

ASHM 2008: The Swiss Statement

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Following on from the debate on the Swiss Statement held during the XVII International AIDS Conference in Mexico, Professor Pietro Vernazza, President of the Swiss Federal Commission on AIDS was invited by [ASHM](#) [1] Australasian Society for HIV Medicine. The peak Australasian organisation representing the medical and health sector in HIV/AIDS and related areas. to Australia to debate the statement as part of a panel.

Aside from Prof. Vernazza, on the panel was, Phillip Keen, Health Promotion Officer with [AFAO](#) [2] Australian Federation of AIDS Organisations. AFAO is the peak non-government organisation representing Australia's community-based response to HIV/AIDS. AFAO's work includes education, policy, advocacy and international projects. , Professor Sue Kippax from the National Centre for HIV Social Research ([NCHSR](#) [3] National Centre in HIV Social Research. Located at the University of NSW in Sydney, NCHSR conducts research which describes and analyses the social understandings, meanings and practices of peoples, institutions and communities in relation to HIV, Hepatitis C and other communicable diseases.) and Dr. David Wilson, from the National Centre for HIV [Epidemiology](#) [4] The branch of medical science that deals with the study of incidence and distribution and control of a disease in a population. and [Clinical](#) [5] Pertaining to or founded on observation and treatment of participants, as distinguished from theoretical or basic science. Research ([NCHECR](#) [6] National Centre in HIV Epidemiology and Clinical Research. Based at the University of NSW in Sydney, NCHECR is one of Australia's leading medical research centres and is recognised internationally as a leader in the field of research into HIV/AIDS and viral hepatitis.).

Since publication the main debate has focused on the 'zero risk' implication made by the Swiss doctors.¹ This aspect of the debate remained polarised with both Vernazza and Wilson debating the [efficacy](#) [7] (Of a drug or treatment). The maximum ability of a drug or treatment to produce a result regardless of dosage. A drug passes efficacy trials if it is effective at the dose tested and against the illness for which it is prescribed. In the standard procedure, Phase II clinical trials gauge efficacy, and Phase III trials confirm it. of the models applied to the question. Vernazza stated the Swiss Statement was an 'expert assessment of current biological, epidemiological and ecological evidence',² and that the statement had not been intended for an international audience – instead it had been intended for Swiss doctors – the message to be delivered by these doctors to their patients.

David Wilson's presentation relayed the finding of his recent paper published in *The Lancet*³. He and his co-authors estimated the accumulated risk of HIV transmission based on the data used by the Swiss. They challenged the Swiss claim of 'zero risk', stating that although heterosexual risk may be low it is not zero risk, and that the risk of HIV transmission between men is 'high over repeated sexual exposure'.³

Sue Kippax provided an interesting overview of the debate, commenting that other preventive measures such as circumcision and PREP had attracted far less criticism by the international community than the Swiss Statement. She supported the Swiss researchers as responsible in making this statement, while also acknowledging that there were a number of caveats required to support the statement. Further to this Kippax noted that many people living with HIV are actively adopting a number of strategies in order to protect their partners.

Philip Keen provided a measured argument and discussed the difficulties of delivering complex health promotion messages. He queried whether the message was useful in an Australian setting.

References

1. Vernazza, P. 2008. Background and Rationale – Normalizing Sex in Stable Serodiscordant Relationships. 20th Annual ASHM Conference. Perth, Australia 17 – 20 Sept 2008. ASHM: Sydney.
2. Australasian Society for HIV Medicine. 2008. Joint Australasian statement developed in response to the Swiss report, Australasian Statement on HIV [Antiretroviral](#) [8] A medication or other substance which is active against retroviruses such as HIV. Therapy and Infectiousness Available at: <http://www.ashm.org.au/news/334/11/> [9] Accessed 9, Oct, 2008.

Wilson, D, Law, M, Grulich, A, Cooper, D, Kaldor, J, 2008. Relation between HIV [viral load](#) [10]A measurement of the quantity of HIV RNA in the blood. Viral load blood test results are expressed as the number of copies (of HIV) per milliliter of blood plasma. and infectiousness: a model-based analysis. The Lancet, 372 pp 314-320.

- [disclosure](#)
- [HIV prevention](#)
- [Safe sex](#)
- [viral load](#)

Links:

- [1] <http://www.napwa.org.au/glossary/term/382>
- [2] <http://www.napwa.org.au/glossary/term/385>
- [3] <http://www.napwa.org.au/glossary/term/407>
- [4] <http://www.napwa.org.au/glossary/term/490>
- [5] <http://www.napwa.org.au/glossary/term/475>
- [6] <http://www.napwa.org.au/glossary/term/408>
- [7] <http://www.napwa.org.au/glossary/term/486>
- [8] <http://www.napwa.org.au/glossary/term/122>
- [9] <http://www.ashm.org.au/news/334/11/>
- [10] <http://www.napwa.org.au/glossary/term/416>