

Editorial: Other infectious diseases

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In this third issue of the SACEMA Quarterly, the focus is not on HIV/AIDS, but on other infectious diseases.

The first article reports on the prevention of sleeping sickness, by killing the tsetse flies carrying the disease, using baits. At present vector control is virtually the only option, as no effective medication is available. However, recently a new consortium has been formed to boost drug development for the treatment of this deadly, largely neglected, disease that affects millions of people worldwide (1).

The second article presents the Global Fund's approach to combating Malaria: The Affordable Medicines Facility-Malaria (AMFm), which mainly comes down to reducing the price of malaria treatment by means of subsidy. Although, besides the treatment options, there are also preventive measures available for malaria control (e.g. drugs, bed nets and nutritional supplements), currently there is no effective vaccine. Recently an article has been published in the *New England Journal of Medicine*, reporting on a study measuring the effect of receiving a prophylactic regimen of chloroquine (CQ) to stimulate immunity (2). It turned out that all 10 subjects in the vaccine group were protected against a malaria challenge with infected mosquitoes one month after discontinuation of CQ.

The last article discusses the status of tuberculosis (TB) in South Africa. For TB there have also been several developments regarding drug and vaccine development. According to a study published in the June issue of the *New England Journal of Medicine*, the first new TB drug in 40 years (TMC207) has been used successfully in a clinical trial in South Africa to treat patients who had newly diagnosed multidrug-resistant (MDR) pulmonary TB. The addition of TMC207 to standard therapy for MDR-TB reduced the time to conversion to a negative sputum culture, as compared with placebo, and increased the proportion of patients with conversion of sputum culture (48% vs. 9%) (3).

Furthermore, a Phase IIb trial of a candidate TB vaccine (MVA85A/Aeras-485) has recently started at the TB vaccine research site of the South African Tuberculosis Vaccine Initiative (SATVI) of the University of Cape Town (4).

In the editorial of the last issue of the SACEMA Quarterly it was reported that the WHO meeting on early antiretroviral therapy for HIV prevention was postponed due to the H1N1 epidemic. We are happy to announce that this meeting will now take place from 2-4 November 2009 in the Royal Hotel, Geneva. This meeting will immediately be followed (4-6 November) by a meeting of those interested in modelling the impact of test-and-treat and other interventions on HIV and TB. We hope to report on the discussions and outputs of these meetings in the next issue of the SACEMA Quarterly.

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Areas of interest: research methodology, infectious diseases epidemiology, migration and health.
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