

FROM THE EDITOR

You may well be at the 5th South African AIDS conference in Durban as you read this! The conference promises to build on the resounding success of the previous four. In keeping with the mission of such conferences, the *Journal* continues to help you ensure not only fewer infections and longer lives but also better quality of life for your patients, both before and after commencement of antiretroviral therapy. This issue brings guidance on isoniazid prevention therapy in children and safer conception counselling and strategies for concordant and discordant couples. Guidance documents supported by the HIV Clinicians Society and published in this



journal are the result of consensus among South African experts. Subjects are chosen that are considered areas of controversy or complexity or where clear evidence-based direction is lacking. Other topics covered include an overview of provider-initiated HIV testing and counselling. HIV testing has evolved since the onset of the era of successful treatment, and HIV testing is now less of a privacy issue and more of a health issue.

Nixon and colleagues remind us that rehabilitation and the rehabilitation sciences are important in HIV care. The co-epidemic of HPV in our population is resulting in a growing burden of cervical carcinoma in HIV-positive women, and Menon explores and discusses various

cervical screening strategies in HIV-prevalent settings. Kirkcaldy and colleagues describe their original data from Mozambique on other sexually transmitted infections in HIV-infected women, and Abubakar and colleagues from Nigeria present a retrospective review of pericardial disease cases. Khan and colleagues remind us that TB can present in a range of tissues and organs in HIV, and describe a case of mammary TB. De Zoysa and colleagues from Sri Lanka present a patient with oesophageal carcinoma in whom oesophagectomy was performed.

This is the last issue of which I will be journal editor. I wish to thank all at HPMG for their extraordinary professionalism, the Clinicians Society staff, and Tammy, my PA who has held the fort through many a deadline.

I wish you all well as you continue to provide excellent HIV care, prevention, testing and management. May we in our lifetimes realise a southern African region in which not only AIDS but HIV is a receding threat.

LINDA-GAIL BEKKER
Editor

MESSAGE FROM THE EXECUTIVE

I hope you are reading this at the Durban AIDS Conference! The meeting is a major event on the conference circuit, and is jam-packed with exciting events, talks and seminars, as well as debates about everything from behaviour change to the responsibilities of donors. I'll be particularly interested in the sessions on the revamping of primary care in South Africa and on nurse-initiated ART (NiMART). We've made big gains in treatment, but we need to get more people into care and earlier, and for that to happen, we need all our primary care sites to be firing effectively.

For the unfortunates who can't be here, there's plenty more happening. The Annual Workshop in Advanced Clinical Care (AWAAC) will take place in Durban later this year (6 and 7 October 2011), co-ordinated by the

Harvard academics, with local clinical experts Yunus Moosa and Henry Sunpath leading from the SA side. It's a hard-core conference for doctor and nurse clinicians, and the Society has managed to source some bursaries, so watch your e-mail and Transcripts for details.

FRANCOIS VENTER
President

