

MTCTP with Nevirapine is cost-effective and cost saving

Mother-to-child transmission prevention (MTCTP) of HIV/AIDS is cost-effective and will probably save the state money. A countrywide programme using Nevirapine and formula milk will cost less than R250 million (not even 1% of the health-budget, or approximately R250 per pregnancy).

Furthermore if the additional costs of treating HIV-positive children are taken into account, then implementing MTCTP is cheaper than not implementing it. This implies that MTCTP is cost saving. The state will save about R300 per public sector pregnancy if it implements MTCTP.

Professor Nicoli Nattrass, an economist at the University of Cape Town, has submitted an expert affidavit in the lawsuit against the Minister of Health. In her affidavit, she explains that all research that she is aware of shows that MTCTP is cost-effective. (Cost-effectiveness is a measure used to evaluate whether a medical intervention is worthwhile.)

These studies use the standard measures of cost-effectiveness. They all come to the conclusion that MTCTP is cost-effective and should be implemented in a middle-income country like South Africa. The Department of Health's own research (conducted by Dr Martin Hensher) agrees with this conclusion. Dr Nattrass' affidavit further shows that when one takes into account the costs to the public health-care system of treating HIV-positive children, a MTCTP programme is likely to save the state money (it will be cost-saving).

Rest in peace Sibongile Mazeka



It was another tragic moment for all HIV/AIDS activists and the family of a 5 year old girl, when we gathered at Langa to commemorate the death of Sibongile Mazeka. Sibongile died on 11 September 2001. Sibongile is one of the thousands of children who continue to die unnecessarily because of governments failure to implement a national Mother-to-Child Transmission Prevention programme (MTCTP).

WHERE TO GET ADVICE ON MTCT

If you want advice on pregnancy and HIV you can contact your local clinic and speak to a doctor or nurse. You can call the **AIDS Helpline: 0800 012 322** or an

AIDS Training and Information Centre at one of the numbers below:

Cape Town	(021) 797 3527
Durban	(031) 300 3104
East London	(043) 705 2620
Johannesburg	(011) 725 6711/2
Louveld	(013) 759 2167
Mpumalanga	(013) 759 2167
Pietermaritzburg	(033) 395 1612
Port Elizabeth	(041) 506 1415

Sibongile's foster mother and aunt, Mrs Thembsa Mhlongo gave TAC an affidavit for the MTCT court case. The minister of health and the health MECs gave notice that they are

opposing TAC's court case on 10 September 2001. On 11 September, Sibongile Mazeka died of HIV/AIDS related illness.

Sibongile was born in 25 June 1996. By that time the MTCTP methods were already known and established in the USA. We must ask: Why have we in South Africa had to wait so long for this treatment? Had Sibongile's mother been given AZT at birth, Sibongile would not have been infected with HIV. She would still be alive today. Why must children suffer and die prematurely when there is treatment that can save them? Prevention is very much cheaper than the costs of hospitalization. Sibongile struggled for her life. Since August 2000 she was admitted to hospital thirteen times suffering from illnesses such as pneumonia. Thembsa Mhlongo, Sibongile's foster mother said: "It was hard for me and I couldn't sleep because of praying when doctors told me that Sibongile cannot last because she was too sick."

This is a painful experience not only to her family but also to everyone who is involved in the HIV/AIDS struggle — as could be seen at Sibongile's memorial service in Langa. There were also children from her preschool to sing for her. Her teachers shared their experiences, telling about what kind of child Sibongile was. Bravely, Mrs Mhlongo gave evidence to the Parliamentary Joint Monitoring Committee on the life and status of women. She forcefully brought home to the MPs' present the need for a national MTCTP programme.

TAC members pass their heartfelt condolences to the Mhlongo family

Jooste report

Mandla Mngoma

TAC works with Jooste

Mandla Mngoma, coordinator of TAC Western Cape, had a meeting with Jooste Hospital top management including Mr. Kathrine, Dr Ferdi Frans and one nursing sister. During the meeting it was agreed that Project Ukwazi would educate the Jooste staff, patients and others. TAC would also introduce HIV/AIDS training videos into the waiting areas.

This initiative is part of TAC's programme to improve the standard of care for HIV positive people in our hospitals. We have the governments *Patients Charter* and most importantly the *Standard Treatment Guidelines* for people living with HIV. But who makes sure that this Charter and Guidelines are being respected? HIV positive people have experienced many problems with the standard of care at Jooste Hospital, which serves Nyanga, Gugulethu, Manneberg, Hanover Park and as far as Khayelitsha.

Jooste management complained about the quality of the work of some of the volunteers from various organizations that are working with them. They insisted that once they accept volunteers these volunteers must abide by the rules and regulations of Jooste Hospital. Volunteering at a hospital is a serious business as people's lives are at risk.

"Mandla discussed concerns that TAC volunteers have about Jooste with Dr. Frans and Mr Kathrine. The Jooste officials said that Jooste's performance is of a good standard and that they are not running short of staff as they've just employed 16 nurses. They said that they have enough beds for the patients. Mandla main-



tained that according to feedback from TAC members and the broader community, there is a need for improved care for HIV positive people.

DIFFUCAN AND AZT AVAILABILITY

Jooste has enough Diflucan for the treatment of thrush and cryptococcal meningitis. AZT is given to the rape survivors within 72 hours. Management said that TAC is welcome to start its programme of educating people about mother-to-child HIV prevention and treatment literacy. Project Ukwazi will be moving into Jooste in a serious way in the coming month! TAC members should follow this example and form committees to work with their local hospitals to address these problems and shortcomings in a constructive spirit. If hospital authorities don't embrace this cooperation it can only lead to a build up of anger in the community. Watch this space for more details on TAC's efforts to transform the quality of care at Jooste! TAC thanks Jooste for working with us.

TAC National Executive Committee Member Profile

Buyisile Ndhlovu

How many members of the TAC National Executive Committee do



you know? The first TAC National Congress elected a new NEC. To introduce you to TAC leaders, we will run a profile of NEC members in every ET issue. First on the list is Buyisile Ndhlovu from Northern Province (NP).

Buyisi was born in Sophiatown - Johannesburg. She studied nursing at Baragwanath, and Grootebush hospitals. In 1980 she started working at Chris Hani Baragwanath Hospital. She got married and moved to Northern Province where she worked at Tshidzini and Elim Hospitals. Currently she works for Elim Care Group project as coordinator.

Buyisi has 20 years experience working as a healthcare professional. She also has a diploma in advanced psychiatry from Stellenbosch University. In Elim, where she currently stays, she works in a number of projects aimed at community development. She shares her experiences with the community by working closely with all development committees and AIDS service organizations. Buyisi organized the first TAC workshop in the province

that was attended by more than 100 people. After joining TAC, Buyisi resigned from the Elim Hospital. She wanted to have more time working with PWAs and participate more actively in TAC. She joined the Elim Care Group. This is how seriously she takes her responsibilities at TAC. Buyi represents the children's sector within Treatment Action Campaign.

Buyi has four children, Kulani, seventeen, Ntjiso, fifteen, Dumisani eight, and Boitumelo who is six years old.

Should you need to contact Buyisi feel free to contact her at (015) 5563145. The next issue of Equal Treatment will bring you the TAC Executive committee profile of Zomokhule Zwane, TAC's National Organizer. (You can contact him in Durban on: 031 304 3673 or 072 2363750).