

New campaign launches today to alert South American countries of deadly cause of AIDS deaths.

GENEVA, SWITZERLAND, February 16, 2016 /EINPresswire.com/ -- A campaign to convince Latin American countries to do more to tackle a problem which is the leading cause of death in AIDS and yet is poorly understood, often misdiagnosed and frequently left untreated has been launched today.

Experts from GAFFI (Global Action Fund for Fungal Infections) believe more than 80,000 AIDS deaths worldwide can be attributed to histoplasmosis, an airborne infection which is related primarily to bat and bird dropping exposure in soil. They want the deadly fungal disease adopted as a priority by key public health agencies and have today sent out an open letter to every pan American health organisation.

It stresses that if the UNAIDS target of reducing AIDS deaths to under 500,000 is to be achieved, action needs to be taken now on tackling histoplasmosis.

GAFFI's President is Dr David Denning who is Professor of Infectious Diseases in Global Health at The University of Manchester. He wants greater awareness of the deadly disease and more reliable and practical tests made available in those countries most affected.

He explains; "For example, in Manaus, Brazil, the age range of cases is 12-42 years, with an overall mortality of 48 per cent while in Panama, the median age of cases is 33 years, and 59 per cent of these patient die.





"However, histoplasmosis doesn't only affect AIDS patients. It can attack people without underlying

health conditions and any immunocompromised patients. So, even when AIDS is conquered, histoplasmosis will continue to pose problems, so improved diagnosis and therapy is required as part of capacity strengthening in very many countries."

For more media information please contact Susan Osborne, Director of Communications at The Goodwork Organisation on mobile 07836 229208

NOTES TO EDITORS

Histoplasmosis is an airborne infection related primarily to bat and bird guano exposure in soil. There are particular 'hot spots' mostly identified in the Americas, but it is a worldwide pathogen, with cases described in most African countries, SE Asia, India and China. It is grossly under diagnosed because of the



low sensitivity (average 50%) of stained smears and the slow growth of organism in special medium culture (which is not available in many locations). In AIDS, the culture usually becomes positive after the patient has died (10-21 days). The unavailability of even culture and microscopy in many countries, contributes to difficulties in case identification and prompt treatment initiation. A briefing



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document is here: http://www.gaffi.org/wp-content/uploads/Disseminated-histoplasmosis-Fact-Sheet.pdf Results from rapid diagnosis with antigen testing and PCR (Polymerase Chain Reaction) -a relatively simple and inexpensive tool that can be used to focus in on a segment of DNA and copy it billions of times over -can be provided in under 24 hours. GAFFI profiled this in its '95-95 by 2025' Roadmap issued in May 2015. An antigen testing kit is commercially available and a point of care histoplasma antigen test is being trialled, which will take about an hour for diagnosis. PCR is not commercially available, but could be with the right purchase incentives, and is done routinely in Spain, Colombia, Argentina, Guatemala, and French Guiana.

Susan Osborne Goodwork, Director of Communications +44 (0)208 747 1488 email us here

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