**5,500 Women Pregnant Women HIV Positive in Taraba**
from allafrica.com

NIGERIA—About 5, 500 pregnant women in Taraba State are HIV positive, the state's Commissioner for Health, David Tikon has said. Tikon said at the commissioning of the early infant HIV diagnosis laboratory [EID] for the North-east zone that the estimate was based on the 2005 sentinel survey. "Every year a large number of newborn children are exposed to the HIV virus in the state with the risk of acquiring the infection from their mothers", he said. According to the commissioner, estimates based on the 2005 sentinel survey also indicate that there were about 63, 300 HIV infected people in the state.

Describing the HIV prevalence ratio in Taraba as alarming, Tikon said; "Though the HIV prevalence in Taraba dropped from 6.1 percent in 2005 to 5.2 percent in 2007, we are still a long way from subduing the disease." Taraba, Tikon added, would not relent in tackling the problem.

He listed the establishment of the State Action Committee on HIV/AIDS as well as the setting up of anti-retroviral therapy [ART] centre in the state capital as part of measures taken by the government to fight the spread. Governor Danbaba Suntai said the reduction of the HIV prevalence ratio from 6.1 to 5.2 was commendable.

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**Widespread sexual violence puts girls at risk for HIV in Swaziland**
from plusnews.org

NAIROBI, 13 May 2009 (PlusNews) - One in three Swazi girls has experienced some form of sexual violence before the age of 18, which often leads to serious social and health problems including HIV and unwanted pregnancies, a new study has found.

"[Sexual violence] has devastating short-term and long-term mental, reproductive, and physical health consequences," said the authors of the study supported by the UN Children's Fund and the United States Centres for Disease Control, and published in the latest edition of the British medical journal, The Lancet.

An estimated 22 percent of Swazi women aged between 15 and 24 are infected with HIV; the authors noted that sexual violence could be an important route of HIV transmission in high-prevalence countries like Swaziland.

The study categorised sexual violence into types including forced intercourse, coerced intercourse, and forced touching. Forced intercourse before the age of 18 was reported by five percent of girls, with coerced intercourse being reported by nine percent. Almost 90 percent of girls reported the first experience of sexual violence between the ages of 13 and 17.

"Sexual violence was associated with significantly increased probability ... of ever feeling depressed, thoughts of suicide, attempted suicide, unwanted pregnancy, pregnancy complications or miscarriages, sexually transmitted diseases, difficulty sleeping, and alcohol consumption," the report said.

Disturbingly, researchers found that in three-quarters of cases, the perpetrators of sexual violence were men or boys related to or known to the girls.

"Future strategies should focus on prevention of perpetration by men of sexual violence, and since sexual- and intimate-partner violence might have common roots, local and national initiatives could be reviewed, adapted and scaled up for this purpose," the authors recommended.

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**Researchers develop questions to determine risk of HIV/AIDS drug resistance**
from nytimes.com

In Africa, AIDS patients rarely get viral load testing to see whether they are developing dangerous resistance to their first-line drugs. The testing, routine in wealthy countries, is just too expensive and complex.

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Scientists from Makerere University’s hospital in Kampala, Uganda, along with American and Belgian scientists, have developed a formula, based on close questioning of patients, for predicting which ones are most likely to have treatment failure.

Their methods, described in The Journal of the International AIDS Society, appear to work better than current World Health Organization guidelines, which are based on clinical signs of advancing disease and a CD4 count, a technique easier and less expensive than viral load tests.

The doctors questioned 496 patients about how often they had taken their pills in the last three days, the last four weeks and since they began taking them; they also asked whether the patients had ever missed two days’ worth. They asked whether patients had ever paid for treatment and whether women had ever had single-dose nevirapine to protect new babies. They also asked about weight loss and rashes. Blood samples were taken for CD4 counts.

Having ever missed treatment for two days, and having ever had a 30 percent drop in CD4 count (a white blood cell measure that indicates AIDS progression) predicted treatment failure, the researchers found. They suggested that viral load testing, if available, be done on those patients first.

To access this article online, go to http://www.nytimes.com/2009/05/19/health/19glob.html?_r=2&ref=science