



## Offline: A dangerous virus, but not the one you think



Richard Horton

Perspective. It's in short supply these days. Coronavirus has saturated the attention of politicians, policy makers, journalists, and even medical journal editors for several months now. There seems to be no end in sight. But while we wrestle with the difference between containment and delay, prospects for a vaccine, and the mental state of an American President who wilfully ignores the advice of his own Centers for Disease Control and Prevention, we should not forget the threat posed by other viruses. We should especially not forget HIV. There have been around 100 000 confirmed cases of coronavirus infection worldwide. Yet please don't neglect the fact that 38 million people globally are living with HIV, including 1.7 million children under 15 years. 1.7 million people are newly infected with HIV annually. 6000 women aged 15–24 years are infected every week. Coronavirus is reported to have killed fewer than 4000 people so far. Meanwhile, 770 000 people die every year from AIDS-related illnesses. We should certainly take coronavirus very seriously indeed. But we must also put this new pandemic in perspective. So far, we have not.



Richard Horton

\*

In 2014, UNAIDS established global goals for the control of HIV. UNAIDS called these goals the 90–90–90 targets—90% of people living with HIV to be diagnosed; 90% of those diagnosed to be on treatment; and 90% of those receiving treatment to be virally suppressed. Although progress has been made, the world is a long way from meeting these goals. Instead of 90–90–90, countries overall are only at 79–62–53. We are collectively failing to control the HIV pandemic. Where is the saturated media coverage reporting that scandalous defeat? Part of the reason for indifference may be that richer nations feel they have succeeded in stemming the tide of HIV. In the UK, for example, the equivalent figures for controlling HIV are 92–98–97. Impressive? Yes. But behind those numbers lie disquieting facts. In Public Health England's (PHE) most recent analysis of HIV in the UK, it reports there were an estimated 7500 people living with undiagnosed HIV infection. And as many as 15 600 people are living with transmittable levels of virus. These shocking findings—and, make no



Richard Horton



Richard Horton

mistake, they are shocking findings—prompted PHE to conclude that “Over half a million people (35% of those eligible for testing) were not tested for HIV when they attended a specialist sexual health service in 2018.” Added to which, 4363 people were newly diagnosed with HIV in the UK in 2017. The UK's veneer of success is very thin indeed.

\*

Recognising this fragility, the UK Government has initiated an HIV Commission, chaired by Dame Inga Beale. The Commission's aim is to identify how to eliminate new HIV transmissions in England by 2030 (full disclosure: I am one of 11 members of the Commission). We are taking a wide range of evidence and are holding six public hearings. Last week, we were in Brighton, a city designated “extremely-high-diagnosed prevalence”. We asked three questions. What do we need more of? What is failing? And what are some wild-card ideas for getting to zero transmission? If we are serious about zero transmission, we have to normalise testing for HIV. Ideally, everyone in the country should be tested. But testing alone is not enough. It must be accompanied by an attack on stigma. Failures include an over focus on gay and bisexual men (don't ignore women, including black-African women, and people who inject drugs) and insufficient use of general practice services for testing and care. One attractive wild-card idea was the creation of a National Health Week around Pride. The week would be dedicated not only to HIV testing, but also to good health more broadly. But Brighton ended with an unexpected bombshell. The Commission has sought to construct an ambitious and aspirational vision for ending the transmission of HIV—and, ultimately, for ending AIDS. But we learned that a decade of government austerity and cuts has decimated health and social care services for people living with HIV. The social protections offered to people with HIV have been gradually diminishing to the point where sustaining the successes achieved is now in genuine jeopardy. We are on the edge of a crisis in HIV care in Britain. But who knew?

Richard Horton  
richard.horton@lancet.com