, marks a major milestone in the fight against AIDS. India, which has the highest population of the HIV-infected people in Asia, recorded a 56 percent decline in new HIV infections from the peak of 1997. This</p>
<p>the path to HIV vaccine has</p>	<p>What has helped India achieve this 56 percent decline in new HIV infections is its National AIDS Control Program that has been working closely, since 1991, with World Bank and a number of other partners to prevent vulnerable population that is at the highest risk of contracting HIV. The focused, targeted approach has worked in a cost effective manner. The AIDS pandemic has been slowed considerably. Prevention strategies for vulnerable population have slowed the transmission rates. Coupled with antiretroviral drugs, this has been saving lives. Resources for prevention and treatment are important in the light of the fact that first-generation AIDS vaccine is still at least 10 years away, though the scientific understanding of</p> <p>improved considerably.</p>
<p>of a number of broadly neutralizing antibodies</p>	<p>A team of researchers associated with the International AIDS Vaccine Initiative (IAVI), The Scripps Research Institute, and biotechnology companies Theraclone sciences and Monogram Biosciences reported the isolation of 17 novel antibodies capable of neutralizing a broad spectrum of variants of HIV virus. This apart, the RV144 trial that involved 16000 volunteers in Thailand has given scientific community a lease of hope. Further, the structural characterization</p> <p>of a number of broadly neutralizing antibodies has boosted the vaccine research efforts.</p> <p>Appropriate resource allocation is a necessity. Given that in India, total number of cases per year for HIV (2.4 million), Malaria (2 million) and Tuberculosis (1.9 million) are all competing for resources.</p>