



British Columbia
Centre for Excellence
in HIV/AIDS

Government of Canada's HIV/AIDS Response Insufficient, Misdirected and Divisive

*Minister Leaves AIDS 2010 Prior to
Announcement, Unavailable for Comment*

Vienna, Austria and Vancouver, British Columbia (July 20, 2010) – Dr. Julio Montaner, Director of the BC Centre for Excellence in HIV/AIDS, said that the Government of Canada's announcement today at the XVIII International AIDS Conference (AIDS 2010) regarding its response to the HIV and AIDS pandemic is insufficient and disappointing.

It does not address key issues in HIV/AIDS and ignores the call to arms from UNAIDS to expand the treatment as prevention strategy.

“As UNAIDS leads countries around the world to deepen their commitment to the made-in-B.C. concept of treatment as prevention, the government of Canada is standing on the sidelines,” said Montaner. “We need Canada to reflect the global commitment to treatment as prevention, and take a leadership role in this important initiative.”

The effort to develop a vaccine and a cure are important, said Montaner. “We stand behind the global community in its quest to achieve these breakthroughs. However, the Canadian government's commitment in this area is far too small when compared to the size of the government resources available and the funding needed.”

Ottawa has ignored the emerging and proven science that supports treatment as prevention, which seeks to provide effective treatment and care to all eligible HIV positive individuals worldwide.

“Today, Canada must make a significant commitment to treatment as prevention, and help the global community provide highly active antiretroviral therapy (HAART) to the millions in need of this treatment,” said Montaner. “It is criminal neglect to ignore the plight of those affected by HIV and dying of AIDS now. However, the government of Canada under Prime Minister Stephen Harper does not seem to hear their pleas for help.”

Earlier, Prime Minister Stephen Harper, as host of the G8 summit in 2010, turned down an invitation to be a plenary speaker at AIDS 2010 to report on the progress of the G8 in meeting its commitment to universal access. (The G8 has failed to deliver its 2005 pledge of universal access to care, treatment and prevention of HIV/AIDS by 2010.) Montaner noted that the Honourable Leona Aglukkaq, Canada's Minister of Health, was barely visible at the AIDS 2010 conference.

She left AIDS 2010 on the day that her government released its announcement and was unavailable for immediate comment on her HIV and AIDS plan.

“I understand her hurry to Get Out of Dodge before conference media could ask questions about her government’s bare-bones plans,” said Montaner. “Her decision to make herself unavailable to speak to her announcement says more than enough about the Government of Canada’s lack of commitment to HIV and AIDS.”

Montaner added: “It comes to a matter of priorities for our federal political leadership. Those infected, affected and at-risk for HIV are expendable here and abroad.”

Canadians have played a key role in pioneering HAART, the landmark drug cocktail that has been adopted in Canada and around the world as the gold standard treatment for HIV.

For HIV-positive people with access to the medication, HAART has successfully turned HIV into a chronic but manageable condition. By dramatically decreasing the level of HIV in the blood and putting the disease in long-term remission, an HIV-infected individual who is on a regular regimen of HAART can expect to live decades of normal life.

HAART uptake today is suboptimal in Canada, where access to the drugs and necessary medical services is free. This is particularly apparent among hard to reach individuals who often have additional challenges related to drug dependency, mental illness, limited education and unstable housing. Particularly affected is aboriginal individuals who have greater risk of HIV infection and greater AIDS mortality than non-aboriginals in Canada. The BC-CfE has shown that actively expanding HAART coverage to all those in medical need would be highly cost effective as a strategy to control HIV/AIDS related morbidity and mortality among those who are HIV infected.

Since 1996, HAART has resulted in annual reduction of AIDS-related diseases and deaths by over 90 per cent in B.C. HAART is credited with saving nearly three million lives worldwide in the last 13 years.

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About the B.C. Centre for Excellence in HIV/AIDS:

The BC Centre for Excellence in HIV/AIDS (BC-CfE) is Canada’s largest HIV/AIDS research, treatment and education facility. The BC-CfE is based at St Paul’s Hospital, Providence Health Care, a teaching hospital of the University of British Columbia. The BC-CfE is dedicated to improving the health of British Columbians with HIV through developing, monitoring and disseminating comprehensive research and treatment programs for HIV and related diseases.

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