

FROM THE EDITOR



Recent weeks have borne witness to controversies relating to the pricing of antiretroviral drugs, and it is heartening that at long last the voice of reason has prevailed and access to optimal therapies for our patients is on the horizon. The availability of cheap drugs, although crucial to treatment access initiatives, is by no means the only prerequisite that needs to be in place before patients get treatment. A confident and knowledgeable cadre of treaters together with an infrastructure of other health care professionals needs to be developed. These professionals must be able to counsel their patients regarding their therapies, the side-effects of a plethora of

drugs and the importance of adherence to these regimens in order to prevent drug resistance, and they must be familiar with issues relating to the sequencing of therapies. It is not just a matter of 'provide drugs, and everything else will fall into place'. Education is of paramount importance, and a prime objective of the Society is to provide the profession with the necessary education in this regard. Providing therapeutic guidelines is seen as important; these have appeared in previous issues of the *Journal*, and in this issue guidelines addressing mother-to-child transmission appear. Continuing medical education also takes place at monthly meetings in the regions where the Society is represented. It is hoped that in the near future these regional initiatives will be strengthened. A further important initiative is announced in this issue – an educational programme commencing in partnership with the Foundation for Professional Development of the South African Medical Association and the International AIDS Society (IAS), which will provide courses in HIV medicine for medical practitioners. These courses are based on the Share programme of the IAS. This programme is specifically formulated for developing countries and will be customised by the Society for southern African practitioners.

The global AIDS epidemic has witnessed its 'characters', and this issue honours one of the first physicians in South Africa to recognise, confront and do something about what was then a novel syndrome. Professor Ruben Sher is honoured by our Society and it is therefore appropriate that he be the first person to appear in the newly established 'Profile' section of the *Journal*.

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