

News bites

International

Feline immunodeficiency virus; key to a human vaccine?

Cats may be key to developing an HIV vaccine for people, a new study suggests.

Researchers found that a protein from the virus that causes AIDS in cats triggered an immune response in blood from HIV-infected people. FIV is a cat version of HIV, which infects several immune cells in the feline family. It is known that neither can infect the other's usual host – humans are not infected by FIV and cats are not vulnerable to HIV.

Researchers from the University of Florida and University of California, San Francisco discovered the immune response trigger. Said Janet Yamamoto, Professor of Retroviral Immunology at the University of Florida, College of Veterinary Medicine, 'One major reason why there has been no successful HIV vaccine to date is that we do not know which parts of HIV to combine to produce the most effective vaccine. Surprisingly, we have found that certain peptides of the feline AIDS virus can work exceptionally well at producing human T-cells that fight against HIV.'

In previous studies, researchers and scientists combined whole HIV proteins to create vaccine. None worked. The FIV protein is present in multiple HIV-like viruses in different animal species, and by using FIV, the human T-cell may be triggered to fight HIV itself. Researchers believe that it may be possible to identify regions of HIV that might prove useful targets for a vaccine. 'We want to stress that our findings do not mean that the feline AIDS virus infects humans, but rather that the cat virus resembles the human virus sufficiently so that this cross-reaction can be observed,' said Jay Levy, Professor of Medicine at University of California, San Francisco.

Africa

Get the public service working first – Western Cape Health MEC

Should the proposed National Health Insurance (NHI) be implemented, it will

be the largest financial project ever taken on the history of this country, Western Cape Health Minister, Theuns Botha said early last month (7 October). 'The national health minister's comment that NHI will not impact on tax contributions is simply not possible,' he asserted. Botha was addressing a pharmacy conference in Milnerton, Cape Town. He said it was important to differentiate between healthcare and health insurance. 'The one is a healthcare system, the other is an insurance fund. The DA and Western Cape Government supports the principle of a healthcare system for all, but the reality is that at present there are no calculations on the table for the NHI that national government has in mind. It is simply not possible for an insurance fund of this magnitude not to impact on taxpayers' contributions. That is the source of government money, and to say that NHI will not affect tax is a political ploy'. Botha added that in first-world countries where health insurance systems were functional, the direct taxpayers' percentage was significantly higher than the global average of 80%.

'NHI is definitely a healthcare system that we would like, but in the country's current state, it simply is not affordable. That is why the DA favours strengthening of the existing healthcare system, rather than inventing a new system,' he said, claiming that the NHI, in its current format was set to 'destroy the private healthcare sector'. 'To be an economy driver, healthcare should be demand- and supply-driven – healthcare should run on the sound economic principle of the best performers making the profits'. In the Western Cape in the past four years, his government had demonstrated that the private sector was willing and eager to work with them. 'We have brought private sector partners on board, and they are financing infrastructure, equipment and services that simply are not available in our government budgets,' he added. His most serious concern was that the proposed NHI would be a fund centralised in the National Health Minister's office. Provincial departments would 'disintegrate' and become agencies of the National Health Department. 'We

believe that the model of decentralisation is the model that creates opportunities for excellence and economic growth. The solution does not lie in inventing a new system, it is in appointing fit-for-purpose health managers, strict and controlled financial management, and political accountability. Botha said the collapse of the health system in the Eastern Cape demonstrates a lack of management, no financial control and no accountability. 'The problem is not a lack of money. South Africa's *per capita* health expenditure is 50% higher than the global average. It is within our means to have a universal healthcare system if we get management, financial control and political accountability right. That's why the Western Cape health system is performing so much better than in other provinces.'

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