

EQUAL

treatment

Magazine for the Treatment Action Campaign

December 2009

**Ukwenza ingqiqo
kwezenzululwazi**

Kutheni abantu bekholelwa kumayeza abantu
abathi banolwazi lokunyanga kodwa bengenalo

Amaxhwele ne-HIV

Yintoni ekufuneka uyazi ngomhlaza womlomo wesibekeko

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Iifoto: Samantha Reinders, Anso Thom/Health-E News Service, Adam Malapa, Tony Wills, www.medioclubsouthafrica.com, Michael Wolf, Gallo Images/AFP, AFP, Moses Makhomisan, National Geographic/Getty Images, Tandeka Vinjwa

Ifoto esemfanekisweni: U-Lee-Ann van Wyk ovela kwilebhu ye-Bioanalytical Research Corporation (BARC) ubambe ityhubhu yovavanyo yegazi eyahluliweyo kwi-centerfuge. Ukujikelezisa igazi kwi-centerfuge kohlula i-plasma, iiseli ezimhlophe zegazi kueny neeseli ezibomvu zegazi ngokwemaleko ukusuka kowona ulula ukuya kowona unzima. Ifoto ngu-Sam Reinders

Imibulelo ekhethekileyo kuGqirha Ben Goldacre, Njingalwazi Lynette Denny, Gqirha Justine Davies, Gqirha Linda-Gail Bekker, Nathan Geffen, Sense About Science, Christie Heiberg neYunithi yoLingo lwezoNyango i-Desmond Tutu HIV Foundation, no-Yvette Kramer nelebhu ye-BARC, eKapa.

Usasazo: Kagiso Seleka

Uyilo: Designs4development, www.d4d.co.za

Ushicilelo: CTP Book Printers

Iguqulwe ngu: Bohle Conference and Language Services

I-TAC izibophelele ekuboneleleni abantu abane-HIV, iintsapho zabo kunye nabakhathaleli ulwazi oluchanekileyo olumalunga namayeza asindisa ubomi kunye nonyango. I-TAC kunye neenkohlakhe zayo bazimele kwishishini loxubo-mayeza ngokunjalo nakumashini amayeza endalo kunye namayeza angamanye kwaye ayinamdlala wezemali kuwo.

Equal Treatment is published by the Treatment Action Campaign.



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IZIQUULATHO

Uhlelo lwama-31 – Disemba 2009
IsiXhosa

amaphepha
2-7



INzululwazi nokunyanga ngaphandle kolwazi lwako

Iintsuku zokungafuni ukukholelwa ezixhaswa ngurhulumente zinokuba zidlulile, kodwa ezikoneni zezitalato kunye nakwiivenkile zempilo ukunyanga ngaphandle kolwazi lwako kusekhona, kuyachuma kwaye kuyingozi. Siphonononga ukuba kutheni na abanye abantu bekholelwa kumayeza abantu abathi banolwazi lokunyanga kodwa bengenalo kwaye sibonise ukuba inzululwazi ayiyoyaseNtshona, kodwa sisixhobo esinokusisebenzisa ukuzixhobisa thina.

amaphepha
8-13



Amayeza emveli namaxhwele

Silandela ibali lokuba amayeza emveli ase-China aphumelele njani na kunyango lwemalariya. Njengawo onke amayeza, undogo yaba luvavanyo lwezenzululwazi. Siye ke ngoko sajonga kumThetho wabaSebenzi bezeMpilo beMveli kunye nendima yamaxhwele ekulweni i-HIV.

amaphepha
14-21



Indlela yezenzululwazi kunye nolawulo lwamayeza

Ukusukela kulingo lwesigaba I ukuya kwii-p-values, sichaza indlela yezenzululwazi ngamagama oza kuwaqonda. Emva kohlaziyo luka-Lawrence Mbalati ngokunqongophala kolawulo lwamayeza eLimpopo, u-Jonathan Berger usikhawulezisa asise kwicala lomthetho lolawulo lwamayeza.

amaphepha
22-27



Izitofu zokugonya ze-HIV nomhlaza womlomo wesibekeko

Kulandela izihloko ebezikumaphepha-ndaba ezivusa umxhelo kwiinyanga ezisanda kuphela, ingxelo yethu yenkqubela iyabonisa ukuba ngenene siphil na ekukhangeleni kwethu isitofu sokugonya se-HIV esisebenzayo. Siye kwakhona sajonga umhlaza womlomo wesibekeko, isifo esineyeza laso elisebenzayo, nangona bembalwa kakhulu abantu abanokufikelela kulo.



INqaku loMhleli

Umntu othi unolwazi lokunyanga abe engenalo (quack) ngumntu ophakamisa amayeza angakhange avavanywe ngokuchanekileyo. Inokuba sisenzo esiyingozi esi. Abantu abathi banolwazi lokunyanga kodwa bengenalo benza imali kuloyiko kunye nakwizigulo zabantu. Okona kubi kakhulu kubo banokukuqhatha ude uyokusweleka. KuMzantsi Afrika wonke ngamawaka abantu abathi banolwazi lokunyanga kodwa bengenalo abathengisa amayeza angakhange avavanywe e-AIDS kunye nawezinye izifo. Bayaqhuba bekwenza oku nangona kaninzi oku bekwenza ngokungekho mthethweni.

IPhulo eliZabalazela uNyango (Treatment Action Campaign) (TAC) lithathe amanyathelo abhekiselwe kubantu abaninzi abathi banolwazi lokunyanga kodwa bengenalo. Umzekelo:

- Safumana umyalelo wenkundla wokunqanda u-Matthias Rath ekubeni aphakamise iimalthivithamini zakhe njengonyango lwe-AIDS. U-Rath ubanga ukuba ii-antiretrovirals (ARVs) ziyityhefu kwaye iimalthivithamini zizodwa zonokuyinyanga i-AIDS.
- Saye kwakhona safumana umyalelo wenkundla owawubhekiselwe kulowo wayesakuba nguMphathiswa wezeMpilo, u-Manto Tshabalala-Msimang. Waye waxelelwa yinkundla ukuba aphande ngemifuniselo ka-Rath kubantu abane-HIV. Phantsi kukaTshabalala-Msimang urhulumente waxhasa abantu abaninzi abathi banolwazi lokunyanga kodwa bengenalo. Esikubulelayo kukuba, eli xesha lilusizi kwimbali yethu libonakala lifikelele esiphelweni, kodwa ke umonakalo awenzileyo yena kunye namanye amagosa karhulumente uyakuthatha ixesha elide ukuphela.
- Sifake izikhalazo ezininzi eziye zanempumelelo ebezichasene nabantu abathi banolwazi lokunyanga kodwa bengenalo kuGunyaziwe wemiGangatho yeeNtengiso (Advertising Standards Authority) (ASA). Kutsha nje i-ASA iye yagweba ngokuchasene nentengiso ka-Zeblon Gwala, othengisa iyeza le-AIDS elingavavanywanga ekuthiwa nguBhejane kubantu abaphelelwe lithemba nge- R300 ngenyanga. I-ASA ilawula iintengiso. Ukuba ngaba iintengiso zenza amabango angeyonyani, umzekelo malunga ne-AIDS, i-ASA inamandla okumisa intengiso enjalo.

Abantu abane-HIV kaninzi bayoyika ukuthatha ii-ARVs kuba abazi ngokwaneleyo ngazo okanye beve amabali abaxwayo ngazo ngeziphumo ebezingalindelekanga ngazo. Oku

kwenza ukuba abantu abathi banolwazi lokunyanga kodwa bengenalo bangenelele kuloo mathuba babanike ithemba elingeyonyani. Abantu abaninzi baye basweleka kungekho mfuneko kuba endaweni yokuba bathathe ii-ARVs baye bachitha ixesha bethatha amayeza abantu abathi banolwazi lokunyanga kodwa bengenalo.

Amayeza okuqala ngokwawo kaninzi aye angabi nabungozi. Into eyingozi kukuba ixesha elibalulekileyo liphela kuzanywa amayeza anjalo endaweni yokuba kusetyenziswe lawo angqiniweyo ngokwezenzululwazi afana nee-ARVs. Koko, ngamanye amaxesha izithako kumayeza abantu abathi banolwazi lokunyanga kodwa bengenalo ziyingozi. Ngokwenene, abantu abaninzi batyhefwa yonke imihla ngamayeza angavavanywanga. Kwakhona, amanye amayeza anokusetyenziswa, afana negalixhi ngeedosi eziphezulu kakhulu okanye i-St John's Wort, anokungasebenzi kakuhel xa edibene nee-ARVs.

Inkqubo yempilo karhulumente ibimele ukuba inike abantu kuphela amayeza avavanywe ngokufanelekileyo kwaye avunywa liBhunga eliLawula amaYeza (Medicines Control Council). Kodwa esinye sezizathu ezingundoqo sokuba kutheni abantu abane-HIV bezama amayeza abantu abathi banolwazi lokunyanga kodwa bengenalo kukuba kaninzi baphathwa kakubi yinkqubo yonyango karhulumente. Imigca emide, ukunqongophala kwamayeza kunye nabongikazi abanomsindo ngenxa yokusebenza kakhulu kwenza ukuba abantu bangafuni ukusebenzisa iikliniki zengingqi. Endaweni yoko, baye babhenela kwithemba elingekhoyo elinikwa ngumntu othi unolwazi lokunyanga kodwa engenalo onobubele. Uphononongo lwakutsha nje lubonise oku ngqo: izigulane ezibe namava amabi kwiikliniki zazo kunokwenzeka ukuba zifune uncedo lwabantu abathi banolwazi lokunyanga kodwa bengenalo.

Yiloo nto ke sifuna ukulwa abantu abathi banolwazi lokunyanga kodwa bengenalo, eyona ndlela ingcono yokwenza oku kukwakha inkqubo yempilo karhulumente esebenza nangakumbi kwaye engeke iphazamisane nesidima sabantu.

Ngu-Nathan Geffen
UNondyebo we-TAC

Imithombo: Goudge, J. et al., Centre for Health Policy, School of Public Health, University of Witwatersrand "Affordability, availability and acceptability barriers to health care for the chronically ill: longitudinal case studies from South Africa" *BMC Health Services Research* (2009) <http://www.ncbi.nlm.nih.gov/pubmed/19426533>.

ukunyanganga ngaphandle kolwazi lwako kusijikelezile

Ngu-Marcus Low

Ukunyanganga ngaphandle kolwazi lwako kunye ne-pseudo-science ziza ngeendlela ezininzi kwaye azimiselwanga mda kulo naliphi na ilizwe okanye inkcubeko ekhethekileyo. AyizozaseNtshona okanye zase-Afrika, kodwa zikhona kwihlabathi jikelele.



Udade boNoluthando Magwebu, umntu owayephila ne-HIV eKhayelitsha owasweleka ngo-2005 emva kokwehlelwa ziziphumo ebezingalindelekanga emva kokuthatha unyango olwalunikwa nguMbutho weMpilo kaGqirha Heath (Dr. Rath Health Foundation), owonganyelwe ngumntu othi unolwazi lokunyanganga kodwa engenalo owaziwa kakhulu u-Matthias Rath. Apha udade wabo ubalisa ngokusweleka kukaMagwebu sekudlule iminyaka emininzi, UMagwebu waxelelwa ukuba iipilisi zoMbutho 'ziyakuyenza ibe ngcono kakhulu i-HIV.' Umyeni kaNoluthando, uZodani, waxelela i-Health-E News Service ukuba kwiveki esemva kokuqala kwakhe iipilisi waba neziphumo ezibi ebezingalindelekanga waze wasweleka kamva emva kweveki. Ifoto nebali ngu-Anso Thom/Health-E News Service.

Unyango lwe-AIDS olungeyonyani uBhejane olufumaneka Kwazulu-Natal abukho ubungqina ngalo bokuba luyanyanga, njengeepedi zeenyawo ze-detox okanye unyango ngamayeza onokuwathenga e-London okanye e-New York nawo abukho ubungqina bokuba ayanyanga. Into efanayo kuwo onke la mayeza kukuba abantu babanga ukuba enza izinto angazenziyo. UBhejane okanye iti ye-Revivo aziyinyangi i-AIDS, kwaye iiphedi zeenyawo ze-detox abuko ubungqina bokuba ziyawunceda umzimba wakho ukukhupha ityhefu. Umzimba wakho uzenzela kakuhle oko ngokunokwawo.

Njengokuba ukunyanganga ngaphandle kolwazi lungelolwaseNtshona okanye lwase-Afrika, uvavanyo lwezenzululwazi ayilolwaseNtshona okanye lwase-Afrika, kodwa eyona ndlela ilula kukufumanisa ukuba yintoni esebenzayo iyintoni engasebenziyo. Abantu eNtshona bayayisebenzisa, njengoko abantu e-Afrika beyisebenzisa. Sinokusebenzisa iindlela zenzululwazi ukuvavanya ukuba ingaba iti ye-Revivo iyasebenza na, njengoko sinokuzisebenzisa ukuvavanya ii-antiretrovirals (ARVs) zamva.

Uvavanyo lwezenzululwazi lunokusindisa ubomi. Kungovavanyo apho safumanisa okokuqala ukuba ii-ARVs ziyabusindisa ubomi – kwaye ukusukela ngoko ziye zasindisa ubomi obuninzi. Uvavanyo lwezenzululwazi lukwanceda ukuphuhlisa ii-ARVs ezineziphumo ebezingalindelekanga ezimbalwa.

Uphando lwezenzululwazi alwenzeki kuphela ngaphaya kweelwandle eYurophu okanye eMelika. Uphando olungaphaya luyaqhutywa e-Afrika, ngama-Afrika. Ulwazi esilufumanayo kwezi mvavanyo luyasixhobisa



ukuze senze izigqibo ezisekelwe elwazini malunga nempilo yethu.

Abantu abathi banolwazi lokunyanga kodwa bengenalo abathandi ukuba imveliso zabo zenziwe uvavanyo lwezenzululwazi, kwaye basoloko benesizathu sokuba uvavanyo lwezenzululwazi alufanelekanga kumayeza abawathengisayo. Oku mhlawumbi kungenxa yokuba boyika ukuba uvavanyo lunokubonisa ukuba amayeza abo awasebenzi. Abanye abantu abathi banolwazi lokunyanga kodwa bengenalo bayakholwa kwiimveliso zabo nokuba zibonisa ukuba azisebenzi emva kovavanyo.

Ngokuchaseneyo, iinkqubela zenzululwazi zezokuvavanya iimveliso kwaye azifihli nokuba yintoni na efunyanisiweyo. Ukufunda ngokuba unyango olukhethekileyo alusebenzi kubalulekile kubaphandi njengokufunda ngento engasebenziyo. Yiloo nto izinto ezifunyanisiweyo ebekuphandwa ngazo zipapashwa ngokuvulelekileyo kwiijenali zezonyango. Abanye abaphandi banokuziphinda ke iimvavanyo ukubona ukuba imveliso iyasebenza ngokwenene na.



UZodani Magwebu nabantwana bakhe ababini. Usapho lwakwaMagwebu lwalahlekelwa yinkosikazi kunye nomama walo, uNoluthando, ngo-2005 emva kokuba waqala ukuthatha iipilisi kuMbutho ka-Rath ekwakufanele ukuba 'zincede' i-HIV yakhe. "Ukusukela ukuba inkosikazi yam yasweleka, izinto zinzima apha. Kuyakusiba nzima kum ukukhathalela abantwana bam," utshilo. UZodani uthi ngaphandle kwezityholo ezijoliswe ku-Rath yi-TAC, akukho namnye umntu owake waqagamshelana naye ngokusweleka kwenkosikazi yakhe. "U-Rath kufuneka abanjwe kuba nguye ongunobangela wokusweleka kwenkosikazi yam kunye nabanye abantu abaninzi. Ukuba ngaba urhulumente ebesazi ukuba kwenzeka ntoni kwaye akwabikho nto ayenzayo, naye kufuneka athathele kuye uxanduva." Ifoto ngu-Anso Thom/Health-E News Service.

I-Pseudo-science inokubulala

Phantsi kwalowo wayesakuba nguMongameli Thabo Mbeki noMphathiswa wezeMpilo uManto Tshabalala-Msimang urhulumente woMzantsi Afrika wayehamba kancinane ekunikeni ii-ARVs kwinkqubo yempilo karhulumente. Endaweni yoko, babephakamisa amayeza angasingawo awokwenene njengeyeza elisetyenziswa ngabantu abathi banolwazi lokunyanga kodwa bengenalo i-Virodene kwaye bexhasa amaqhetseba afana noo-Matthias Rath. Abaphandi baqikelela ukuba oku kulibaziseka ekwenziweni ukuba kufumaneka ii-ARVs kwicandelo likarhulumente kukhokelele ekuswelekeni kwama- 300,000 abantu ebekungabe kuthintelwe.

Umntu ngamnye othi unolwazi lokunyanga kodwa engenalo oxelela abantu ukuba bangathathi ii-ARVs okanye onika okanye athengisele abantu unyango olungavavanyanga ubeka ubomi engozini. Ii-ARVs lolona nyangō ikuphela kwalo olungqiniweyo ukuba luyayilwa i-HIV. Kubalulekile ukuba abantu abane-HIV bathathe amayeza abo njengoko kumiselwe ngooqirha babo okanye ngabasebenzi bezempilo.

Ukuba neempembeleli kwamachiza

Amanye amayeza abantu abathi banolwazi lokunyanga kodwa bengenalo kunye nezongezo zeevithamini anokuba neempembelelo kwii-antiretrovirals (ARVs) zakho kwaye enze ukuba zingasebenzi kakhulu. Yiloo nto kufuneka uwathathe la mayeza kuphela ukuba ugqirha okanye umsebenzi ngezempilo wakho uthi kulungile.

Abantu abaninzi abathi banolwazi lokunyanga kodwa bengenalo abakwazi oku kwaye bakhuthaza abantu ukuba bathathe amayeza abo kunye nee-ARVs zabo okanye endaweni yee-ARVs. Oku kukungakhathali kwaye kunokubeka impilo yabantu engozini. Kufuneka uthathe kuphela amayeza acetyiswa nguqirha okanye umsebenzi ngezempilo wakho.





Zonke zezendalo

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Kutheni

abantu bekholelwa

**kumayeza abantu abathi
banolwazi lokunyanga
kodwa bengenalolo**

Ngu-Marcus Low

Kunokuba nzima ukwamkela ukuba une-HIV, umhlaza, okanye isifo seswekile. Kuyaqondeka ukuba ngamanye amaxesha siye sibe nethemba lonyango olungummangaliso. Xa umntu ethembisa ukuba umxube wakhe unokusinyanga, kuhenda kakhulu kangokokuba singade sibakholetwe.

Abantu abathi banolwazi lokunyanga kodwa bengenalolo bayakwazi oku, kwaye yiyo loo nto behlala besenza izithembiso ezinjalo. Bayazi ukuba siziva siphelelwe lithemba kangokokuba side sivume ukuzama nokuba yintoni na. Baye ke basinike amayeza angavavanywanga baze basibize amaxabiso aphezulu ngawo. Abathathi kuphela imali yethu, bakwasithengisela ithemba elingekhoyo elingeyonyani.

Kutheni kanye siziva ngcono

Izigulo ezininzi, njengomkhuhlane oqhelekileyo, ziye zibe ngcono ngaphandle kokuba sithathe nawaphi na amayeza. Imizimba yethu inokuzilwa ezi zifo ngokwayo. Nangona, umkhuhlane xa sele umandundu, sinokuya kugqirha okanye kwisangoma, okanye mhlawumbi sithathe iivithamini okanye izibulala-ntlungu. Sinokuba asichananga ke koko, kuba umkhuhlane ubuza kuba ngcono kakade.

Ngokufanayo, impilo yethu ngeke ihlale ifanelekile izinzile. Ngezifo ezininzi ezingapheliyo impilo yethu iyakuguquguquka ngokuhamba kwexesha – ngezinye iimini siyakuzifa singcono ngezinye iimini singaziva ngcono kakhulu. Xa kukho into eyenzekayo phambi kokuba sizive ngcono, asiziva ngcono ngenxa yaloo nto. Into yokuba ifiva ihambe emva kokuba utye ipapa enetyuwa ngesidlo

sasekuseni akuthethi ukuba ipapa enetyuwa iyayinyanga ifiva.

Abantu abaninzi abathi banolwazi lokunyanga kodwa bengenalobayakukuxelela ukuba ifiva yakho iphele ngenxa yokusebenzisa amayeza aziingcambu okanye iivithamini abakunike zona, ngexa ngokwenene ifiva yakho iziphelele. Ukucinga ukuba ungcono ngenxa yeyeza elinganyangiyo kuyafana nokuziva ngcono ngenxa yepapa enetyuwa. Yiloo nto sinokuthi abantu abathi banolwazi lokunyanga kodwa bengenalobahlala befumana ikhredithi ngenxa yento ebinokwenziwa yindalo kakade.

Ukuthi amayeza anganyangiyo ayayinyanga ifiva akuyongozi kwaphela, kodwa xa abantu abathi banolwazi lokunyanga kodwa bengenalobanokuthi anokunyanga izifo ezimandundu kakhulu, kuba yongozi kakhulu. I-HIV, umhlaza, okanye iswekile azivele nje ziziphelele ngokwazo. Kwizifo ezinjalo kufuneka siqiniseke ngokuba unyango lusebenza ngokwenene, kwaye eyona ndlela ikuphela kwayo yokukwenza oko kukuba la mayeza avavanywe ngendlela efanelekileyo yezenzululwazi.

Ngovavanyo, sinokufumanisa ukuba ngenene yipapa enetyuwa na okanye yiti eyenze ukuba kuphele ifiva, okanye imizimba yethu ibinokuyilwa kakade.

Iimpembelelo ze-placebo

Xa oosonzululwazi bevavanya iyeza elitsha, kaninzi baye banike isiqingatha sabantu kuphononongo iyeza elitsha kwaye esinye isiqingatha sinikwe ipilisi yeswekile efanayo neyeza elitsha. Le pilisi yeswekile kuthiwa yi-placebo. (Ii-Placebo zinokuba ziinaliti ezinamanzi anetyuwa okanye amanye amayeza nje.) Kwezi ntlobo zophononongo abathabathi nxaxheba abazi nokuba bafumana ipilisi yokwenyani okanye i-placebo. Oosonzululwazi baba nokubona ke ngoko ukuba abantu abafumana ipilisi entsha bachacha ngcono kunabo bafumana i-placebo. (Jonga kumaphepha 14–17 ngokungaphaya malunga nolingo lwezonyango.)

Oosonzululwazi baqaphela ukuba ngamanye amaxesha abantu bathi baziva ngcono okanye babambekile nokuba banikwe nje i-placebo. Oku kwaziwa njengeempembelelo ze-placebo. Iimpembelelo ze-placebo zenzeka xa usehlelwa sisiphumo esincinane kuba ulindele ukuba lusebenze unyango – hayi ngenxa yonyango ngokwalo. Sesinye isizathu esenza ukuba abantu bakholelwe kumayeza anganyangiyo.

Okwenza umdla, iimpembelelo ze-placebo zibonakala zidityaniswa kokulindelekileyo kwinkcubeko. Kubonakalisiwe, umzekelo, ukuba iipilisi zeswekile eziluhlaza zilunyango olusebenza kakhulu kuxinzelelo kuneepilisi zeswekile ezibomvu. Oku akwenziwa yinto

Ukuziva ungconwana ayilonyango

Ukuba ngaba amaqhakovana amancinane okanye urhudo lomntu one-HIV ziyaphela kwaye loo mntu aqale ukuziva ngcono, abantu abathi banolwazi lokunyanga kodwa bengenalobanokuthi bamnyangile kwi-HIV umntu. Naliphi na ibango elinjalo linokuba aliyonyani. I-HIV iyakube isesemzimbeni womntu kwaye iyakumenza agule kwakhona loo mntu ukuba ngaba akazithathi ii-ARVs.

Kubalulekile ukuhlala uzithatha ii-ARVs okanye amayeza akho e-TB njengoko kumiselwe ngugqirha okanye umsebenzi ngezempilo. Ukuba ngaba awuwathathi njengoko kumiselwe amayeza akho, unokugula kakhulu kunokuba ubunjalo kuqala.

yokuba iipilisi eziluhlaza ziqulethe nantoni na, kodwa kungenxa yeentsingiselo zenkcubeko ezinxulunyaniswa nombala oluhlaza.

Ngokufanayo, iintlobo zophononongo zifumanise ukuba iinaliti zamanzi anetyuwa zinokuba lunyango olusebenzayo lwe-placebo kuneepilisi zeswekile ezimhlophe – ingeyonto yokuba kukho nantoni na ekhethekileyo eluncedo ngeenaliti zamanzi anetyuwa, kodwa ngenxa yokuba 'imisebenzi' yokuhlaba ngeenaliti inabe kakhulu, iyagunyazisa kwaye ilungenelo olusebenzayo. Kwangandlela nye, abanye abantu abathi banolwazi lokunyanga kodwa bengenalobayakukuxelela okanye amaxhwele basebenzisa imisebenzi enabileyo ukusiqinisekisa ukuba unyango lwabo luza kusebenza.

Amayeza amaninzi angasebenziyo e-HIV asebenzisa iimpembelelo ze-placebo. Umntu onika iyeza uhlala ekuxelela ukuba unyango luza kusebenza, de nawe uzinqinisekise. Ngexa iimpembelelo ze-placebo zinokukwenza ukuba uzive ungcono kancinane okanye ubambeke ixeshana, ngeke zinyange nasiphi na izifo. Yiloo nto uBhejane okanye unyango lwesifo ngeedosi zamayeza endalo zingeke zibe nako ukunyanga i-HIV okanye ziyinyange ngcono ukodlula ii- (ARVs). Ii-ARVs azixhomekekanga kwiimpembelelo ze-placebo kuba zisebenza ngokwazo emzimbeni wakho, hayi kwiinkolelo zakho.

Abanye abantu bayazinqinisekisa ukuba amayeza anganyangiyo ayasebenza. Banokuziva bengcono kancinane ixeshana. Oku kuba ngamandla kakhulu ukuba kukho umntu othi unolwazi lokunyanga kodwa engenalo onobubele ohlala ebekhuthaza kwaye ebaxelela ukuba kufuneka bazive ngcono. Ngesi sizathu ngamanye amaxesha siye sifune ukuba abanye abantu banike ubungqina bokuba eli okanye eliya yeza linganyangiyo libancede kakhulu. Okulusizi, ke, ukuba abantu bayayeka ukuthatha ii- ARVs, isibalo sabo se- CD4 siye sehle kwaye baye bagule kakhulu.

Inxenye zeli nqakwana zithathe kwincwadi ka-Ben Goldacre i-*Bad Science*. U-Goldacre uye waphinde walijonga kwakhona eli nqakwana.

Imithombo enika umdla: Ernst, E. and A.R. White "Acupuncture for back pain: a meta-analysis of randomised controlled trials" *Archives of International Medicine* 158 (1998); Kaptchuk T.J. et al. "Sham device v inert pill: randomised controlled trial of two placebo treatments" *British Medical Journal* (2006).



Immediate results!!!

IINDLELA EZISIBHOZO ZOKUBONA UMNTU OTHI UNOLWAZI LOKUNYANGA ABE ENGENALO

1. INZONDELELO KUBUQU

Abantu abathi banolwazi lokunyanga kodwa bengenalo bahlala bebeka ubuqu babo kundoqo wamashishini abo. Abanye bathiya amashishini abo ngabo. Bayathanda kwakhona ukuthi baboniswe inyaniso, ngexa abanye abanti bengazi ukuba benza ntoni na.

2. UKUNGAZITHANDI II-ARVS



Dr Matthias Rath

Abantu abathi banolwazi lokunyanga kodwa bengenalo kaninzi bathetha ngokuchasene ne-antiretrovirals (ARVs). Kunqabile ukuqonda ukuba zisebenza njani iziphumo ebezingalindelekanga okanye ungayitshintsha irejimeni ye-ARV ukuba ngaba wehlelwa ziziphumo ebezingalindelekanga. Abaqondi kwakhona ukuba ii-ARVs lolona nyango luvunyiweyo lwe-HIV kwaye ngaphandle kwazo, abantu banokusweleka msinyane.

3. AMAYEZA AWAVAVANYWANGA NGOKWENENE

Abantu abathi banolwazi lokunyanga kodwa bengenalo kaninzi bathi amayeza angasebenziyo avavanyiwe, ngexa ngokwenene engakhange avavanywe. Yiloo nto ke, xa besithi ayasebenza, abazi nokuba ngokwenene ayasebenza na, kodwa banethemba lokuba ayasebenza okanye baziqinisekisa bona ukuba ayasebenza. Xa ubabuza, ngeke bakuse kuphonoongo olupapashiweyo olukwiijenali ezaziwayo ezibonisa iimveliso zabo.

4. UKUZIPHATHA NGEMFIHLO

Abantu abathi banolwazi lokunyanga kodwa bengenalo kaninzi baneemfihlo. Uninzi lwabo alufuni ukuxela ukuba zeziphi na izithako ezisemayezeni abo. Oku kwenziwa kukuba bambalwa kakhulu abantu abanokuwathenga ukuba banowukwazi ukuba zeziphi na izithako eziqulethwe ngala mayeza abo. Abantu abathi banolwazi lokunyanga kodwa bengenalo abafuni ukuba amayeza abo acazululwe elebhu okanye avavanywe ngokwenzululwazi.

5. AMAXABISO AXHOME NGOKUNGENASIZATHU

Abantu abathi banolwazi lokunyanga kodwa bengenalo kaninzi babiza amaxabiso aphezulu kakhulu kwiimveliso zabo ngexa bethengisa kuphela amanzi namayeza eengcambu eziqhelekileyo. Oku kungenxa yokuba banomdla ekutyebeni. Igcutswana labantu abathi banolwazi lokunyanga kodwa bengenalo, koko, abenzi mali ininzi. Kaninzi aba bantu bakholela ekubeni amayeza abawathengisayo ayasebenza, ngexa engasebenziyo. Uninzi lwaba bantu abakuthandi ukucinga ngokuba inokuba abachananga.

6. BALUNGE KAKHULU UKUBA BABE NGABOKWENYANI

Abantu abathi banolwazi lokunyanga kodwa bengenalo babanga ukuba bona banokunyanga izifo ezininzi- ukuqala kwi-HIV ukuya kwisifo seswekile, ukuya ekuqaqambeni kwamalungu kunye nokungasebenzi kakuhle ekumeni nkqo. Abanye baye babange nokuba banokukunceda ngeengxaki zomthetho okanye ezomtshato. Oku kulunge kakhulu ukuba kube yinyani, mhlawumbi kunjalo. Abantu abathi banolwazi lokunyanga kodwa bengenalo bayazi ukuba ngamanye amaxesha sipelelwa lithemba, kwaye baye bazisebenzisele elo thuba ukuze bazizuzele ezimalini.

7. BAZENZA NGATHI BAYAZI

Abantu abathi banolwazi lokunyanga kodwa bengenalo bahlala besithi xa uziva ubambekile oko ngumqondiso wokuba uyachacha. Le yindlela yabo yokuzikhusela: ukuba uziva ngcono, bazigwagwisa ngoko, kwaye ukuba uziva ubambekile, bathi bekufanele kulindeleke oko. Ngale ndlela babanga ukuba bayazi ukuba kwenzeka ntoni ngempilo yakho ngexa bengenalo nofifi.



Cebisa ukuba i-HIV inokunyangwa

8. BAZENZA AMAQHAWWE

Abantu abathi banolwazi lokunyanga kodwa bengenalo babanga ukuba bacinezelwa ngamayeza aqhelekileyo okanye imidla enamandla yabo bafuna ukwenza ukuba iimveliso zabo zingabikho emarikeneni. Oku akwenzi ngqiqo. Ukuba ngaba iyeza elingasebenziyo liyasebenza, iinkampani beziyakulifuna zincele ekulithengiseni kwaye zenzi imali.

QUACK! QUACK!

AMAYEZA ANYANGA IINGXAKI ZONKE

ungamsoli umakhuma

Amanye amaxhwele ayabuphika ubuKho be-HIV. La maxhwele athi anolwazi lokunyanga kodwa engenalo asebenza ngokungenkathalo kwaye abeka ubomi kwingozi engeyomfuneko. U-Adam Malapa utyelele elinye ixhwele kwidolophu yase-Tzaneen.

UMapungubwe lixhwele elisebenzela ngakumlanjana omncinane e-Tzaneen. Uthi unokuyinyanga i-HIV kuba ngokwakhe i-HIV ne-AIDS azikho. “i-AIDS ngumakhuma”, utshilo, egxininisa ukuba i-AIDS nguMakhuma ngesiNtu. “Ufumana i-HIV ne-AIDS ngenxa yokungalandeli amasiko ngendlela izinyanya ezifuna izinto zenziwe ngayo. Isisibetho esivela kwizinyanya ukuze ubuyele kumasiko akho.” (Kaninzi, uMakhuma uthetha ukungahlanjwa emva kokuba kuye kwasweleka umntu kusapho lwakho.)

“Xa umntu eza [ezokundibona] okokuqala, ndithatha igwada lam ndize ndinxibelelane nezinyanya zam. Ndinokuthetha nayo nenyoka yam, ehlala phakathi kwalamanzi.” UMapungubwe uthi izinyanya zakhe ziyamxelela ukuba hlobo luni na lonyango amakalunike isigulane. Ngokwakhe, umntu uyakuqala ukubonakalisa utshintsho kwiintsuku ezintathu zonyango. Ukuba ngaba umntu ebegula iinyanga ezintathu okanye ngaphezulu kunokumthath inyanga ukuba anyangeke.

Izigulane ziwafumana ngeelitha zeebhotile zelitha e-1. Baxelelwa ukuba basele ikomityi enye ekuseni, isiqingatha sekomityi emalanga kunye nekomityi egcweleyo ngorhatya. La mayeza aquka i-African potato, iingcambu zekhala kunye nomxube wamagqabi, imixube engumgubo nothuthu. UMapungubwe uthi iyeza lizakucoca igazi lomntu kwaye umntu abuyele kwisimo sakhe sangaphambili.



UMapungubwe, ixhwele elisebenzela e-Tzaneen, ubanga ukuba unokuyinyanga i-HIV kuba ukholelwa ukuba i-HIV ne-AIDS azikho. Endaweni yoko ukholelwa ukuba ezi zigulo nguMakhuma, okanye zenzeka ngenxa yokuba umntu ubengawalandeli amasiko ezinyanya. Ngenxa amaxhwele ayinxenye ebalulekileyo yoluntu lwaseMzantsi Afrika, amabango anjalo awayonyani kwaye “amayeza anyangayo” uMapungubwe nabanye bazama ukuwathengisa ngeke asebenze njengonyango lwe-HIV. Ifoto ngu-Adam Malapa.

Siyazi ukuba ikhona i-AIDS kwaye ibangwa yi-HIV. Oku kuqinisekiswa kwiintlobo ezininzi zophononongo zaselebhuleni ezingabalekiyo kwaye iyinyani e-Afrika njengokuba kunjalo eYurophu nase-Asiya.

Nangona amaxhwele enokunika inkxaso yezentlalo neyengqondo, arwanako ukunyanga okanye ukuphilisa i-HIV kwaye kukungakhathali kuwo nakurwarwaphi na ukubanga ukuba banako. Olona nyango lusebenzayo zii-antiretrovirals (ARVs), kwaye nee-ARVs azinako ukunyanga i-HIV.

Kutheni makavavanywe amayeza emveli

Ngu-Poppy Riddle



AMAYEZA EMVELI

Ifoto ngu-Samantha Reinders.

Akukhathaliseki nokuba amayeza ngawaseNtshona okanye ngawesiNtu. Okungamandla kukuba avavanyiwe na- okanye awavavanywanga.

Amayeza amaninzi emveli avavanyiwe ngokwenzululwazi. Amanye abonise ukuba ayanceda ukunyanga izifo okanye ukunyanga imiqondiso. Amanye kufunyaniswe ukuba ayingozi ebantwini. Amanye amayeza emveli abonakalise ukuba akanangozi ebantwini, kodwa awasebenzi ekunyangeni izigulo. Yiloo nto amayeza emveli kufuneka avavanywe, njegawo nawaphi na amanye amayeza. Ukuvavanya kusivumela ukuba siqinisekisa ukuba amachiza esiwathathayo xa sigula ayasanceda.

Ibali lempumelelo

Iyeza lemalaria i-**artemisinin** ngumzekelo ogqwesileyo wonyango olusebenzayo kwaye laqala njengeyeza lemveli. Namhlanje lisetyenziswa jikelele ukunyanga i-Plasmodium falciparum malaria, olona hlobo luqhelekileyo lwemalaria ehlabathini. I-Artemisinin yikhompawundi esebenzayo (into) enokufunyanwa kwiintlobo ezithile zezityala i- **Artemisia annua** (i-annual wormwood). Ngaphezulu kwewaka leminyaka, isityalo se-Artemisia besisetyenziswa ngamaxhwele ama-China ukunyanga izigulo ezininzi, kuqkwa nemalaria.

Ngoo-1960s, oosonzululwazi base-China bavavanya phantse ama-200 amayeza emveli ase-China, onke awayesetyenziswe ngamaxhwele emveli ukunyanga imalaria. I- Artemisia yaba kuphela kwayo eyafunyaniswa ukuba iyasebenza. Yabonakalisa ukuba iyazisusa izidlelli zemalaria emzimbeni ngokukhawuleza kunoko kwake kwenziwa lilo naliphi na ichiza.

Koko, oosonzululwazi bafumanisa ukuba umzimba womntu awunako ukufunxa ngokulula i-artemisinin, isehlisa ukusebenza kwayo. Ngoo ke oogqirh baye benza iimvavanyo ezingaphaya. Baye baphuhlisa iintlobo ze-artemisinin ekwakulula ukuba zifunxwe ngumzimba. Kodwa ke ingxaki ngezi ntlobo yayikukuba emva kweyure enye okanye ezimbini zisemzimbeni ukusebenza kwazo bekusehla. Ngoko ke oosonzululwazi baye baqhuba iimvavanyo ezingaphaya kwaye bafumanisa ukuba le ngxaki inokupheliswa kukunikwa kwe-artemisinin kunye nechiza elichasene nemalaria elihlala ixesha elide.

Lo mzekelo ubonisa ukuba amayeza emveli anokuxabiseka kakhulu kumlo ochasene nesifo. Koko, imbali ye-artemisinin ikwabonisa ukubaluleka kokuavanywa kwamayeza-kuqkwa namayeza emveli.

Kumayeza emveli angama-200 emalaria oosonzululwazi base-China abawavanyileyo, linye kuphela elasebenzayo ukunyanga isifo. Ngaphaya koko, eli chiza kwafuneka ukuba lilungiswe kwaye lisetyenziswe lidibene namanye amachiza

IVenkile yeMayeza eMveli ase-China



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ukwenzela ukuba libe luncedo ngenene njengonyango lwemalaria. Oosonzululwazi kunye noogqirha bebengeke bakwazi oku nge-artemisinin ngaphandle kovavanyo lwezenzululwazi olufanelekileyo lwechiza. Ngaphandle kwezi mvavanyo, ihlabathi beliza kuvinjwa elinye lamachiza agqwesileyo elichasene nemalaria.



Nangona izityalo namachiza kudala zasetyenziswa ekuphiliseni kwasemandulo, kubalulekile ukuba zonke izityalo namachiza asetyenziselwa ukunyanga, avavanywe ngokobugcisa ukukhuseleka kwawo kwa nokusebenza ngokwenyani kwawo. Ifoto ngu-Tony Wills.

Phakathi kwetyhefu nonyango

Ukuvavanywa kwamayeza nako kuyimfuneko ukumisela iidosi ezichanekileyo. Ngalo naliphi na iyeza, ukuba ngaba idosi iphezulu kakhulu, iyeza linokukwenzakalisa okanye likubulale; ukuba isezantsi kakhulu, linokungasebenzi iyeza.

I-digoxin, evela kwisityalo se-foxglove, ngumzekelo omhle woku. Kumakhulu eminyaka eyadlulayo, amaxhwele ayesebenzisa i-foxgloves ukunyanga isifo sentliziyo. Emva kweminyaka emininzi eyadlulayo kamva kwaye kwafunyaniswa ngosoonzululwazi ukuba eyona ndawo iluncedo kwesi sityalo yayiyi-digoxin. Koko, bafumanisa ukuba ngexa i-digoxin inyanga iingxaki zentliziyo xa iingedosi ezincinane, inokubulala abantu ukuba iidosi eziphezulu.

Xa usebenzisa isityalo kunzima ukufumana idosi efanelekileyo (kule meko ngenxa yokuba ezinye iinxenye zesityalo ziqulethe i-digoxin eninzi kunezinye). Ngoko ke, oosonzululwazi baqhuba iimvavanyo ezenza ukuba babe nako ukucoca i-digoxin kwi-foxglove. Baye ke baba nako ukubala umthamo ngqo ochanekileyo ofunekayo ukunyanga abantu ngaphandle kokubabulala.

Namhlanje, oogqirha banika izigulane i-digoxin ngohlobo lwepilisi, ukuqinisekisa ukuba idosi ichanekile. Ukuba ngaba oosonzululwazi bebengayivavanyanga i-foxglove, oogqirha ngaba abakaqiniseki ukuba bangazinyanga njani na iimeko ezithile zentliziyo ngokukhuselekileyo.

Xa sigula, sifuna ukuba ngcono. Sifuna iyeza esiqinisekileyo ngalo ukuba lizakusebenza. Yiloo nto ukuvavanya amayeza, kuqukwa namayeza emveli, kubalulekile. Ingxaki kwamanye amayeza emveli kukuba zange ake avavanywe ngokwenzululwazi, ngokoke asiqinisekanga nokuba ayasebenza na. Kutheni kufuneka uthathe into ongayaziyo nokuba iza kusebenza na ukuba ngaba unelinye iyeza olaziyo ukuba liza kukwenza ube ngocono?

Nangona sisazi, enkosi kuvavanyo lwezenzululwazi, ekubeni i-artemisinin ilunyango olukhuselekileyo kwaye olusebenzayo, ngeke sithethe okufanayo ngamanye amayeza amaninzi angavavanywanga athengiswa kwiindawo esihlala kuzo.

Amayeza angavavanywanga ayingozi

Unyango olungeyonyani lwe-AIDS uBhejane, iyeza leengcambu eliphuhliswe ngu- Zeblon Gwala, ngumzekelo omhle wamayeza anjalo angavavanywanga. UGwala uthi uBhejane lunyango lwe-HIV/AIDS. Ucebisa izigulane zakhe ukuba ziyeke ukuthatha ii- antiretrovirals (ARVs), amayeza avavanyweyo ngokwenzululwazi kwaye abonisa ukuyinyanga i-HIV, kwaye endaweni yoko zisebenzise unyango lwakhe, aluthengisa ngama-R340 ngebhotile. Akanakuvavanyeka kakuhle uBhejane kuba uGwala uyala ukuxela ukuba zeziphi na izithako ezikuye. Bonke oosonzululwazi bebenokufumanisa ukuba umxube awunatyhefu kwiiseli ezikhuliselwe kwiityhubhu zokuvavanya. IPhulo eliZabalazela uNyango (Treatment Action Campaign) (TAC) lenze isikhalazo esiye sanempumelelo esibhekiselwe kuGwala kuGunyaziwe wemiGangatho yeeNtengiso (Advertising Standards Authority) woMzantsi Afrika, ngokuthengisa unyango olungeyonyani lwe-AIDS.

Ukuze anakanwe uBhejane njengonyango lwe-HIV/AIDS, kuyakufuneka ukuba athelekiswe nonyango osele lukhona (ARVs) kumakhulu amaninzi ezigulane. Oku akwenziwanga. Ngoko ke asinaso isizathu sokukholelwa ukuba uBhejane uyiyo nantoni na kodwa uliyeza elinganyangiyi. Ukucebisa kukaGwala ukuba abantu mabayeke ukuthatha ii-ARVs kukungakhathali okugqithisileyo kwaye kunokukhokelela ekuswelekeni okungeyomfuneko. Ukuba ngaba ngenene ufuna ukunyanga abantu, u Gwala kufuneka akhuthaze ukuvavanywa kuka-uBhejane kwaye angazifihli izithako zakhe.

I-Sutherlandia

Amagama aqhelekileyo: Insiswa, Unwele, Mukakana, Phetola, Lerumolamadi, cancer bush, kankerbos, kankerbossie.

I-Sutherlandia isetyenzisiwe ngamanye amaxhwele ukunyanga izifo ezininzi kuqakamba umhlaza, isifo sephepha, isifo seswekile, umkhuhlane (influenza), ukuqaqamba kwamalungu ne-HIV. Nangona kunjalo, asikho isizathu sokucinga ukuba i-Sutherlandia inokunyanga nasiphi na kwezi zifo kwaye ukubanga ukuba inako kukungakhathali okugqithisileyo oko.

Okwangoku, oosonzululwazi bavavanya i-sutherlandia, ukubona ukuba iyanceda na ekunyangeni izigulo ezithile. Bazama ukuqonda ukuba iqulthe ntoni na i-sutherlandia, ukuze babone ukuba yeyiphi na inxenye yayo enokuba luncedo. Oosonzululwazi bakwavavanya i-sutherlandia kwizilwanyana ukubona ukuba iyingozi na kuzo kwaye inazo naziphi na iziphumo eziluncedo.

Iimvavanyo zakwangoko zibonise ukuba i-sutherlandia inokuba neziphumo eziluncedo. Koko, kukwakho ubungqina obucebisa ukuba iikhompawundi kwisityalo zinokuphazamisana nonyango lwe-ARV, ingakumbi indlela ezetyiswa ngayo (ezilungiswa) ii-ARVs ngumzimba.

Iimvavanyo ezininzi ezingaphaya ziyafuneka ukumisela ukuba iyasebenza na kwaye isebenza njani i-sutherlandia. Njenge-artemisinin, kuyakufuneka ukuba ivavanywe ukubona ukuba inobungozi na, ukuba iyasebenza ekunyangeni naziphi na iimeko, kwaye iyakuba yeyiphi na idosi efanelekileyo.

Abanye abantu bathi oogqirha bezonyango basebenzisa amachiza aseNtshona, ngexa amaxhwele esebenzisa amayeza esiNtu, lawo bathi athembeke kakhulu. Koko, imizekelo engasentla ibonisa ukuba amachiza ezonyango ayingowaseNtshona okanye abe ayingowemveli (i-Artemisinin yafunyanwa ngama-China, i-foxglove/digoxin yayisetyenziswa ngamaxhwele emveli).

Amachiza amaninzi ekuthiwa ngawaseNtshona asebenzisa iimveliso zendalo ezisetyenzisiweyo ngaphambili ngamaxhwele. Ezinye zee-protease inhibitors zakwangoko (zisetyenziswa nendibaniselwano yamachiza e-ARV) zathathwa kwiprotini ye-soy efunyanwa kwiimboty zesoya. Koko, ezi mveliso zendalo zisetyenziswa kuphela kumayeza aphuhlisiwe ngokwenzululwazi ukuba ngaba avavanyiwe kuqala. Ukuba ngaba unikwa ichiza ngugqirha wezonyango, uyakukumisela lona kuba iimvavanyo zenzululwazi, ezenziwe kumakhulu abantu, ziyakube zibonise ukuba yeyona ndlela ingcono le yokunyanga isigulo sakho.

Ijongwe kwakhona nguGqirha Justine Davies, Sense About Science neYunivesiti yase-Dundee.



Ezinye indlela zonyango ezaziwayo ezininzi zenza intengiso yokuba zinamandla okunyanga ngenxa yokuba zivela okanye ziquka izityalo kwizithako zawo. Ngamanye amaxesha izityalo zithengiswa ngokwazo njengokuba zinezinto eziphilisayo. Ngexa ukusetyenziswa kwezembali kucebisa ukubazinye izityalo zinazo ngokwenene iimpembelelo zokuphilisa, kubalulekile ukuba naluphi an unyango olunjalo kufuneka ludlule kuvavanyo lwezenzululwazi – njengolunye unyango olulolunye, indlela zokunyanga zemveli, kwaye ngenene naliphi na iyeza kufuneka livavanywe. Ngaphandle kokuvavanya, ngeke siqiniseke nokuba unyango lwezityalo luyasebenza na okanye lukhuselekile ukuba lusetyenziswe ngabantu. Ifoto ngoncedo lwe- www.mediaclubsouthafrica.com.



Ifoto ngu-Michael Wolf.



indima yamaxhwele emveli

Ngu-Marcus Low Amaxhwele anendima ebalulekileyo amawayidlale kumlo ochasene ne-HIV. Nakuba kunjalo, awanako ukuyinyanga i-HIV kwaye akukho nalunye kunyango lwawo olunokuba lusondele kwii- antiretrovirals ekulawuleni isifo.

UMzantsi Afrika unamalunga ne-190,000 yamaxhwele kwaye kuqikelelwa ukuba ngama- 70% abemi abasebenzisa iinkonzo zawo. Nangona la manani engenakuthembeka kakhulu, asazi ukuba ngabantu abangaphi abaya emaxhweleni ke ngoko ke kufuneka afake isandla kukhathalelo lwempilo kweli lizwe. Olunye uphando lubonisa ukuba inani labantu abaya emaxhweleni sele lehlile kancinane kwiminyaka yakutsha nje.

Abantu abaninzi baya koogqirha besilungu kunye nasemaxhweleni. Ngexa oogqirha bejolisa kakhulu emzimbeni kuqala, amaxhwele ajona kakhulu kwimiba yezentlalo, inkcubeko kunye neyenkolo. Ngoko ke, umzekelo, usulelo lwe-HIV ngamanye amaxesha lunokusolwa kwimimoya emibi okanye ekubeni izinyanya azonwabanga. Siyazi ke koko ukuba ii-antiretrovirals (ARVs) ziyeyona ndlela isebenzayo ekulawuleni i-HIV. Naliphi na ixhwele eliphikisa okanye elixelela abantu ukuba bangasebenzisi ii-ARVs elo lingaba bantu bathi banolwazi lokunyanga kodwa bengenalo. Kuyathenjwa ukuba umThetho wabaSebenzi ngezeMpilo beMveli unokunceda ukususa ubuxoki obunjalo.

Amaxhwele emveli njengxenye yesisombululo

Ezinye iintlobo zophononongo ziye zacebisa ukuba amaxhwele anokudlala indima ebalulekileyo ekuncedeni izigulane ezine-TB ukuba zithathe amayeza azo njengoko kufaneleke ukuba zenze njalo. Kwiphulo elinxulumeneyo, amanye amaxhwele aqeqeshelwa ukuba azazi iimpawu zosulelo lwe-HIV ne-TB ukuze azi ukuba azithumela nini na izigulane koogqirha bezonyango.

Kubalulekile ukuba amaxhwele athumele ekliniki naziphi na izigulane angakwaziyo ukuzinyanga ziphile. Izifo ezimandundu ezifana ne-HIV okanye umhlaza womlomo wesibeleko kufuneka zinyangwe ngugqirha msinyane kangangoko. Kwezinye iimeko unyango lwakwangoko lungawenza umahluko phakathi kobomi nokufa. Amaxhwele anokusindisa ubomi obuninzi ngokuthumela abantu ezikliniki xa ebona iimpawu ezinobungozi.

Ixhwele lisenako ukunika inkxaso efanelekileyo yasekuhlaleni kunye neyenkcubeko kwabo bayifunayo. Ngenxa yokunkqongophala kweenkonzo zezengqondo kwicandelo likarhulumente, oku kunokuzinceda ezinye izigulane ukuba zimelane nemeke kwaye zihlale zinethemba.



UmThetho wabaSebenzi ngeMpilo beMveli

Injongo yomThetho wabaSebenzi ngeMpilo beMveli kuku: (a) seka iBhunga leXeshana labaSebenzi ngeMpilo beMveli loMzantsi Afrika, (b) ukubonelela ngobhaliso, uqeqesho kunye nezenzo zabasebenzi ngempilo bemveli, kunye (c) nokunceda kunye nokukhusela imidla yabantu abasebenzisa iinkonzo zabasebenzi ngempilo bemveli.

Koko, iinkcukacha zolawulo nokwamkelwa azikacaci, kwaye amacandelo amaninzi omthetho awakanyanzelwa okwangoku, amaxhwele ayakuba nonyaka omnye wokubhalisa. Ukuba ngaba ayasilela ukukwenza oko, ngeke abesavunyelwa ukuba asebenze njengamaxhwele. Amaxhwele angabhaliswanga ayakuba netyala ukuba ngaba abanga ukuba angayinyanga i-HIV, umhlaza, okanye ezinye izifo ezibulalayo.

Yintoni ukusebenza ngempilo kwemveli?

UmThetho wabaSebenzi ngeMpilo beMveli ukuchaza ukusebenza ngempilo kwemveli “njengokwenza umsebenzi, inqubo okanye inkonzo ngokusekelwe kwifilosofi yemveli equka ukusetyenziswa [ukusetyenziswa] kwamayeza emveli okanye izenzo zemveli” kwaye okuneenjongo —

- zokugcina okanye ukubuyisela impilo okanye ukusebenza komzimba okanye kwengqondo; okanye
- ukufumanisa ngoxilongo, ukunyanga okanye ukuthintela isigulo somzimba okanye sengqondo; okanye
- ukubuyisela kwisimo sangaphambili, okanye ukwenza kuqale kwakhona ukusebenza okuqhelekileyo kusapho okanye kuluntu; okanye
- ukulungiselela umntu ngokwasemzimbeni kunye nasengqondweni ekufikiseni, ebumntwini obudala, ekukhulelweni, ekubelekeni nasekuswelekeni.

Umthombo: Traditional Health Practitioners Act.

Indlela esebenza ngayo inzululwazi

Ukuba nako kwethu ukuzuzwa ulwazi, siludlulise phakathi kwabantu kwaye siluphucule inokuba sisakhono esohlukanisa ngokucacileyo abantu kwizilwanyana.

Ifoto ngu-Samantha Reinders.

Ngu-Eduard Grebe

Sikwenze oku ukusukela ekuqaleni kwexesha. Into esithi 'yinkcubeko' lulwazi kunye nemikhwa eye yakheka kumawaka eminyaka. Koko, inzululwazi luhlobo olukhethekileyo lolwazi evele kuphela kutsha nje kwimbali yoluntu. Ibandakanya ukhangelo lwemethodoloji yolwazi kusetyenziswa ophando olucwangcisiweyo, oluqhutywa ngokwe 'indlela yezenzululwazi'.

I 'ndlela yenzululwazi' ithetha ukwenza ingcinga ethathwa njengenyaniso ngokuba zisebenza njani izinto kuze ke kuvavanywe ezi zimvo kusetyenziswa imifuniso elawulwayo. (Ingcinga ethathwa njengenyaniso yinkcazo esesikweni yokuba into kucingelwa njani na ukuba iyasebenza.)

Uphando lwezonyango lusebenzisa indlela yezenzululwazi ukuwenzela ukuba ubomi babantu bube ngcono. Lunokufumanisa ukuba yintoni ebanga isifo kwaye loluphi na unyango olusebenzayo. Ngelishwa ummandla wezonyango unokuchatshazelwa kwakhona zizo zonke iintlobo ezenze namabango angasingawo awenzululwazi. Ukuqonda inzululwazi yamayeza kunokusinceda ukuba sixele umahluko phakathi konyango oluxhaswa bubungqina benzululwazi kunye 'namayeza' amaninzi asekelwe kukhoho lodwa.

Uphando lwezonyango

Uphando lwezonyango lisebe lenzululwazi yezonyango olusebenza ngophuhliso nokuvavanywa kokunxulumene nezonyango okutsha njengamachiza neendlela zotyando. Jikelele, xa umntu ecebisa okunxulumene nezonyango okutsha, izinto ezimbini maziqinisekise phambi kokuba kusetyenziswe oko: Okokuqala, kukuba abantu bangayisebenzisa ngokukhuselekileyo (kuqakwa neemeko enokungathathwa phantsi kwazo kunye naziphi na iziphumo ebezingalindelekanga ezinokubakhona) kwaye okwesibini, ingaba iyasebenza ngokwenene. Kukho imithetho esekwe kakhule yokuphanda ngokhuseleko nokusebenza kwamachiza, iindlela zokufumanisa isifo ngoxilongo kunye nezinye izinto ezintsha ezinxulumene nonyango. Olona hlobo lubalulekileyo lophando kuthiwa lulingo lwezonyango.

Ulingo lwezonyango ayisosenzo nje sophado esilungileyo, lubalulekile kwindlela amazwe amaninzi alawula ngayo amayeza. Phambi kokuba ichia elitsh lenziwe lifumaneka, ubungqina ngokukhuseleka nokusebenza kwalo kufuneka bunikwe kwiziphathamandla ezifanelekileyo. EMzantsi Afrika, onke amachiza, iimvavanyo zokufumanisa isifo ngoxilongo, izixhobo zezonyango, njl. njl. kufuneka zibhaliswe kwiBhunga elilawula amaYeza (Medicines

Control Council) (MCC). I- MCC iye izijonge kwakhona iziphumo zolingo lwezonyango kunye nenye idata yezenzululwazi phambi kokuba ivume ukuba lisetyenzise ichiza elitsha.

Kubalulekile ukuqonda ukuba ayizizo zonke iintlobo zophononongo ezinokunika ubungqina obunobulunga obufanayo. Ukuba lixabiso elingakanani ekufuneka silihlomele kwiziphumo zophononongo lixhomekeka kwini lezinto. Enye yezi luhlobo lophononongo olwenziwayo. Umzekelo, ulingo lwezonyango oluyilwe kakuhle oluvavanya okunxulumene nezonyango ngokomfuniselo lunika ubungqina obuluqilima kunophononongo lokuqwalasela. Uphononongo lokuqwalasela lolo luzama ukufumana iziphumo zonyango ngokujonga ulwazi olufunyenwe ngokugcinwa kweerekhodi kwesiqhelo. Ubulunga bobungqina bukwachathazelwa kukuba ingaba uphononongo lulandela imithetho yoyilo nezenzo zophononongo ezizo. Ezinye izinto ziquka inani labantu abathabatha inxaxheba kuphononongo, kunye nesiphumo, okanye isiphelo esilinganisayo.

Ulingo lwezonyango lwamachiza amatsha

Uphuhliso lwamachiza amatsha lufuna uphando olukhulu. Kwakube kufunyenwe into ethembisayo, kuye kuphandwe ngayo elebhu kuze ke kwenziwe ngayo uphononongo lwaphambi konyango. Oku kuquka uphononongo kwizilwanyana ukufumanisa ukuba ingaba ichiza lingasebenza na ebantwini, kwaye linytyhefu kangakanani na. Phambi kokuba uphononongo ebantwini luqale, kufuneka kufunyanwe imvume kwiziphathamandla ezilawulayo, eziye ziyijonge kwakhona idata kwiintlobo zophononongo lonyango lwangaphambili. Ngeli thuba ichiza laziwa njengechiza elitsha lophando (investigational new drug) (IND). Ulingo lwezonyango kufuneka luvunywe kwakhona yikomiti yeenqobo ezisesikweni okanye ibhodi yeenqobo ezisesikweni. La maqela aye ayijonge kwakhona iprotokoli yophando (uyilo olusesikweni lophando) ukuqinisekisa ukuba amavolontiyi angabantu awasetyenziswa kakubi okanye afakwe engozini engalindelekanga.

Uphando lwezonyango kumachiza amatsha ngokuqhelekileyo luqhutywa ngokwamabakala amane:

ISigaba soku-I: Uphononongo lokhuseleko lwenziwa kusetyenziswa inani elincinane lamavolontiyi asempilweni. Abathabathi nxaxheba ngokuqhelekileyo baye bajongwe imini nobusuku. Ukongeza ekuqinisekiseni ukuba ichiza alinazo iziphumo ebezingalindelekanga eziyingozi, kuye kuphandwe nangezinye iimpawu zonyango. Ezi zinokuquka ii- 'pharmacokinetics' zalo (umzimba ulifunxa njani ichiza,



uthatha ixesha elingakanani ukusebenza ngalo kwaye ulikhupha njani na, njl. njl.).

Ifoto ngu-Samantha Reinders.

ISigaba sesi-II: Ukuba ngaba i-IND ibonakala ikhuselekile kulingo lweSigaba soku-I, abaphandi bavavanya ukuba lisebenza kakuhle kanjani na kwiqela lamavolontiyi amaninzi (kaninzi iba ngama-20 ukuya kuma-300). Olu lingo lukwanceda ukwenza isigqibo ngeedosi ezingcono kunye nokuqinisekisa ukukhuseleka kweyeza.

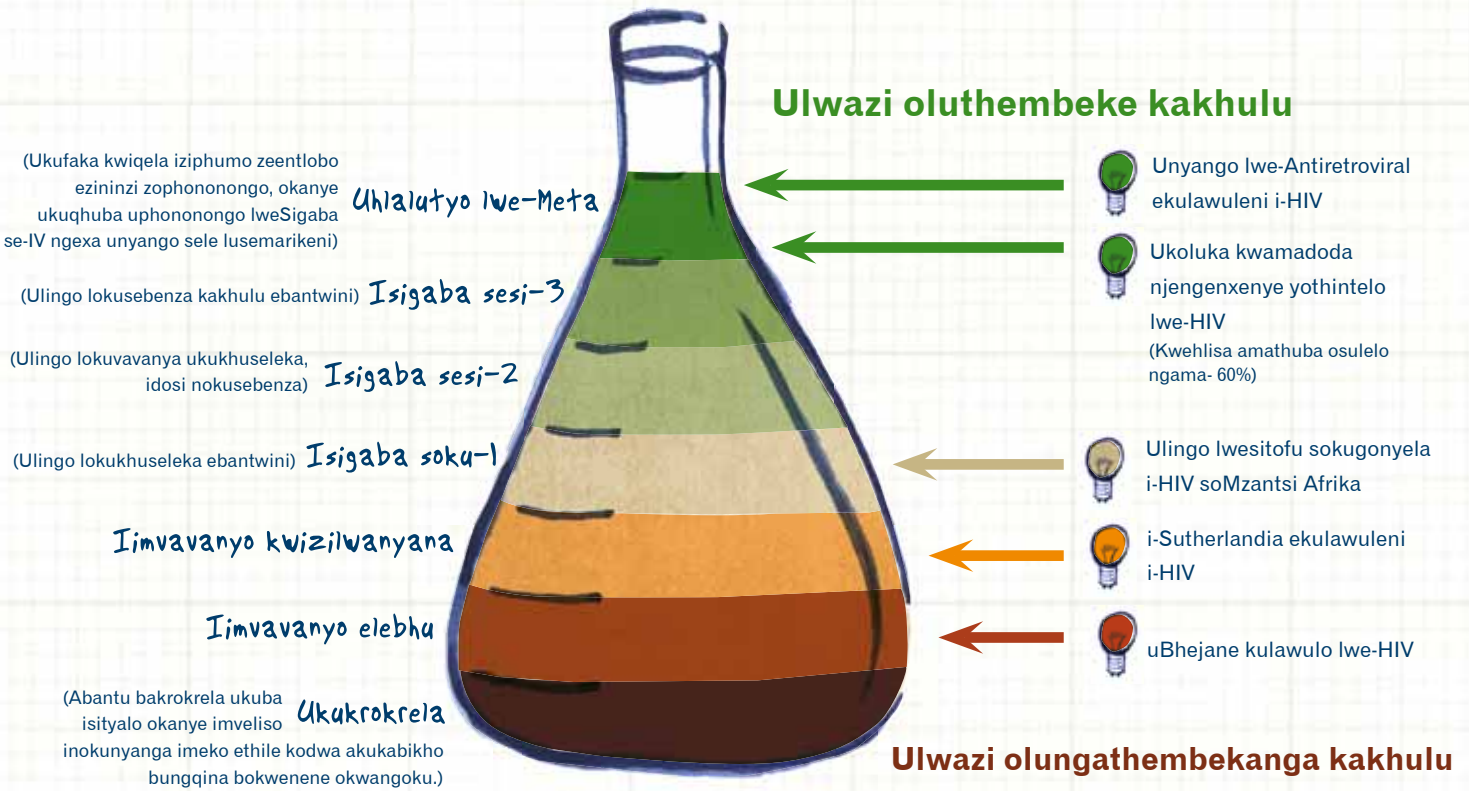
ISigaba sesi-III: Ngokuqhelekileyo olu phando luba ngohlobo lolingo 'olungenamkhethe olulawulwayo' (jonga kwiphepha le-17). Lwenziwa kwiindawo ezininzi kwaye lusenziwa kumaqela amakhulu ezigulane (ngokuqhelekileyo iba ngama-200 ukuya kuma- 3000 okanye ngaphezulu). Ulingo lweSigaba sesi-III luyilelwe ukufikelela ngaphandle kwamathandabuzo ukuba lusebenza kakuhle kanjani na unyango xa kuthelekiswa nolona nyango lungcono lusetyenziswayo okwangoku. Ukuvunywa okulawulwayo kaninzi kufuna ngaphezulu kwesiGaba sesi-III solingo esinye esiye sanempumelelo.

ISigaba sesi-IV: Esi sikwaziwa njengolingo 'ucupho lwasemva kwentengiso'. Siyilelwe ukuhlola amachiza amatsha emva kokuba efumaneka jikelele. Ulingo lujonga ezo ziphumo ziyingozi zinqabileyo kunye nokunye okunokuthathelwa ingqalelo kukhuseleko. Ngamanye amaxesha olu lingo luye lukhokelele ekubeni kunyinelwe amachiza kwini elincinane lezigulane. Ngokunqabe kakhulu, lunokukhokelela ekurhoxiseni kwechiza emarikenini.

Uyilo lolingo lwezonyango

Ulingo lwezonyango lolona hlobo lubalulekileyo lophando lwezonyango, kuba lwenza isigqibo sokuba ingaba unyango lukhuselekile kwaye lusebenza na. Kubaluleke kakhulu ke ngoko ukuba ulingo lwezonyango luyilwe kakuhle ukuze sibe nako ukuzithemba iziphumo. Ulingo kufuneka lube

Ayizizo zonke iintlobo zophononongo ezizeza ubungqina obunobulunga obufanayo.



Ngexesha unyango okanye ungenelo kwezempilo lufikelela encotsheni yale leli, singatsho ngezinga eliphezulu lokuqiniseka ukuba luyasebenza na okanye alusebenzi. Unyango oluninzi luye luyekwe kwisigaba saselebhu, xa kucaca ukuba alunakwenzeka, okanye kwisigaba sokhuseleko, xa kuchongwa iingozi.

neprotokoli ecazululiweyo - uxwebhu oluchaza ngoku ukuba ziyakukhethwa kwaye zinyangwe njani izigulane, ziyakugcinwa njani iirekhodi njl. njl. Oku kubaluleke kakhulu ingakumbi kulingo oluqhutywa kwiindawo ezininzi. Ngenye indlela, kusenzokwenzeka ukuba okwenziwa kuphando kusenokwahlukana.

Kwiimeko ezininzi, uyilo olugqwesileyo lophononongo lolu 'lulingo olungenamkhethe olufihlwe ngokuphindiweyo olualwulwayo'. Ulingo lwechiza oluninzi lweSigaba sesi-II neSigaba sesi-III lungolu hlobo. Jonga ibhokisi ngenkcazo ecazululiweyo yolu hlobo lolingonyango.

Ngokucacileyo, ngenxa yokuba ulingo lonyango iyimifuniselo ebantwini, luphakamisa imibuzo yeenqobo ezisesikweni enzima. Umzekelo, ukuthatha i-placebo kukho unyango olwaziwayo ukuba luyasebenza kakubi kwimpilo yesigulane. Kwezinye iimeko lo mba kusetyenziwa ngawo ngokuba kusetyenziswe "ulawulo olusebenzayo". Oku kuthetha ukuba unyango lovavanyo luthlekiswa kunyango oluqhelekileyo olusetyenziswayo okwangoku, kunakunyango olungelulo olokwenyani. Xa kuvavanywa ii-antiretrovirals (ARVs) ezintsha, zithelekiswa nee-ARVs ezifumanekayo okwangoku.

Kukho izikhokelo zeenqobo ezisesikweni kunye nemithetho esebenzayo kulingo lwezonyango, njengemfuneko

zokufumana imvume esekelwe elwazini kuzo zonke izigulane. Kwakhona, iibhodi zeenqobo ezisesikweni ngamanye amaxesha ziye zilumise ulingo xa kucaca ukuba unyango luyasebenza kwaye akuyi kwamkeleka ukuqhuba unika ezinye izigulane ii-placebos.

Ukubaluleka ngokwezobalo

Ukuze ubonise ukuba unyango luluncedo, kufuneka kubekho "ukubaluleka kwezobalo" umahluko kwiziphumo phakathi kwamaqela onyango kunye namaqela e-placebo kulingo. Kukho amanyathelo emathematika aphuhliswe kakhulu okwenza isigqibo ngokubaluleka kwezobalo. Eyona iqhelekileyo kwezi yi- p-value edityaniswe kwisiphumo esithile. I- p-value ilinganisa ukuba nokwenzeka kokuba umahluko phakathi kwamaqela amabini ezigulane bekunokwenzeka ngebhaqo. I- p-value esezantsi ke ngoko ibonisa ukuba abantu banethemba elikhulu kwisiphumo. Inani labantu abakuphononongo luneempembelelo ezinkulu ekubeni singachonga ukuthembela okungakanani na kwaye silinganise iziphumo zonyango. Oku kwaziwa njengamandla ezobalo olingo. Koko, ulingo olukhulu nalo luyabiza.

Ulingo olungenamkhethe olufihlwe ngokuphindiweyo luyilelwe ukuphelisa nayiphi na imithombo enokubakhona yokuthatha icala okanye izinto ezinokudala ukucela okungasiyo nyani bokuba into iyasebenza ngexa ingasebenziyo (okanye ngokuphendululekileyo). Imiba engundoqo yolu lingo yile:

Ulawulo: Abaphandi kufuneka bohlukanise isiphumo sonyango oluvavanywayo kuzo zonke ezinye izinto. Ukuze baphumelele koku, abantu abathabatha inxaxheba kulingo bohlulwa ngokwe 'qela lonyango' elifumana unyango oluvavanywayo kunye 'qela lolawulo' (oku kwaziwa njengama- 'candelo'). Inkqubo yokufumana unyango (nokuba unyango ngokwalo lunazo naziphi na iimpembelelo okanye alunazo) yenza ukuba izigulane

ezininzi zizive zingcono. Oku kwaziwa njengeempembelelo ze-placebo. Kwimo efanelekileyo, iqela lolawulo lifumana i-placebo okanye unyango 'olungelulo olokwenyani' (njengepilisi yeswekile okanye inaliti ye-saline). Ulingo olunjalo 'lulawulwa yi-placebo'. Kwezinye iimeko, unyango luthelakiswa nonyango oluqhelekileyo olusetyenziswayo okwangoku, kunakunyango olungelulo olokwenyani. Oku kwaziwa 'njengolawulo olusebenzayo'. Olunye ulingo, olufana nolo luthelakisa iidosi ezahlukeneyo okanye iindlela zokusebenzisa unyango osele lukhona, luye lwaphindaphinda amacandelo onyango.

Ukufihla: Ukuba ngaba isigulane siyazi ukuba sifumana unyango lokwenene, iziphumo zonyango azinako ukwahlulwa kwiimpembelelo

ze-placebo. Kufuneka ke ngoko kungenzeki ukuba uxele unyango lokwenene kwi-placebo. Izigulane kufuneka zingazi ukuba zifumana yiphi na. Ikwaluluvo oluhle ukufihla kubasebenzi bolingo ukuba ingaba banika izigulane unyango lokwenene – kuba kunokwenzeka bengacinganga bakuxele oku kwizigulane. Oku kwaziwa njengokuba kukufihla okuphindiweyo.

Ukungabinamkhethe: Isigulane ngasinye sifakwa ngokungenamkhethe kwicandelo (njengakunyango okanye iqela lolawulo). Oku kuqinisekisa ukuba onke amaqela, ukuba ngaba akukho nto ebeyinikiwe, ngokulinganayo anokuba ngcono okanye abambeke. Ukuba ngaba uphononongo lunomkhethe, nawuphi na umahluko kwisiphumo phakathi kwamaqela unokuba ngowesizathu esingaphandle kokuba bafumene unyango olusebenzayo.

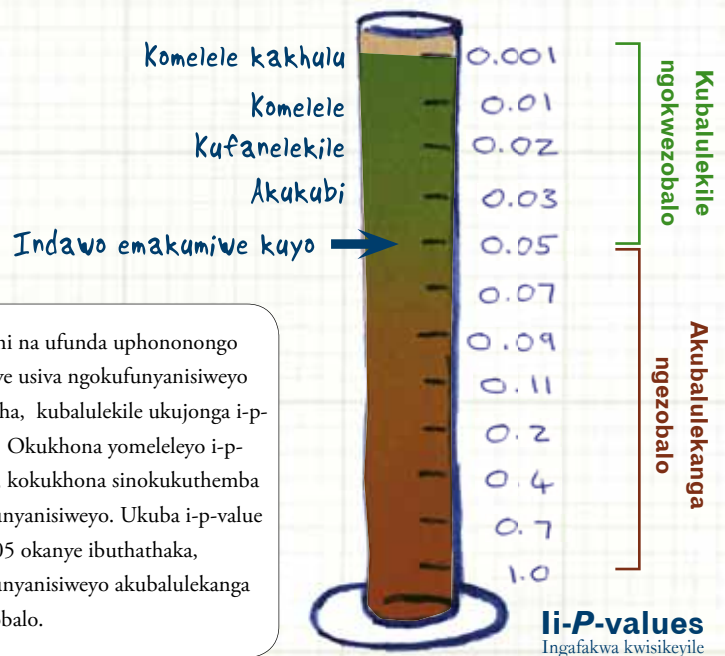
Ukujonga kwakhona okwenziwe ngendlela eyiyo

Ukujonga kwakhona okwenziwe ngendlela eyiyo okanye 'i-meta-analyses' kilingo luphononongo oludibanisa iziphumo zeentlobo ezininzi zophononongo. Zonke ezi ntlobo zophononongo zithetha ngeseti yeengcinga ezithathwa njengenyaniso ezinxulumeneyo zophando. Ukujongwa kwakhona okwenziwe ngendlela eyiyo yolingo lwezonyango – konke kulinganisa iziphumo zonyango olunye – kuvumela abaphandi ukuba baphumeze amandla ezobalo amakhulu kunalo naluphi na ulingo olulodwa. Oku kunika uluvo olungcono lwesayizi yokwenene yeziphumo zonyango ngapahndle kokwenza uphononongo olutsha nolukhulu.

Ukujongwa kwakhona kwenkqubo kunika ezona ziphumo zithembekileyo. Yeyona ndlela igqwesileyo yokuseka 'imo yobungqina' kumbuzo othile. Olu jongo kwakhona ngamanye amaxesha luneziphumo ebezingalindelekanga. Umzekelo, lunokubonisa ukuba unyango luyasebenza ngexa uninzi lophando olungalodwa lubonisa okuchaseneyo (okanye ngokuphendululekileyo). Umthombo ohlonitshwayo wokujongwa kwakhona kweenkqubo kungenelo lwezonyango yi-Cochrane Collaboration. Ivezu ukujongwa kwakhona okugqwesileyo okuye kwachaphazela kakhulu izenzo zamayeza onyango. Umzekelo, ukuJongwa kwakhona kwe-Cochrane kuye kwafaka kwiqela elinye iintlobo ezintathu ezinkulu zolingo kulwaluko. Ziyi zabanakalisa ukuba ukoluka kuyayinciphisa ingozi yosulelo lwe-HIV kumadoda athanda isini esingafaniyo nesawo. Oku kuye kwakhokelela kwizincwadi zokuba ulwaluko kufuneka lunikwe njengenxenywe yeenkqubo zothintelo lwe-HIV.

Inzululwazi isinike ulwazi lokuphucula kakhulu ubude nobulunga bobomi babo bonke abantu. Kwezinye iimeko oku kuthatha uhlobo lwamayeza aphucukileyo 'obuchwepheshe obuphezulu', kodwa ke iye yaninzi kakhulu inkqubo kwimpilo yoluntu esekelwe kungenelo olulula, njengezitofu zokugonywa kunye nokunyangwa kwamanzi okusela. Koko, kubantu abaninzi kakhulu uncedo lwenzululwazi yezonyango alukafiki okwangoku. Yimfanelo yethu eyokuqinisekisa ukuba lonke uluntu luyancedeka kwenye yempumelelo yalo enkulu.

Ukubaluleka ngokwezobalo kukhonjiswa ngee-p-values



Amayeza anika ithemba elingeyonyaniso

Maninzi amayeza anganyangiyo asijikelezileyo. Amanye avavanyiwe kwaye kwafunyaniswa ukuba awasebenzi. Amanye awavavanywanga kwaye asetyenziswa ukunyanga i-HIV, nangona enokuba yingozi. Uninzi lwabantu abathi banolwazi lokunyanga babe bengenalo beza kwiindawo esihlala kuzo kwaye unyango lwabo lunokunika abantu abane- HIV ithemba elingeyonyaniso.

Unyango lwesifo ngeedosi zamayeza endalo (Homeopathy)

Aluyinyangi okanye liyiphelise i-HIV

Abantu abanyanga isifo ngeedosi zamayeza endalo bakholelwa ekubeni banokusinyanga isifo ngokunika izigulane iidosi ezincinane kakhulu zeyeza abathi liza kuveza umqondiso ofanayo njengesifo ngokwaso. Kaninzi bakwenza oku ngokuxuba iyeza emanzini. Balixuba kangangokuba kude kungabikho yeza liseleyo emanzini. Abantu abanyanga isifo ngeedosi zamayeza endalo bawathengisa ngemali eninzi kakhulu la manzi.

UMbutho weHlabathui weMpilo kutsha nje uye walumkisa ngokuba ukunyanga isifo ngeedosi zamayeza endalo ngeke kunyange i-HIV, TB, imalariya okanye umkhuhlane. Ukunyanga isifo ngeedosi zamayeza endalo zange kuke kubonakalise ukuba kunyanga nasiphi na isifo esimandundu kwaye uphononongo lufumanise uncedo oluncinane olufunyanwa zezinye izigulane lungenxa yeempembelelo ze-placebo (jonga kwiphepha lesi-5 ngokungaphaya ngeziphumo ze-placebo).

I-Revivo

Aiyinyangi okanye iyiphelise i-HIV

UGunyaziwe wemiGangatho yeeNtengiso wamaZantsi e-Afrika kutsha nje uye wagweba ngelithi iintengiso zezongezo zeengcambu ze-Revivo kufuneka zirhoxiswe eMzantsi Afrika. Iintengiso ze-Revivo zenze amabango angenabo ubungqina bokuba ezi zongezo ziyasebenza ukunyanga i-HIV, zenyusa isibalo se-CD4 kwaye zehlisa umthamo wentsholongwane egazini. I-Revivo akukhange kuke kwenziwe ulingo lwezonyango ngayo ebantwini kwaye asikho isiseko sezenzululwazi kula mabango. Abantu abane- HIV-bayacetyiswa ukuba bangachithi imali yabo kwi-Revivo.

Imithombo: Liu, J.P. and E. Mannheimer, M. Yang "Herbal medicines for treating HIV infection and AIDS" *Cochrane Database System Review* 3 (2005); Mills, E. and P. Wu, E. Ernst "Complementary therapies for the treatment of HIV: in search of the evidence" *International Journal of STD and AIDS* 16.6 (2005); Shang, A. and K. Huwiler-Muntener, L. Nartey, et al. "Are the clinical effects of homeopathy placebo effects? Comparative study of placebo-controlled trials of homeopathy and allopathy" *Lancet* 366 (2005).

Jonga kwiphepha le-10 ngokungaphaya ngeyeza elinganyangiyo uBhejane kunye nephepha le-11 ngokungaphaya nge-Sutherlandia.

I-Spirulina

Asiyinyangi okanye siyiphelise i-HIV

Izongezo zesondlo ze-Spirulina azinakuyinyanga i-HIV, okanye kube kukho nabuphi na ubungqina bokuba inokunceda ukulawula isibalo se-CD4 okanye umthamo wentsholongwane egazini.

Uninzi lophando olwenziweyo kwi-spirulina lwaqhutywa kwiilebhu okanye kwizilwanyana. Siyakwazi kuphela ukuba izongezo ze-spirulina zinalo naluphi na uncedo kubantu abane-HIV kwakube ulingo olukhulu, olulawulwa yi-placebo, olufihlwe ngokuphindiweyo lwenziwe ebantwini. De kube ngoko, asikho isizathu sokucinga ukuba siyakukunika uncedo, nokuba yintoni na enokuthethwa ngabantu abathengisa ezi zongezo.

Unyango lokugqojozwa kwesikhumba ngeenaliti

Aluyinyangi okanye liyiphelise i-HIV

Unyango lokugqojozwa kwesikhumba ngeenaliti luquka ukufakwa kweenaliti ezincinane kumalungu athile omzimba wesigulane ukuze kuphele iintlungu okanye kunyange imeko ethile.

Unyango lokugqojozwa kwesikhumba ngeenaliti alunakunyanga i-HIV. Kwaye abukho ubungqina obuthembekileyo bokuba unyango lokugqojozwa kwesikhumba ngeenaliti lunokuthomalalisa okanye lunciphise iziphumo ebezingalindelekanga zonyango lwe- ARV. Ezinye iintlobo zophando, koko, zicebise ukuba unyango lokugqojozwa kwesikhumba ngeenaliti lunokunceda kwiimeko ezithile, kodwa ke ezi zinto zifunyanisiweyo kuphando zinokuphikiswa. Apho unyango lokugqojozwa kwesikhumba ngeenaliti lunika khona uncedo, kucingelwa ukuba oko kungenxa yeempembelelo ze- placebo.

Abantu abathi banolwazi lokunyanga kodwa bengenalolo eLimpopo

Ukusilela ekulawuleni ngokusebenzayo amayeza angavavanywanga athengiselwa abantu abane- HIV ngowona mqobo ungundoqo kumlo wethu wokulwa lo esi sifo sikho jikelele. IPhulo eliZabalazela uNyango (Treatment Action Campaign) (TAC) licele umngeni ekungabikhweni kolawulo. Liye laphumelela kaninzi, ekunqandeni abantu abaziwayo abathi banolwazi lokunyanga isifo babe bengenalolo ekubeni baqhube besenza amabango angeyonyani amalunga namayeza abo angavavanywanga. Umceli mngeni, koko, kusekude ukuba uphele. Sisabona abantu abaninzi abathengisi imixube bengafihlisi ezitalatweni kungekho mntu ubanqandayo.

Ngaphaya koko, eLimpopo, ezo ndawo kuthiwa zigcina abantu abagulela ukufa zinyanga abantu abane-HIV zisebenzisa amayeza angavavanywanga. Ngaphandle kokuba abantu abaninzi beswelekile kwezi meko, akukho mntu uthathela kuye uxanduva ngoku kusweleka kwabo bantu.

Abahlali abaninzi bePhondo laseLimpopo benza izigqibo ngempilo yabo ezisekelwe kwinkcubeko, inkolo kunye neenkolelo zemveli, kunakubungqina bezenzululwazi. Xa abantu begula, kaninzi baye baqhibe ekubeni bathakathiwe, kunokuba bayokwenza uvavanyo lwe-HIV, TB okanye ezinye izifo umntu aphila nazo. Oku kululibazisa ukufumana unyango lwamayeza kunokuba neziphumo ezibi kwimpilo kwaye zinokude zibulale.

Nanga amanye amayeza angavavanywanga kunye neenkonzelo ezifumaneka eLimpopo:

Amanzi angcwele

La ngamanzi 'angcwengekileyo', abizwa i-R100 ngeelitha ezintlanu. Umthandazeli uyawathandazela amanzi. Xa ugqibile ukuwasela, kufuneka uhlawulele amanye, kuba umthandazeli ukuxelela ukuba uwasele ubomi bakho bonke la manzi. Lo mthandazeli uhlala eSeshego (ilokishi enkulu eLimpopo), apho athengisa la manzi e-Seshego Plaza kunye nasezitalatweni.

Nangona amanzi acocekileyo ebalulekile, amanzi - nokuba angcwenge kanjani na - ngeke ayinyange i-HIV, ehlise umthamo wakho wentsholongwane egazini okanye enyuse isibalo sakho se-CD4.

Ixesha likaMbeki noTshabalala-Msimang lokungamkeli ukuba ikhona i-AIDS lingaba liphelile kodwa kwiikona zezitalato kunye nasezimarikeni kwilizwe xa lilonke, amayeza angavavanywanga asathengiswa. U-Lawrence Mbalati unika ingxelo ekwiPhondo laseLimpopo.

Lo mthandazeli ngokucacileyo uthi unolwazi lokuphilisa abe engenalolo kwaye udlala ngezigulo zabantu abe yena egcwalisda iipokotho zakhe.

Imixube engenamagama

Le yimixube ethengiswa ingaphakathi kwiihhotile ezimnyama zeziselo. Abenzi bayo abazixeli izithako ezisetyenziswe ukwenza le mixube.

Ngoko ke, olu lwelo ngokulula nje lunokuqulatha izinto eziyityhefu eziyingozi kwimpilo yethu. La 'mayeza' ayafumaneka kwimimandla emininzi kwaye ithengiswa ezikoleni zezitalato ngama-R80 ilitha. Asikho isizathu sokucinga ukuba le mixube ingasinceda. Abantu abane-HIV kufuneka bakuphephe ukubeka impilo yabo engozini kwaye bechitha imali kula mayeza angasebenziyo.

Iindawo ezigcina abantu abagulela ukufa

Sivile ngezo kuthiwa ziindawo zokugcina abantu abagulela ukufa ezimbini apho ukuthathwa kwee-antiretrovirals (ARVs) kungakhuthazwayo. Enye ikwisithili saseSekhukhune enye iseMhakweng. Ezi 'ndawo zigcina abantu abagulela ukufa' yimizi yamaxhwele, egcina abantu abagulela ukufa abane-HIV.

Iicawa ezikhaba ii ARVs

Njengakwamanye amaphondo, ezinye iicawa eLimpopo - ngokuqinisekileyo hayi zonke - zibanga ngaphandle kobungqina ukuba zingayinyanga i-HIV. Kwimimandla yaseModjadjie, iicawa ezithile ziityhafisa abantu ekubeni bathethe ngeekhondom, ukucetyisiwa nokuvavanywa ngokuzithandela, okanye unyango. Zibonakala zikholelwa ukuba into eyenza abantu bagule ayiyo-HIV, kodwa yiMakhuma (- abahlanjwanga emva kokuba kusweleke umntu kusapho).

U-Charles Moponya we-TAC uyangqina ukuba kulula kanjani na ukuthenga elinye iyeza -kunye nokuba libiza malini na ukuthenga ezo zinto kuthiwa lunyango ezinika ithemba elikhulu ekungekho bungqina ngokwezenzululwazi ukuba ziyakulunika. Apha u-Charles uthatha abafundi be-Equal Treatment abanike umfanekiso ngqondweni wemva kwemini yokuthenga amayeza angasebenziyo eMzantsi Afrika. Iifoto ngu-Moses Makhomisan.



U-Charles ubonisa imali eliphelile eli-R100 efunekayo ukuthenga oko kuthiwa ngamanzi 'angcwele, 'iSiselo seMpilo iPhuma' ('i-Phuma Health Drink').



U-Charles ufumana amanzi kunye nemiyalelo yonyango kumthengisi wawo. U- uyaxelelwa ukuba ukusukela ngoku kufuneka asele la manzi kuphela kwaye uyakuwasela ubomi bakhe bonke.



Oko kungasetyenziswanga kuthiwa "ngamanzi aphilisayo," kuqukwa noluhlu lwezinto eziphilisayo.

Ukulawula amayeza eMzantsi Afrika

Uninzi lwengxoxo-mpikiswano jikelele ngamayeza ijolise ekubeni yintoni enokwenziwa ukuqinisekisa ukuba amaxabiso awo awanqandi abantu ekubeni bawafumane. Kuncinane ke, koko, okuthethiweyo ngolawulo lwamayeza.

Ngu-Jonathan Berger

EMzantsi Afrika, ukungafuni ukukholelwa kukaThabo Mbeki, Manto Tshabalala-Msimang noThami Mseleku kunyanzele amatsha ntliziyo e-AIDS kunye nawokhathalelo lwempilo ukuba asebenze ngommiselo wamayeza. Ukungavumi ukukholelwa nokuthi unako ukunyanga ube ungenako kuxhaswa ngabo bobathathu aba bantu kunike ubungqina bokuba ngexa kuyimfuneko ukubeka amaxabiso amayeza phantsi kolawulo, ukwenza oko akuniki siqinisekiso sofikelelo kumayeza anzalo.

Uwalawula njani amayeza uMzantsi Afrika

UmThetho wamaYeza kunye nokuNxulumene Nawo we-101 ka-1965, osanda kulungiswa kutsha nje ngo-2008, ngumthetho ongundoqo olawula ukuba aphuhliswa njani amayeza, aphuhliswa, kwaye esetyenziswa njani eMzantsi Afrika. Kunye neminye imithetho, ingakumbi iMimiselo Jikelele ka-2003, umThetho wamaYeza ulawula amayeza ukusukela ekuqaleni ukuya ekugqibeleni. Ukwenza oku kakhulu ngokuseka imithetho yeBhunga loLawulo lwamaYeza (Medicines Control Council) (MCC) ukuba isebenze.

Yaye yaba khona i-MCC kumThetho wamaYeza. Ukwakhiwa kwayo kakhulu kugqitywa ngako ngeMimiselo Jikelele. Ngexa uMphathiswa wezeMpilo ekhetha amalungu alo, i-MCC ngokwayo inamandla okuqesha abantu abaqinisekisiweyo kwiikomiti zayo zeengcali. I-MCC yenza izigqibo ezibophelelayo, kodwa ke umsebenzi omninzi wenziwa ngamalungu ekomiti. Ancedwa yi-ofisi yolawulo yesebe (i-ofisi yolawulo karhulumente) yenziwe ngamagosa eSebe lezeMpilo (Department of Health) (DoH).

Olu seko lunzima aludalanga nje ukubhideka kuphela malunga neemfanelo, kodwa lukwajongela phantsi umsebenzi we-MCC. I-ofisi yolawulo yesebe, esekelwe kwicandelwana le-DoH isebenza ngokulawula amayeza, kuqukwa neYunithi yoNyanzelo lomThetho (Law Enforcement Unit) (LEU) eyenziwe ngabahloli abakhethwa nguMlawuli Jikelele wezeMpilo. Yi-LEU – hayi i-MCC – enamagunya kunye nemfanelo engundoqo yokunyanzela umThetho wamaYeza.

Koko, i-MCC isenendima yokuqinisekisa ukuba umthetho uyanyanzelwa. Umzekelo, icandelo le- 2(2) lomThetho wamaYeza lixhobisa i-MCC ukuba “icebise umphathiswa okanye linike

umphathiswa ingxelo ngawo nawuphi na umcimbi odluliselwe kwibhunga ngumphathiswa ukuba uthathelwe ingqalelo kwaye uvela ekusetyenzisweni ko [u] Thetho.” Ukongeza, icandelo lama-35 linika uMphathiswa igunya lokwenza imithetho “edibene ne” MCC. Ngamanye amagama, banegunya elihlanganelweyo lokwenza imimiselo.

Ngoko ke iphi ingxaki?

I-MCC ayinalo igunya elingqalileyo lomthetho kwi-ofisi yesebe elawulayo, kuqukwa ne- LEU yayo. Ayinawo amagunya okuqesha nokugxotha abantu abasebenzela i-ofisi yolawulo yesebe. Kwakhona ayinako ukubamba uMbhalisi wamaYeza – intloko ye-ofisi yolawulo kunye nokudibana phakathi kwayo kunye ne-DoH – ukuba bathathele kubo uxanduva. Oku kwenziwa kukuba uMbhalisi – kunye nosekelo okanye oosekelo bakhe – bakhethwa nguMphathiswa “emva kokudibana” ne-MCC. Ngokokwenza, uMbhalisi ngokwembali ngumntu osebenzela i-DoH.

Le ngxaki iyakulungisiwa ukuba kwaye xa uGunyaziwe oLawulo iMveliso zeMpilo woMzantsi Afrika (South African Health Products Regulatory Authority) (SAHPRA) esekiwe. Lo ngumbutho omtsha oyakungena endaweni ye-MCC. Akukacaci ukuba oku kuyakwenzeka nini, ngenxa yezizathu ezibini. Okokuqala, kukho iingxaki zokwenza kunye nezomgaqo-siseko ngolungiso luka-2008, eziseka i-SAHPRA. Okwesibini, imithetho kunye neendlela ezintsha kuyakufuneka zisekwe ukuqinisekisa ukuba i-SAHPRA inokuqhuba igunya layo lomthetho.

Okwangoku

Inxenywe yotshintsho oluya kugunyaziwe omtsha lubandakanya ukulungisa imiceli mngeni ekhoyo ngoku ye-MCC. Ugxeko olufanelekileyo oluvela kwiinkampani zamachiza kunye namatshantliziyo ngokufanayo, kukuba i-MCC ihamba okonwabu ekubhaliseni amayeza amatsha. Oku kuquka amayeza afana nalawo angundoqo afikelekayo eemveliso esele zikhona. I-MCC ikwagxekwa nangokuhamba kancinane kwayo ekugunyaziseni ulingo lwezonyango lwayo. Ngaphandle kolu gunyaziso, amayeza awanakuthengisa okanye asetyenziswa eMzantsi Afrika.

Umfanekiso ophheleleyo wemiceli mngeni ye-MCC wazotywa liQela loMsebenzi wobuTekhnikali kwiMveliso zoNyango (Medical Products Technical Task Team) (MPTTT).

I-MPTTT ngumbutho weengcali owasekwa ekuqaleni konyaka ngowawayesakuba nguMphathiswa wezeMpilo, uBarbara

Hogan. Indima yawo yayikukucebsia yena ngomgaqo-nkqubo wamachiza, kuqukwa nommiselo kunye nentengo yawo (akhutshwa njani amayeza). I-MPTTT yanikezela ngengxelo yayo kuMphathiswa Aaron Motsoaledi emva kokuba engene endaweni kaMphathiswa Hogan ngoMeyi ka-2009. Le ngxelo yenza isiseko soluhlu lwamanyathelo – kuqukwa neprojekithi yokulungisa ukuba semva kobhaliso kwi-MCC.

Ukongeza, ukulungiselela ugunyaziwe omtsha kuquka ukujongwa kwakhona kolungiso lomThetho wamaYeza ngumphathiswa luka-2008. Umthetho owasayinwa ngulowo wayesakuba nguMongameli, uMongameli Motlanthe uyimpucuko enkulu kwinguqulelo eyathiwa thaca nguTshabalala-Msimang. Koko, aluthethi ngokwaneleyo ngezinye izinto ezingundoqo ezikhathazayo ezaphakanyiswa liPhulo eliZabalazela uNyango (Treatment Action Campaign) (TAC) kunye ne-AIDS Law Project (ALP) (iPhulo lomThetho le-AIDS) ngexa lenkqubo yasepalamente.

Kuthetha ntoni oku konke kumatshantliziyo e-AIDS nempilo?

Phantsi kobunkokheli bukaMphathiswa Motsoaledi, imimiselo – ngokunjalo nokuba iqhutywa njani – ifumana ingqwalaselo ekhawulezileyo. Koko, umonakalo omninzi owenziwa ngexesha leminyaka kaMbeki/Tshabalala-Msimang/Mseleku awukalungiswa okwangoku. Uninzi lwabo bangenanyani abaye baxhamla ngeli xesha basaqhuba amashishini bengakhangelwa. I-LEU isahleli ingenabasebenzi boneleyo kwaye inkxaso enikwa yona incinane.

Amatshantliziyo kufuneka ahlale evule amehlo neendlebe ukuqinisekisa ukuba uMphathiswa, isebe lakhe kunye ne-MCC baqhuba izibophelelo zabo zomthetho. Kufuneka kwakhona kubekho indima abayidlalayo ekuqinisekiseni ukuba ishishini liyawuthobela umthetho. Ukukhuthala malunga nommiselo wamayeza – nokuba oku kuthetha ukubandakanyeka kwinkqubo yokwenziwa komthetho okanye kwizikhalazo kuGunyaziwe wemiGangatho yeeNtengiso – oku kufuneka kuhlale ngokuzinzileyo kwi-ajenda.

U-Jonathan Berger ngumphandi oyintloko kwi-AIDS Law Project (iPhulomThetho le-AIDS). UMphathiswa wezeMpilo – uGqirha Aaron Motsoaledi – wonyulela kwi-MCC u-Jonathan ngoJuni ka-2009. Ekuqaleni konyaka, angene ezinyaweni zakhe uMotsoaledi – u-Barbara Hogan – waye wonyulela u-Jonathan kwi-MPTTT. U-Jonathan ubhalela i-Equal Treatment ngokwesikhundla sakhe sokuba ngumsebenzi kwi-AIDS Law Project.



Ifoto ngoncedo lwe-AFP.

Usifaka njani isikhalazo kwi-ASASA

Ukuba ngaba ubona iintengiso ezenza amabango angeyonyani malunga nokunyanga i- HIV okanye ezinye izigulo ungafaka ke isikhalazo somxhasi kuGunyaziwe wemiGangatho yeeNtengiso wamaZantsi e-Afrika (Advertising Standards Authority of Southern Africa) (ASASA).

Kulula ukufaka isikhalazo somxhasi ukuba ngaba intengiso yenza amabango ekungekho bungqina bawo malunga nokunyanga nokuphilisa isifo esidweliswe kwiSihlomo F sekhawudi yezenzo zeentengiso. Olu luhlu luquka i-HIV, umhlaza nesifo seswekile, phakathi kwezinye.

Ngokulula nje bhalela i-ASASA, ukhalazela ukuba intengiso yophula isihlomo F. Izikhalazo zinokuthunyelwa ku: I-imeyile: complaint@asasa.org.za NgePosi: PO Box 41555, Craighall, 2024 NgeFeksi: +27 11 781 1616



Ifoto ngoncedo lwe-National Geographic/Getty Images.

Ukukhangelwa kwesitofu sogonyo

Izitofu zokugonyela i-HIV zifumene ingqwalasela eninzi ezindabeni kamva nje, ngeemveliso ezahlukeneyo eziphantse zibe ngama-30 kumabakala amaninzi awohlukeneyo ovavanyo. Ukuza kuthi ga ngoku, koko, uphando ngesitofu sogonyo se-HIV luye lwahamba kancinane kwaye kaninzi lwangabi nayo impumelelo.

Ngu-Jennifer Reid

Isitofu sogonyo ayilonyango

Izitofu zokugonyela zilawula ukusasazeka kokubanga isifo (pathogen) (into ebanga isifo, umzekelo intsholongwane). Kodwa ke izitofu zokugonyela azisinyangi isifo ezisibangwayo (jonga okubhalwe emazantsi ephepha ngezitofu zokugonyela ezilunyangayo).

Unyango losulelo lwe-HIV lunokuphunyezwa ngeendlela ezimbini: ngokuphelisa isifo kusetyenziswa isitofu sokugonyela kubantu abangosulelwanga yi-HIV oko kuthintela isifo ama-100% exesha, okanye ngokuba kubekho unyango lokunyangayo abantu abane-HIV. Amayeza okunyangayo anokufuna ukususwa kwayo yonke intsholongwane kuwo onke amalungu omzimba, nakwezo nkovu kunzima kakhulu ukufikelela kuzo kunye nezinye "izithwali zidleleli" ngaphakathi nzulu kumxokomezelo wokugonyeka. Okwangoku, unyango lulawula usulelo lwe-HIV kodwa aluyiphelisi. Ngoko ke, akukho namnye ukuza kuthi ga ngoku oke wanyangwa waphila esebenzisa amachiza afumanekayo ee- antiretroviral.

Ukuba kuyenzeka, isitofu sokugonyela i-HIV sinokuthintela abantu abangenayo i-HIV ekubeni bosulelwe yintsholongwane okokuqala. De kube oku kuphunyeyiwe, kuyakubaluleka kwakhona ukuba kubekho isitofu sokugonyela esingenako ukuluthintela ngokupheleleyo usulelo lwe-HIV kodwa ke, ukuba umntu ogonyiweyo uyosuleleka, senze ukuba isifo sibe phakathi kakhulu kunokuba ngenye indlela bekunokuba njalo.

Indlela esisebenza ngayo isitofu sokugonyela

Izitofu zokugonyela zifundisa umxokomezelo wokugonyeka ukuba uzilwe njani na izifo ezosulelayo phambi kokuba udibane nazo.

Xa usosulelwa yintsholongwane, ingena kumjelo wakho wegazi ize iphinde izivelise kwakhona ngokukhawuleza. Umzimba wakho uphendula ngokuthumela izilwa-buhlungu (abahaseli ntsholongwane) kunye neeseli (abahaseli beeseli ezosulelweyo) ezidalwe ngokukhethekileyo ukuba zilwe intsholongwane. Okukhona umxokomezelo wakho wokugonyeka ukhawuleze wayiqonda intsholongwane, kokukhona akhawulezayo amalungu aloo mxokomezelo alawula usulelo anokusebenza.

Xa ufakwe isitofu sokugonyela, umthamo omncinane wentsholongwane okanye ikopi yentsholongwane (eyaziwa njengokuba yiyunithi enganeno) yaziswa kwigazi lakho iyinguqulelo engenamandla, ebulelweyo okanye efanisiweyo. Umzimba wakho uphendula ngokudala izilwa-buhlungu ezifanelekileyo kunye neeseli ezingababulali. Ezi zihlala kumjelo wakho wegazi. Ngenxa yoko, ukuba ngaba ubunokwezwa kwintsholongwane yokwenene, izilwa-buhlungu kunye neeseli ezingababulali ziyakube sele zilapho kakade, zilindele ukuyihlasela.

Izitofu zokugonyela zibe nempumelelo emangalisayo ekulweni ezinye izifo, njengengqakaqa. Emva kokuphuhlisa kwesitofu sokugonyela sengqakaqa, inkqubo yehlabathi ngokubanzi yesitofu sokugonyela yaye yasiphelisa isifo. Azikho ezinye izehlo ezitsha ezaye zaxelwa ukusukela ngasekupheleni koo-1970 kwaye ngoku isitofu sokugonyela ingqakaqa asiyomfuneko.

Izitofu zokugonya zikhuselekile

Abanye abantu banoloyiko lokuba izitofu zokugonya ziza kubagulisa, kodwa kunqabile oku. Oko kungenzeka kuphela kwizitofu zokugonya (ezenziwa ukuba zingasebenzi kakhuhle) iinguqulelo eziphilayo zentsholongwane. Nakuba kunjalo, iimpawu ziphakathi kakhulu. Umzekelo, unokuba nomkhuhlane ongephi okanye ingalo ebuhlungu. Kubalulekile ukuba isitofu sothintelo sokugonya sikhuseleke kakhulu kwaye singabi nazo iziphumo ebezingalindelekanga kuba siza kunikwa abantu abangenaso isifo. Izitofu ezininzi zokugonya aziphili kwaye akukho ngozi kwaphela yokosulelwa yintsholongwane koku. Iimveliso zesitofu sokugonya se-HIV ngeke ziquathe izitofu eziphilayo okanye ezibuleweyo zeentsholongwane. Zihlala ziqulethe kuphela iinxenye ezincinane zentsholongwane ye-HIV ezinokuziphinda zizivelise kwakhona ngokuzimeleyo, okuqinisekisa ukuba ngeke kwenzeke ukufumana usulelo lwe-HIV ngokugonywa ngemveliso yesitofu sokugonyela i-HIV somfuniselo.

Izitofu sokugonya se-HIV esingasebenziyo

Ukwenza isitofu sokugonya se-HIV esisebenzayo kunzima kakhulu. I-HIV izitshintsha ngokukhawuleza kakhulu. Xa umzimba wakho ukhupha izilwa-buhlungu, i-HIV inokuzitshintsha kwaye ke wena kufuneka ukuba ukhuphe izilwa-buhlungu ezitsha. Umxokomezelo wakho wokugonyeka usoloko uzama ukulinganisa. Yiloo nto ke imodeli yesitofu sokugonya esiqhelekileyo ukuza kuthi ga ngoku ingenayo impumelelo. Ngeentlobo ezininzi kangaka ze-HIV, oosonzululwazi kuyakufuneka ukuba bafumane uphawu olukhona kuzo zonke ezi ntlobo ukuze basekele kulo isitofu sokugonya.

Oosonzululwazi abaninzi bakholelwa ekubeni ukuze baphuhlise isitofu sokugonya esisebenzayo, kuninzi ekusafuneka kwaziwe nge-HIV, ukuba isebenza njani kutheni inani elincinane labantu libonakala ligonyekile kuyo.

Kufuneka ixesha elininzi kunye nemali ukuze kuphuhlise isitofu sokugonya, kwaye kunzima ukufumana inkxaso entsha yophononongo lwesitofu sokugonya. Unxibelelwano phakathi kwamaqela awohlukeneyo ophando lusoloko lunomda. Abanye baye bathandabuze ukwabelana ngophando olubalulekileyo phambi kokuba impumelelo yabo iqondwe. Yonke le miceli mngeni yenza ukuba kungacaci kakhuhle ukuba isitofu sokugonyela i-HIV siyakufumaneka kwiminyaka eli-10 ukuya kweli-15 ezayo.

Imbali yezitofu zokugonya ze-HIV

Ngo-1984, abanye abaphandi balindela ukuba bazakube sebenaso isitofu sokugonya ngo-1986. Ngaphezulu kweminyaka engama-20 kamva, zininzi iintlobo zolingo esele sizibonile kwaye zonke ziye azaphumelela.

Uphando oluphuhlise ngabaphandi beYunivesityi yaseKapa lusaphononongwa ngoku kumjikelo wokuqala wolingolwabantu e-Boston eMelika, eKapa kunye naseSoweto.

Okufunyaniswe kuphando lwezitofu zogonyo ezitsha

Izinto ezifunyanisiweyo kuphando ezivela kulingo (ekuthiwa yi-RV 144) lwabantu abangaphezulu kwe-16,000 e-Thailand kuye kwatsala ingqwalaselo eninzi. Iingxelo zokuqala zibange ukuba isitofu sogonyo esiyindibaniselwano sehlisa ingozi yokosulelwa yi-HIV ngama-31.2%. Nangona zingaqinanga kangako, ezi zinto zifunyanisiweyo zibonakala zibubungqina bokuqala obomeleleyo bokuba isitofu sogonyo esisebenzayo se-HIV sinokuba khona. Koko, ucazululo ngononophelo olukhulu belusenziwa ngexesha loshicilelo.

Ulingo oluvavanyiweyo lokhuselo kwiintlobo ezingeneno ze-HIV iintlobo ezinganeno B no-E. KumaZantsi e-Afrika kakhulu sifumana uhlobo olunganeno C. asazi nokuba isitofu sogonyo sinokunika naluphi na ukhuselo kuhlobo olunganeno C.

Sizawukwazi msinyane ngokungaphaya malunga neziphumo ngqo zolilingo. Okwangoku, lonke olu lingo lwezonyango ebantwini longeza kulwazi osele lukhona esilufunayo ukuze ekugqibeleni siyile kwaye siphumeze isitofu sogonyo esikhuselekileyo nesithintelayo.

Isitofu sokugonya sisebenzisa enye indlela yokusebenza entsha, kukho izitofu zokugonya ezibini ezingabagqatswa zisetyenziswa ukulungisa kunye nokwakha umxokomezelo wokugonyeka. Njengabanye abagqatswa, kuphela ziyunithi ezinganeno kuphela zentsholongwane ezisetyenziswayo kwezi mveliso kwaye ke ngoko abantu abathabatha inxaxheba kuphononongo abekho ngozini yokosulelwa yi-HIV. Ulingo loqhutywa ngokuhlanganyelana liPhulo leSitofu sokuGonya soMzantsi Afrika (South African AIDS Vaccine Initiative) (SAAVI) kunye neZiko leSizwe lokwala neZifo ezoSulelayo lase-US (US National Institute of Allergy and Infectious Diseases) (NIAID). Kunyaka ozayo, abaphandi bayawukwazi ukuxela ukuba kulungile na ukuqhuba ngezi ntlobo zolingo. Ukuba ngaba baqhubela kwinyathelo elilandelayo (isigaba sesi-2 solingo ebantwini), kwiminyaka enje embalwa banokuba nako ukwenza isigqibo sokuba ingaba isitofu sogonyo siyasebenza na.

Iziphumo zakwangoko kakhulu ezivela kulingo lwakutsha nje e-Thailand zibonisa ithemba lokuba isitofu sogonyo sinokubakhona, kodwa ke oko akuthethi ukuba sikufutshane. (Jonga kwibhokisi ngeenkukacha zolu lingo.)

Okwangoku, sisazi kakhulu ngento engenakusebenza kwisitofu sogonyo lwe-HIV kunokuba yintoni enokusebenza. Iminyaka emihlanu ukuya kwelishumi ezayo iya kuba yebaluleke kakhulu ekuvaleni isithuba solwazi kwibhayoloji ye-HIV kunye nokwenziwa kwesitofu sogonyo. Ngethemba, iziphumo zolingo lwakamva zilinyathelo eliya kwicala elilungileyo.

Imithombo: Duerr, A. and J. Wasserheit, L. Corey "HIV Vaccines: New Frontiers in Vaccine Development" *Clinical Infectious Diseases* 43 (2006) <http://www.journals.uchicago.edu/doi/pdf/10.1086/505979>; Graham, B. and J. Ledgerwood, G. Nabel "Vaccine Development in the Twenty-First Century: Changing Paradigms for Elusive Viruses" *Nature Publishing Group* 86.3 (2009) <http://www.nature.com/clpt/journal/v86/n3/pdf/clpt2009128a.pdf>; South African AIDS Vaccine Initiative "Questions and Answers: SAAVI 102/HVTN 073 HIV Vaccine Clinical Trial" (2009); Thomas, C. "Roadblocks in HIV Research: five questions" *Nature Medicine* (2009) <http://www.nature.com/nm/journal/v15/n8/pdf/nm0809-855.pdf>.

Ijongwe kwakhona nguGqirha Linda-Gail Bekker, uSekela Mlawuli kwiZiko le-HIV i-Desmond Tutu (Deputy Director at the Desmond Tutu HIV Centre) kunye nomphandi oyintloko wecandelo laseKapa lolingo lwezitofu zokugonya eMzantsi Afrika.

Iingxoxo ezininzi ngezitofu zokugonya zigxile kwizitofu zokugonya zokuthintela. Ezi zizitofu zokugonya ezithintela usulelo kubantu abangenalo usulelo. Ngokunqabileyo kakhulu, izitofu zokugonya zinokuba lunyango – ngamanye amagama, zithomalalisa iimpawu zezifo ezingapheliyo. Uphando oluninzi lusaqhutywa kwezi zitofu zokugonya. Eli nqaku lixoxa ngezitofu zokugonya ezithintelayo kuphela.

Konke malunga noMhlaza woMlomo weSibebeke

Ngu-Émilie Shuh

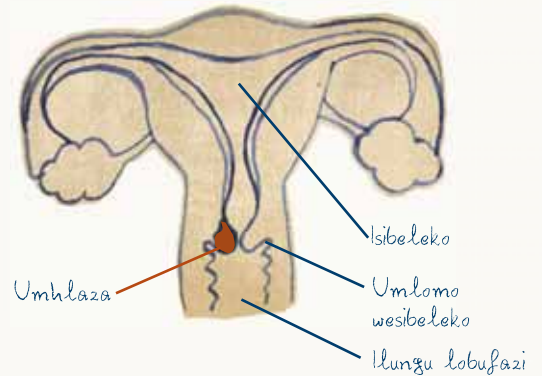
Yintoni umhlaza womlomo wesibebeke?

Umhlaza womlomo wesibebeke lelinye igama lomhlaza wendawo evulekileyo esibebekekeni. Umlomo wesibebeke ngamazantsi esibebeke (isibebeke) adibana nelungu lobufazi. Olu hlobo lomhlaza luvela xa iiseli zomlomo wesibebeke ziye zingaqheleki kwaye ziqale ukukhula ngokungawulekiyo. Kulula ukuwuthintela nokuwunyanga ukuba ufunyaniswe kwangoko.

Umhlaza womlomo wesibebeke ngowona mhlaza uxhaphakileyo ofunyaniswa phakathi kwabasetyhini abahlala kumazwe asaphuhlayo. Oku nkungenxa yokuba iinkqubo zokuhlola ezisebenzayo (njengovavanyo lwe-Pap smear) zokufumana utshintsho kwangoko kumlomo wesibebeke mhlawumbi ziye zibe azikho okanye abasetyhini bangafikeleli kuzo.

Yintoni ebanga umhlaza womlomo wesibebeke?

Usulelo lomlomo wesibebeke ziintlobo 'eziyingozi kakhulu' ze-human papillomavirus (HPV) lwenziwa kukubakhona kotshintsho lweethishu zomlomo wesibebeke kamva ezinokuba ngumhlaza womlomo wesibebeke. Abanye abantu abosulelwe yi-HPV luye luphele usulelo kubo ngaphandle kokuba umntu ehlelwe zizo naziphi na iimpawu. Kwabanye akwenzeki oko; oku kuyinyani ingakumbi kubantu abaphila ne-HIV kunye nabo banemixokomezelo yokugonyeka ebuthathaka. Okubaluleke kakhulu, abasetyhini abosulelwe yi-HIV kunokwenzeka ukuba babe ne-HPV. Bajongane nengozi enkulu yosulelo lwe-HPV ekungelula ukulunyanga kwaye olunokubuya kwakhona. Kwaye



banokuvela utshintsho kwimilomo yabo yezibebeke olunokuba ngumhlaza ukuba alunyangwanga.

Yintoni i- HPV?

I-HPV yintsholongwane engena ngokwabelana ngesondo kwilungu lobufazi, ngomlomo kunye nakumva kunye nokuhlangana ngezikhumba zamalungu angasese. Oku kuthetha ukuba namadoda asengozini yosulelo lwe-HPV. Olu sulelo lungabanga iintsumpa zamalungu angasese okanye lube yimihlaza yelungu lobudoda, umva okanye emalungu angasese. Amadoda nawo adlulisela i-HPV kumaqabane awo. Nabani na owabelana ngesondo usengozini. Zimalunga ne-100 iintlobo ze-HPV. Uhlobo lwesi-6 nolwe-11 lwe-HPV lunokubanga iintsumpa kumalungu angasese, kunye nezinye iintlobo 'eziyingozi kakhulu, kuqukwa neentlobo ze-16 nolwe-18, ezingabanga umhlaza. Isitofu sokugonya kwezi ntlobo zimbini ze-HPV ezibanga umhlaza zikhona ngoku.

Indlela ekukuphela kwayo yokufumanisa i-HPV kukuvavanya, umzekelo nge-Pap smear okanye uvavanyo lwe-HPV. Njengoko sele kukhankanyiwe ngasentla, abantu banokosuleleka kwaye bona bangakwazi oko, ngoko ke ukuvavanya kubalulekile. Okwangoku, abasetyhini baseMzantsi Afrika banokwenziwa ii-Pap smears zasimahla ezintathu kwinkqubo yempilo karhulumente ngexesha lokuphila kwabo, oko kuqala kwiminyaka engama-30. Olu

Kungenzeka ukuba unomhlaza womlomo wesibebeke ukuba ngaba:

- Uyopha emva kokwabelana ngesondo
- Iintlungu kumazantsi esisu
- Ukwehla kobunzima okungachazekiyo
- Ukuphuma kolwelo olungaqhelekanga kwilungu lakho lobufazi

Khumbula: Umhlaza womlomo wesibekeko unokuthintelwa okanye unyangeke ukuba ngaba ubonwe kawangoko. Ungalibazisi, yenza i-Pap smear yakho namhlanje!

vavanyo lukhangela iiseli ezingaqhelekanga kumlomo wesibekeko ezinokuba yingozi. Umhlaza womlomo wesibekeko uvela kancinane, ngoko ke ukuvavanya rhoqo akuyomfuneko. Kodwa ke kwabasetyhini abaphila ne-HIV, umhlaza womlomo wesibekeko uhlasele kakhulu, ngoko ke ukuba une-HIV nokuba ungaphantsi kweminyaka engama-30 yobudala kufuneka wenze i-Pap smear.

Yintoni omawuyenze ukuba wehlelwa ziimpawu:

Ukuba ngaba uyakhathazeka ngenxa yomhlaza womlomo wesibekeko yiya kugqirha okanye kumongikazi wakho ngoko nangoko. Kufuneka bakwenze uvavanyo lwe-Pap smear, oluninxenye yokukhangelwa kwempilo yabasetyhini. Ugqirha okanye umongikazi bayakukuxilonga umlomo wesibekeko bekhangela iimpawu zomhlaza. Akufanelanga ukuba kube buhlungu kwaye kuthatha imizuzu embalwa kuphela. Uyakufumana iziphumo emva kweeveki ezimbalwa. Ngokuxhomekeke kwiziphumo, kunokufuneka ukuba ubuye uzokukhangelwa kwakhona emva kweeveki ezimbalwa, okanye unokufuna unyangwe. Umhlaza womlomo wesibekeko unokunyangwa ngoqhaqho lokususa umhlaza okanye ngeyeza okanye ngonyango lokutshiswa ngemitha. Abanye basetyhini unokunyangwa umhlaza wabo.

Kubalulekile ukufikela kwiinkonzo zempilo phambi kokuba kuvele iimpawu okanye zibe mandundu. Kwabasetyhini abamalunga nama-80,000 e-Afrika ababa nomhlaza womlomo wesibekeko nyaka ngamnye, uninzi lwabo lufuna ukhathalelo lwezonyango sekusemva kwexesha kwaye isifo sibe sele siqhubele phambili, singasenako ukunyangeka ngexesha abafika ngalo ezikliniki. Khumbula: unelungelo lempilo!

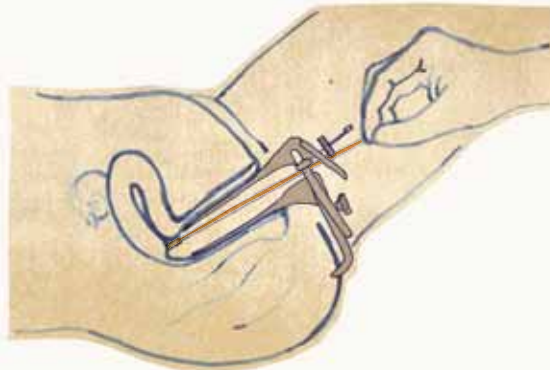
Imithombo: Batra, P. and E. Shuh "Treatment Action Campaign Policy Position Paper on HPV and Cervical Cancer Prevention in South Africa" *Unpublished* (2009); Denny, L. "Burden and natural history of cervical cancer in Africa" *Conference abstract*; Denny, L. "HPV and cervical disease in HIV infected women" *Conference abstract*; Padian, N. and A. Van de Straten, G. Rmjee, et al. "Diaphragm and lubricant gel for prevention of HIV acquisition in southern African women: a randomized controlled trial" *The Lancet* 370 (2007); Winer, R.L. and J.P. Hughes, F. Qinghua, et al. "Condom use and the risk of genital human papillomavirus infection in young women" *The New England Journal of Medicine* 354 (2006).

Uzikhusele njani:


- Yenza i-Pap smear. Olu vavanyo lulula luyakufumana amabakala okuqala omhlaza wesibekeko ukuze unyangwe.
- Sebenzisa ikhondom rhoqo, kwaye uyisebenzise ngokuchanekileyo ukuze ingaphuncuki okanye ikrazuke. Ukusebenzisa ikhondom rhoqo kwehlisa ingozi yosulelo lwe-HPV. Ii-Diaphragms nezithambisi aziyondlela ifanelekileyo yokuthintela usulelo.
- Sebenzisa i-dental dam kwisondo lasemlonyeni.
- Yiba nomda kwinani lamaqabane owabelana nawo ngesondo.
- Lunqande kwaye uluxele uphatho-gadalala ngokwesondo lwalo naluphi na uhlobo.
- Sazi isimo sakho se-HIV. Abasetyhini abane-HIV ngabona basengozini enkulu yomhlaza womlomo wesibekeko.
- Yeka ukutshaya. Ukutshaya kwenyusa amathuba akho okuba nomhlaza.
- Buza ngesitofu sokugonya se-HPV. Le naliti intsha inokukhusele abasetyhini abasebancinane kunye namantombazana kwintsholongwane ye-HPV ebanga umhlaza womlomo wesibekeko. Isitofu sokugonya sisebenza ngcono ukuba sinikwe phambi kokuqala ukwabelana ngesondo. Okwangoku sifumaneka kuphela kwicandelo labucala.

Inqakwana lijongwe kwakhona nguNjingalwazi Lynette Denny, weYunivesiti yaseKapa noyiNgcali eyiNtloko kwiSibhedlele sase-Groote Schuur.

Yintoni i-pap smear?



Umongikazi okanye ugqirha bayakuthatha isampuli yethishu kumlomo wakho wesibekeko aze ayithumele iyokuvavanywa. Kufuneka uzifumane iziphumo kwiiveki ezimbalwa. Ayibuhlungwanga, ithatha imizuzu embalwa kuphela kwaye ingabusindisa ubomi bakho!



Isitofu sokugonya esinqanda umhlaza womlomo wesibekeko

Ngu-Émilie Shuh

Isitofu sokugonya se-HPV sinako ukuthintela ukuya kuma-70% zezehlo zomhlaza womlomo wesibekeko kwi-Afrika ekwi-sub-Sahara, apho ibulala abasetyhini abaninzi kunalo naluphi na olunye uhlobo lomhlaza. Ukuba ngaba isitofu sokugonya singasindisa ubomi obuninzi kangaka, kutheni singafumaneki kwinkqubo yempilo karhulumente?

Umdlaza womlomo wesibekeko unokuthintelwa kwaye kaninzi sisifo esinyangekayo. Unokuthintelwa ngesitofu sokugonya kunye neenkqubo zokuhlola kwaye iyanyangeka xa ifunyaniswe kwangoko kwaye ilawulwe ngokufanelekileyo. EMzantsi Afrika malunga nama-7,000 abasetyhini baye baye babe nomhlaza womlomo wesibekeko nyaka ngamnye. Amawaka ayasweleka ngenxa yokuba lomhlaza awufunyaniswa kwangoko ngokwaneleyo kwaye/ okanye awunyangwa ngokufanelekileyo. Oku kuyinyaniso ingakumbi kwabo basetyhini bahluphekayo kunye nabo bahlala kwimimandla yasemaphandleni, kube kunokuba nzima ukufikelela kwiinkonzo zempilo ngenxa yeengxaki zezithuthi, iindleko kunye nokunqongophala kolwazi malunga nesifo. Eyona nto imbi kakhulu, lo mdlaza uhlasela abasetyhini abaphakathi kweminyaka engama-35 nama-55

(kwangoko kwabesityhini abaphila ne-HIV), xa befuneka kakhulu kuzinzo lwezintlobo noloqoqosho lweentsapho zabo.

Kufuneka sifake uxinzelelo kwi-GlaxoSmithKline (GSK) nakwi-Merck Sharp & Dohme (MSD) ukuba behlise amaxabiso ezitofu zabo zokugonya zomhlaza womlomo wesibekele.

Amayeza okugonya amatsha amabini (Gardasil® and Cervarix®) okuthintela umhlaza womlomo wesibekele ayafumaneka kwabesityhini boMzantsi Afrika. Okwangoku, anikwa kuphela kwicandelo labucala. Iinkampani zoXubo-maYeza zinokubiza ixabiso eliphezulu kakhulu kwizitofu zokugonya ezitsha ezifana nezi ngenxa yemithetho yokukhuselwa kwamalungelo akhethekileyo. Le mithetho yenzelwe ukuqinisekisa ukuba iinkampani zinokuyibuyisa imali ezenze ngayo utyalo-mali ekuyileni nasekwenzeni ichiza. Kodwa ke kukho ukugxekwa ekubeni ezinye iinkampani zenza imali enzini kakhulu kunaleyo bebenze ngayo utyalo-mali.

Ngaphaya koko, amazwe afana noMzantsi Afrika athathwa njengatyebhe kakhulu ukuba afaneleke kwinkxaso yesitofu sokugonya oko kube kusenziwa ngamaqela afana ne- GAVI (the Global Alliance for Vaccines and Immunisation) (uManyano lwamaZwe kwizitofu zokuGonyan noGonyo). Oku kuthetha ukuba urhulumente woMzantsi Afrika kuyakufuneka ukuba

ahlawule ixabiso eliphezulu ukuba ngaba ufuna isitofu sokugonya sifumaneke kwicandelo likarhulumente. Ikwa ngulo mzabalazo mnye ekufikeleleni esiwubone ngaphambili ngee-antiretrovirals (ARVs) kwaye ngoku esiwubonayo ngee- ARVs zesibini kunye nesitofu sokugonya se-HPV.

Inaliti isebenza ngokuthintela iintlobo ze-HPV eziqulathwe kwisitofu sokugonya. Inokunika ukhuselo kwakhona kwezinye iintlobo zentsholongwane ezingaqulathwanga sisitofu sokugonya. Ugunyonyo lusebenza ngcono ukuba ngaba lunikwe abesityhini phambi kokuba baqale ukwabelana ngesondo. Yiloo nto kusenziwa isincomo ngalo kumantombazana aneminyaka eli-12 yobudala. Isitofu sokugonya sinikwa siziinaliti ezintathu ezahlukeneyo engalweni, kwiinyanga ezintandathu. Kuqikelelwa ukuba isitofu sokugonya se-HPV sinokuthintela malunga nama-70% ezehlelo zomhlaza womlomo wesibekele kwi-Afrika ekwi-sub-Sahara. Kodwa, kukho imiqobo emininzi ekwaziseni isitofu sokugonya se-HPV kwinkqubo yokhathalelo lwempilo kurhulumente waseMzantsi Afrika.

Imithombo: Anorlu, R.I. "Cervical cancer: the sub-Saharan African perspective" *Reproductive Health Matters* 16.32 (2008); Cancer Research UK "Cervical Cancer Vaccine" (2008) <http://www.cancerhelp.org.uk>; Harries, J. et al. "Preparing for HPV vaccination in South Africa: Key challenges and opinions" *Vaccines* 27 (2009); Munoz, N. and F. Bosch, X. Castellsague, et al. "Against which human papillomavirus types shall we vaccinate and screen? The international perspective" *International Journal of Cancer* 111 (2004); World Health Organization "Human Papillomavirus and Cervical Cancer: Summary Report, South Africa" (2007).

Imiqobo ekukhupheni isitofu sokugonya se-HPV

- **Ukunqongophala kolwazi malunga ne-HPV nomhlaza womlomo wesibekele.**
- **Ukunqongophala kolwazi olumalunga nendlela esisebenza ngayo isitofu sokugonya kubantu abane-HIV.** Uphando luyenziwa, kodwa idata ayikafumaneki. Ezi ziphumo ziyakubaluleka ukuba ngaba isitofu sokugonya sinikwa uluntu kwicandelo lokhathalelo lwempilo likarhulumente, xa kujongwa ubukho jikelele obuphezulu be-HIV elizweni.
- **Ukunqongophala kwerejista yomhlaza yesizwe esekelwe kubemi eMzantsi Afrika.** Oku kuyimfuneko ukuze kulandelelwe amanani ezehlelo zomhlaza elizweni ukuze kuncede ukuhlola ukuba ingaba isitofu sokugonya kunye nezinye izinto zonyango ziyasebenza na.
- **Iindleko zesitofu sokugonya.** Sibiza malunga nama-R2,100 ukuya kuma-R2,310 ngazo zontathu ezi dosi zifunekayo. Uthethathethwano kunye neenkampani zoxubo-mayeza luyaqhuba ukuze kufunyanwe ukwehliswa kwamaxabiso eMzantsi Afrika. Enye inkampani, i-GlaxoSmithKline (GSK) ivumile ukulehlisa ixabiso ukuba libe ngama- R450 ngenaliti. Ngexa oku kwehliswa kwexabiso kusamkelwa, isitofu sokugonya sisahleli sibiza kakhulu kubemi abaninzi baseMzantsi Afrika kunye nakurhulumente woMzantsi Afrika. Kuyakubakhona iindleko kwakhona ezibandakanyekayo ekumiseleni inkqubo yogonyo,

ukuambisa isitofu sokugonya kunye nokuhlola amantombazana agonyiweyo ngazo naziphi na iziphumo ezihlala ixesha elide okanye imiba yokhuseleko, kuba esi sitofu sokugonya esitsha.

- **Ukunqongophala kwentsebenziswano phakathi kwamaqela ancempembelelo kwizigqibo zempilo.** Ukunikwa kwesi sitofu sitsha sokugonya kuyakuhlenganisa amaqela bantu ebengasebenzi kunye ngaphambili. Ngokuqhelekileyo izitofu zokugonya zinikwa iimveku kunye nabantwana, kodwa ke esi sona isitofu sokugonya sijoliswe kwabo bafikisayo kunye nabesityhini abasebatsha.
- **Ukuba nokwenzeka kokuhanjiswa kweenkqubo zesitofu sokugonya.** Ngumsebenzi onzima owokuqinisekisa ukuba iidosi ezintathu zinikwa owasetyhini woMzantsi Afrika ofanelekileyo kuba oku kufuna ulandelelaniso, oko kunganzima kakhulu kwimimandla enezibonelelo ezilambathayo apho kungelulanga kubasebenzi bempilo ukuba bahlale izigulane zabo. Ukuzisa isitofu sokugonya kungabeka uxinzelelo olungaphaya kwinkqubo karhulumente esele yoyisakele kakade.
- **Imfuno eqhubayo yokuhlololwa umhlaza womlomo wesibekele (umz. I-Pap smear).** Isitofu sokugonya siyakunciphisa kodwa asiyi kuphela ingozi yomhlaza womlomo wesibekele. Oku kungenxa yokuba ayisingabo bonke abesityhini abaya kugonywa, kwaye izitofu zokugonya zijoliswe kuphela kwezona ntlobo zixhaphakileyo ze- HPV. Kuthatha iminyaka eli-10 ukuya kwengama-20 ukuba uvele umhlaza womlomo wesibekele emva kosulelo lwe-HPV (nangaphantsi kwi-HIV), ngoko ke abesityhini bayakufuna ii-Pap smears kwixesha elizayo.

IINDABA zesebe



Usapho lakwaZihlangene ngo-Agasti 2009, phambi kokuba kungenelele i-TAC kunye neminye imibutho.



Umzi omncinane wakwaZihlangene, obuhlala abantu abali-13.



Umphathi we-Makers Plan uNksk. Xavuka noNksk. Zihlangene.

Ingxelo ngosapho engosapho olusweleyo lwaseMcobothini, eLusikisiki

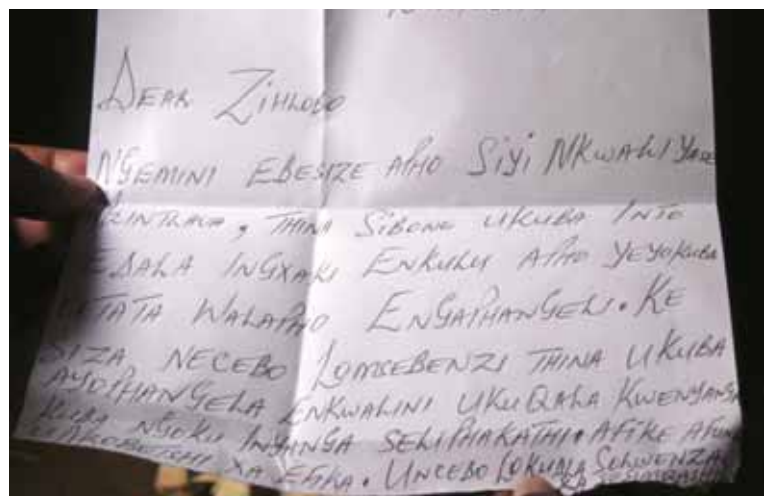
NguTandeka Vinjwa, uNxibelelwano ngoMgaqo-Nkqubo noPhando, kwi-TAC – eLusikisiki

AmaTshantliziyo e-TAC eMpilo oluNtu lwaseLusikisiki afumene usapho lwabantu abali-13 behlala endlini enye ngexa babesenza iphulo lokungena emizini yabantu bethetha ngemiba yezentlalo-qoqosho. Usapho lakwaSihlangene luhlala kwilali yaseMcobothini, iikhilomitha nje ezi-3 ukusuka eLusikisiki. Ukufumana kwayo olu sapho i-TAC, bobabini inkosikazi nomyeni bebengaphangeli kwaye bekhulisa bantwana babo abasibhozo kunye nabazukulwana abathathu.

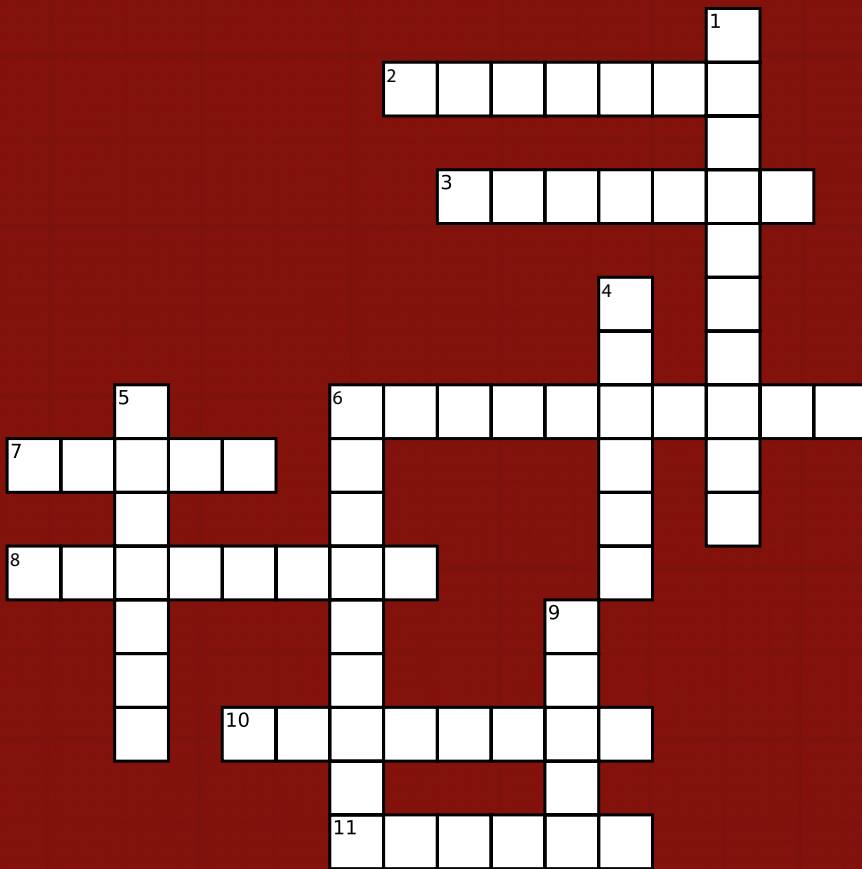
Bebephila ngenkxaso-mali yabantwana ababini. Omnye waba bantwana ukhuzekile kodwa kwthiwa akafanelekanga ukuba afumane uncedo lokukhubazeka kuba umama wakhe akanalo uxwebhu lwesazisi loMzantsi Afrika. Ngabantwana abathathu kuphela ebebefunda.

Ukusabela kwisimo sosapho, i-TAC eLusikisiki yacela uncedo kwimibutho kunye nakubantu abangabodwa. Ibali labo lathiwa thaca kwintlanganiso yebhunga ye-AIDS yengingqi. Imibutho emininzi yaye yathembisa ngokulunceda ngoko nangoko olu sapho, oko okwanceda ukuphelisa ezinye zeemfuno zalo ezisisiseko njengokutya kunye neengubo. ISebe leMicimbi yezangaPhandle nalo laye lanika uxwebhu lwesazisi umama womntwana okhuzekileyo, oko okuya kwenza kube lula ukufikelela kwinkxaso-mali yokukhubazeka. Utata wosapho usanda kuqeshwa kwiKwari yaseMzintlaba.

Eli bali lisikhumbuza ngokuhlupheka okuchaphazela amawaka centsapho kuMzantsi Afrika wonke, kunye nemiba yomthetho kunye neyengqesho abajongene nayo ebathintelayo ukuba bazinze ngokwezoqoqosho. Umsebenzi wokufikelela ebantwini owenziwa yi-TAC kunye neminye imibutho uyafuneka ukuze uncedo ezi ntsapho zifumane uncedo kunye nenkxaso eziyifunayo.



Zonke iifoto zithathwe nguTandeka Vinjwa.



We will give a R200 Pick n Pay gift voucher to the first crossword drawn from a hat with all the correct answers. The answers can be found in this issue of *Equal Treatment*.

Winners from previous issues:

ET 27 – *Social Grants* winner is Miss Linoiwe Nolovu

ET 28 – *Side Effects and Adherence* winner is Miss N.J. Mnyali

ET 29 – *Resources for Health*: no winning entries

ET 30 – *Women and Men* winner is David Poole

Congratulations to all our winners!

Fax or post your completed crossword, with your name, address and contact number.
Address: Equal Treatment, PO Box 2069, Cape Town 8001
Fax: 021 422 1720

Crossword Puzzle

Across

- 2 A sugar pill with no active ingredients
- 3 If participants in a trial do not know whether they are getting the real pill or the placebo, we say that the study has been _____.
- 6 _____ reviews or ‘meta-analysis’ of trials are studies that combine the results of several studies.
- 7 Someone who promotes medicines that have not been tested properly.
- 8 Early results from an HIV vaccine trial in _____ recently made headlines across the world.
- 10 The most common cancer diagnosed among women living in developing countries.
- 11 In phase I trials researchers aim to establish the _____ of a medicine.

Down

- 1 The World Health Organisation recently warned that _____ cannot cure HIV, TB, malaria or flu.
- 4 Vaccines teach your _____ system how to fight an infectious disease before you come into contact with it.
- 5 The medicine artemisinin is used to treat _____.
- 6 ASASA stands for the Advertising _____ Authority of Southern Africa.
- 9 The substance digoxin is commonly used to treat _____ disease.

Equal Treatment's



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