



Combating HIV/AIDS in developing countries

On another theme entirely, we creep ever closer to 2015, by which time the millennium development goals should have been met. One of these is to halt, or begin to reverse, the spread of HIV/AIDS. We could be forgiven for thinking that this particular goal is all but unachievable, looking at current figures in Africa in general and in southern Africa in particular. According to Daniel Hogan and colleagues, writing in a recent issue of the *British Medical Journal*, since the millennium development goals were set, the incidence of HIV infection and associated mortality has continued to climb in most developing countries. In 2004 there were 5 million new infections and 3 million deaths worldwide. As the authors point out, most countries have little hope of attaining the HIV-related target expressed in goal 6 of the millennium goals, the main problem being shortage of resources; the projected funding gap for the year 2007 is estimated to be around 50% of the need. This study focuses on 2 related issues – whether resources currently available are achieving as much as they could and how best to use new resources that may become available.

The authors set out to assess the costs and health effects of a range of interventions for preventing the spread of HIV/AIDS in the context of the millennium development goals, using an epidemiological model. They analysed 2 regions – countries in sub-Saharan Africa with high adult and child mortality and countries in south-east Asia with similar mortality patterns and levels. They looked at behavioural and biological parameters from clinical and observational studies and population-based surveys. They judged the effectiveness of interventions from reports, expert opinion and the WHO-CHOICE database.

They found that in both regions interventions that focused on mass media, education and treatment of sexually transmitted infections for women sex workers and among the general population cost less than \$Int150 (international dollars) per disability adjusted life year (DALY) averted. Voluntary counselling and testing costs less than \$Int350 per DALY averted in both regions, while prevention of mother-to-child transmission costs less than \$Int50 per DALY averted in Africa, but around \$Int350 per DALY averted in South East Asia. In both regions school-based education and various antiretroviral treatment strategies cost between \$Int500 and \$Int5 000 per DALY averted.

From this analysis, the authors concluded that mass media campaigns, interventions for sex workers and treatment for sexually transmitted infections are the most effective ways of reducing HIV transmission where resources are scarce. However, they also pointed out that, were more money put into prevention of mother-to-child transmission, voluntary counselling and testing and school-based education, these interventions would become even more cost-effective, based on standard international benchmarks. They also point out that antiretroviral therapy is at least as cost-effective in improving population health as some of these interventions. Perhaps they need to contact our Minister of Health.

Hogan DR, *et al.* *BMJ* 2005; **331**: 1431-1437.

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BOOK REVIEW

Rook's Textbook of Dermatology (Volumes 1- 4). Seventh Edition. Edited by Tony Burns, Stephen Breathnach, Neil Cox and Christopher Griffiths. Illustrated. R7 225. Blackwell Publishing. 2004. ISBN 0-632-06429-3. (Available from SAMA/HMPG. Price R7 225, members R6 550.)

Despite an array of appealing new reference textbooks in clinical dermatology in recent years, *Rook* remains the gold standard according to many experts. This seventh edition, named in honour of a former editor, recapitulates the goals of the original edition in 1968, namely to provide trainees and practitioners of dermatology with a practical guide to the diagnosis and treatment of skin diseases. A new panel of editors consisting of Tony Burns, Stephen Breathnach, Neil Cox and Christopher Griffiths have revised the 1998 edition thoroughly, and together with more than 100 internationally acclaimed chapter authors created a superb reference work that will be indispensable to registrars and consultants alike.

Despite an emphasis on clinical features and treatment throughout the book, it is clear that scientific aspects of dermatology such as molecular biology and pathophysiology have been expanded. The introductory chapters on the history of dermatology, normal skin biology, genetics, history taking, clinical examination and special investigations are a joy to read, and well worth revisiting at regular intervals. Illustrations are of a high quality and almost entirely in colour, and the numerous tables represent an extremely useful *aide-mémoire*.

Of particular relevance to South African clinicians is the inclusion of a new chapter on the dermatological manifestations of HIV/AIDS by Bunker and Gotch. There is also increased coverage of treatment options for all skin diseases, from the banal to the exotic, with emphasis on evidence-based therapies and inclusion of the newer biological agents. To complement this, there is a comprehensive and updated chapter on drug reactions. The organisation of the book is in a modern style with grouping of conditions according to anatomical site, pathophysiology, symptomatology or inheritance. Therefore, there is no chapter on acne *per se*, but this condition appears in the chapter 'Disorders of the sebaceous glands'. Page numbering also follows the current style of being chapter dependent. Although this can be somewhat confusing, with time the benefits of the approach become clear, and one soon learns to access the relevant section quickly. The success of reference works depends as much on content as it does on finding the desired content, and the index can be an Achilles heel of an otherwise superlative work. In this regard *Rook* shines, and the index is formidable, comprising more than 100 pages. In conclusion, the seventh edition of *Rook's Textbook of Dermatology* is a state-of-the-art reference book, and a worthy tribute to previous, current and future authors.

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