

END

INEQUALITIES.

END AIDS.

IT CAME SILENTLY.

The background of the entire page is a microscopic image. It features a light blue, textured surface with several distinct red, spherical structures. One large, prominent red sphere is located in the lower-left quadrant, while several smaller, similar red spheres are scattered across the lower half of the image. The overall appearance is that of a biological specimen, possibly a microorganism or a cell, viewed under a microscope.

MOVING FROM ONE PERSON TO THE NEXT WITHOUT A HINT OR A WHISPERED WARNING.

And when it infected its host, it took its time setting up a base and then an invading army.

It wasn't until the early 1980s that it began to raise the scientific community's eyebrows.

Five cases of a rare lung infection called *Pneumocystis carinii pneumonia (PCP)* were identified in young, completely healthy men in 1981. And more cases of young men falling victim to a fatal form of cancer also began popping up.

On June 5, 1981, the U.S. Centers for Disease Control and Prevention (CDC) Morbidity and Mortality Weekly Report (MMWR) first published a report of those five cases. But it took another five years to officially name the human immunodeficiency virus or **HIV** – the virus that causes the acquired immunodeficiency syndrome or **AIDS**.

By the end of 1985, every region of the world had reported at least one case of AIDS. In the same year, known cases numbered at 20,303. And by 1989, the World Health Organization (WHO) estimated that there were around 400,000 cases worldwide in over 140 countries.

Patients and doctors alike began to fear the disease.

And that fear grew globally.

Miscommunication and misunderstanding around how it spread with no treatment in sight led to a spread of misinformation.

Many patients were shunned as the stigma around it flourished.



The 1980's also ushered in the first treatment for HIV that was approved by the U.S. Food and Drug Administration in 1987: zidovudine (AZT).

That era also brought the invention of the polymerase chain reaction (PCR) technique, which is now used to test not only for HIV but for other viruses such as SARS-CoV-2 or COVID-19.

And in 1988, the WHO declared the first of December as

World AIDS Day – a day dedicated to raising awareness of the then new AIDS pandemic – now an epidemic.

Four decades after the first MMWR published report,

almost 38 million people globally are living with HIV today.



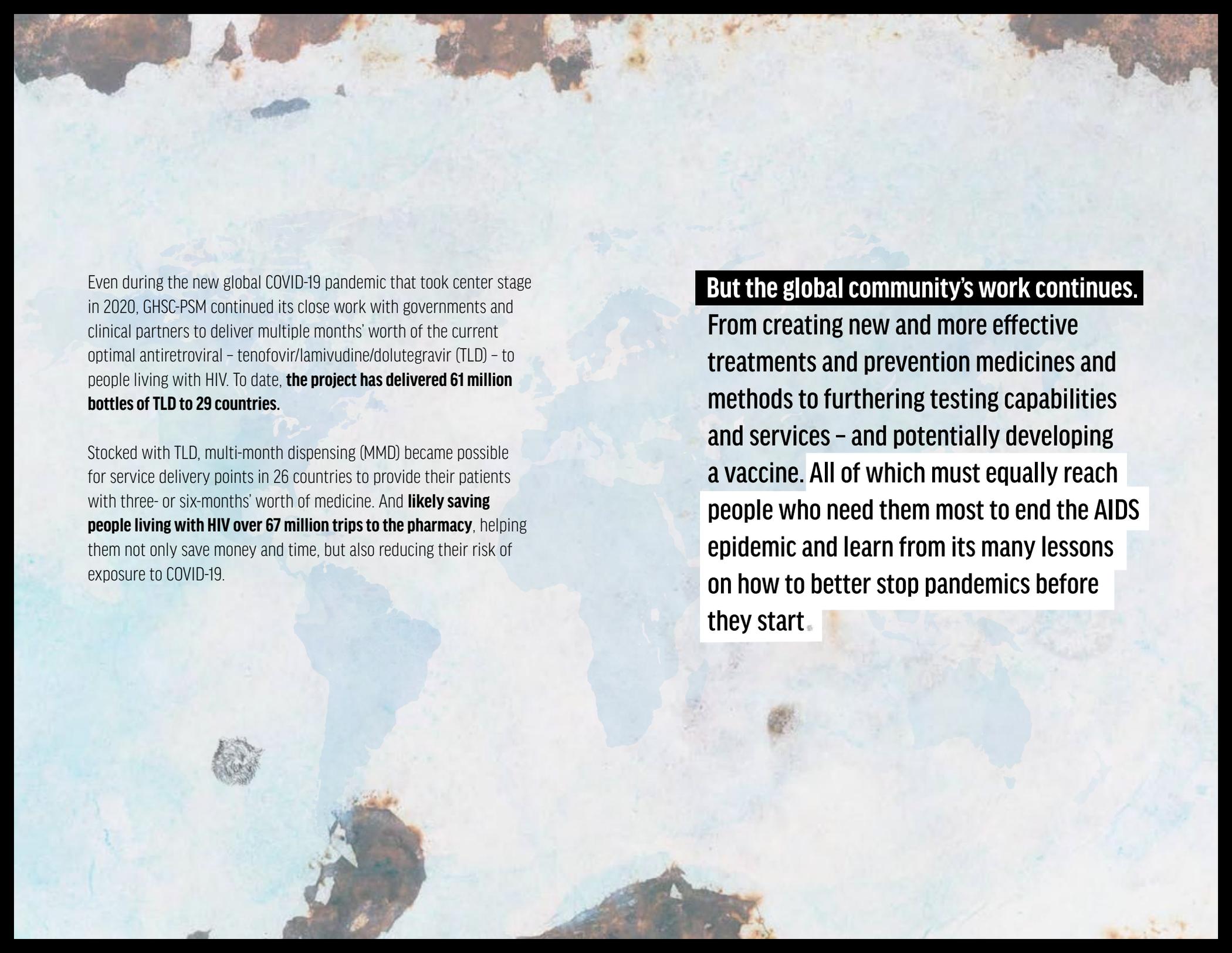
Through scientific advancements that produced lifesaving treatments, people living with HIV can now live long and healthy lives.

And thanks to the **President's Emergency Plan for AIDS Relief (PEPFAR)** and the **U.S. Agency for International Development (USAID)**, lifesaving HIV/AIDS commodities for treatment, testing and prevention have reached – and continue to – millions of people globally who need them through the **Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM)** project.

Since 2016, the project through the HIV/AIDS people-centered supply chain has likely helped

avert an estimated 950,000 infections

and 248,000 deaths.



Even during the new global COVID-19 pandemic that took center stage in 2020, GHSC-PSM continued its close work with governments and clinical partners to deliver multiple months' worth of the current optimal antiretroviral – tenofovir/lamivudine/dolutegravir (TLD) – to people living with HIV. To date, **the project has delivered 61 million bottles of TLD to 29 countries.**

Stocked with TLD, multi-month dispensing (MMD) became possible for service delivery points in 26 countries to provide their patients with three- or six-months' worth of medicine. And **likely saving people living with HIV over 67 million trips to the pharmacy**, helping them not only save money and time, but also reducing their risk of exposure to COVID-19.

But the global community's work continues.

From creating new and more effective treatments and prevention medicines and methods to furthering testing capabilities and services – and potentially developing a vaccine. All of which must equally reach people who need them most to end the AIDS epidemic and learn from its many lessons on how to better stop pandemics before they start.

END AIDS.

**ENSURE EQUITABLE ACCESS
FOR ALL.**

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All GHSC-PSM supply chain data is life of project through September 30, 2021, except for deaths and infections likely averted which are life of project through June 30, 2021.

DISCLAIMER:

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