

Africa Report by Mary Lalevée

AIDS threatens population's survival

The most appalling facts are those that show how AIDS is killing newborn infants and pregnant women.

If rapid action is not taken to stop the spread of AIDS, Africa will return to the Dark Age it underwent in the 18th and 19th centuries, after centuries of looting and slave trading. The latest figures on Africa were put out in an article in the January issue of a German review, *AIDS-Forschung*, warning that in 10 years most Africans will be infected. The most appalling facts given by the author, who wished to stay anonymous so as not to jeopardize his work in Africa, are those showing AIDS is killing newborn infants and pregnant women.

"Around 5% of all infants being born in the epidemic urban areas may be expected to develop AIDS during the next two years; another 5% are infected, but it is not yet known how rapidly disease will develop in them." AIDS develops in infected infants by two years of age and is rapidly fatal. The author predicts that within the next 10 years, 24% will develop full-blown AIDS within two years of birth, with another 24% infected. In other words, almost half Africa's children—48%—will have AIDS.

The author notes that infant mortality rates in Africa are already around 50% before the age of five, and that only communities with very high fertility can overcome this to flourish. However, the "critical level" of infant mortality is 55%—above this level, no matter how high female fertility is, the population will decline. The author writes that "It is predicted that AIDS will both increase infant and childhood mortality far beyond this critical level, and also drastically re-

duce female fertility.

"About 15% of the general population in the sexually active range in urban Eastern and Central Africa is seropositive in 1986. Symptom-free adults are progressing to AIDS Related Complex (ARC) at 10% per annum, that is 1.5% of the sexually active population, and to AIDS at 1% per annum, that is 0.15%

of the sexually active population. . . . It may be predicted that almost all fertile women will enter a second pregnancy during the next five years, approximately one-half of those infected (about 7% of all fertile women) will proceed to AIDS during this second pregnancy. Two-thirds of infants born to infected mothers are infected, and one half of infected infants develop AIDS within two years. . . .

"Seropositivity has multiplied tenfold in 10 years in the general adult population of Africa where HIV is epidemic, so it is not an unreasonable worst prediction that 70% seropositivity in all sexually active adults could be reached in urban Africa in the next decade.

"A disease selectively causing ill-health and death in the most productive age group and in the best educated (at least in the earlier stages of the epidemic) will have crippling effects on the already unsteady economies of African states. Modernization programs will be jeopardized, with a return to subsistence farming in rural areas, and hunger in the towns."

The author summarizes the research material available on AIDS in Africa, which, he says, shows that

"HIV is being spread throughout tropical Africa primarily by promiscuous heterosexual contacts." He shows that infants are infected in the womb, and through the virus being present in breast milk. He reports "a series of 49 patients (10 with AIDS and 39 with ARC) aged 1 to 17 months in Rwanda," another group of 28 infected children from Central Africa, while "At least 6% of ARC and AIDS is the consequence of transplacental transmission in Zambia. . . . [In] Kinshasa, 23 (15%) out of 150 ill children under two years old were HIV-seropositive. . . ."

Transmission by blood transfusion is also widespread, and "The greatest calls for blood are made for pregnant women and children." On insect transmission, the author comments that "The passive transfer of HIV-infected blood on the mouth-parts of blood-sucking insects . . . is a theoretical possibility, but does not appear to be playing any significant role in the epidemic of AIDS in Africa," although he notes that "HIV has been shown to survive for at least one hour after ingestion by the bedbug *Cimex lectularius*."

The author calls for urgent measures, setting up as many centers as possible for detection of the AIDS virus, investment in prenatal clinics to screen all pregnant women, limiting transfusions because of the danger of unscreened blood containing the virus, replacing reusable syringes with disposable, and educating the young on the dangers of promiscuity. Yet implying that these steps will not really be enough, the author in *AIDS-Forschung* concludes: "We are still only at the beginning of this disastrous epidemic in Africa. Africa today foretells the future of all other continents, unless there is an effective worldwide strategy for prevention."