HIV/AIDS

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This issue of the Journal is devoted to HIV/AIDS; a follow-up to the first Special Issue on HIV/AIDS in Adults (1). There have been two productions in Paediatric AIDS (2, 3). There is a wide cross-section of articles on HIV/AIDS in this issue. Figueroa *et al* reported on the prevalence of HIV among men who have sex with men in Jamaica and correlated this with social vulnerability and other sexually transmitted infections. They found that a history of past sexually transmitted disease, receptive anal intercourse and lower socio-economic status were associated with HIV infection (4). Allen *et al* reviewed Caribbean HIV behavioural studies and noted inconsistent condom use, early sexual initiation, intergenerational sex among females and multiple partnerships among males (5).

There is a need to optimize HIV care in the Caribbean and Hermanides *et al* reported a need for training to ensure effective integration of chronic HIV care into existing health-care delivery in Curaçao (6). Cytomegalovirus eye infections can be devastating to the patient with HIV and Mowatt discussed the ophthalmic manifestations of HIV in the highly active antiretroviral therapy (HAART) era (7).

HIV is associated with various malignancies and the virus may increase the risk of cervical dysplasia. Bambury *et al*, in this issue, stated that in their study, HIV positive women who are maintained on HAART and whose CD4 counts are satisfactory have less recurrence of cervical dysplasia (8). Pregnant women are usually routinely checked for HIV anti-bodies and Ibrahim *et al* found that in an antenatal clinic population in Nigeria, multiple sexual partners, previous in-duced abortion and hospital/clinic delivery increased the risk of HIV infection among pregnant women (9).

There have been a lot of misconceptions about transmission of HIV and this in turn can affect behaviour. Pinder-Butler *et al* found that junior high school students in New Providence in The Bahamas have fairly accurate knowledge of HIV/AIDS but still harboured misconceptions about HIV transmission (10). Ye *et al* concluded that there was need to improve knowledge of and behaviour toward HIV/AIDS in migrant women in China (11). Harris detailed how a uni-

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versity library can inform access and dissemination of knowledge on HIV/AIDS (12). The psychosocial burden of HIV/AIDS may lead to substance use in Jamaican youth and Brown called for strategies to be implemented to help youths cope effectively with such disease burden (13).

Reddock and Grignon assessed the affordability of antiretrovirals to the individual in St Lucia should donors cease to fund the cost (14). Clifford *et al*, in their review of the literature in low/middle income countries, examined the benefits and barriers to parental disclosure of HIV status to children and suggested implications for future research (15). Compulsory testing for HIV has implications for the labour market and Taylor proffered that testing is likely to negatively affect females in the labour market (16). Binns discussed Cuba's complementary approach to HIV/AIDS treatment and highlighted the challenges and successes of Cuba's HIV/AIDS programmes (17).

Mah-Lee and Barrow and Cirioni *et al* present case reports on systemic Cryptococcal disease in HIV infection and on the side effects of raltegravir on muscle, respectively (18, 19). The burden of HIV and homelessness present challenges to treatment and care and Barrow *et al* called for a combination of interventions and a package of services to address the many problems facing the HIV homeless (20). These challenges include sexual abuse, limited condom use, sex-work, multiple partners and acting as a source for virus transmission. Societal stigma toward patients with HIV and homophobia are major impediments to effectively dealing with prevention of new transmissions, treatment and the homeless HIV men who have sex with men.

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