

HIV/AIDS “The Paradigm Shift”

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EDITORIAL

It has been more than 37 years HIV virus was isolated from *Homo sapiens*. The globe has more than 37.9 million PLHIV with mortality of 0.77 million in the year 2018.

The first decade (1983-1993) was finding new cases (incidences pick up) and measuring mortality among HIV/AIDS. The lesson learned was caring HIV/AIDS is beyond the person, community or nation. The second decade (1993-2003) was decreased in incidence rate due to preventive measures. However high fatality rate was there despite introduction of Anti-Retroviral (ARV) agents. Initially ARV was initiated throughout the globe with low CD4 count and lesser coverage of ARV at high endemic regions, especially sub-Saharan Africa. Despite the drop in incidence, the prevalence was static as the life span of PLHIV prolonged with ARV (Prevalence=Incidence*Duration). The third decade (2003-2013) had declined in high mortality rate and helped us to know what we do not know about treating and caring PLHIV. Newer conventional classes antiretroviral with lesser side effects and newer classes antiretroviral were

developed. High-income countries always had less burden of HIV however same strategy was implemented throughout the globe. Caring PLHIV imbibed drug resistance, early aging, and bizarre clinical spectrum of co-infections like Tuberculosis, Malaria, Chronic Viral Hepatitis, Leishmaniasis, Strongyloidiasis and high burden of non-communicable diseases in this cohort. It really took us thirty years to realize that HIV was the only disease that really covers all the avenues of global health. Fourth decade (2013-till date) with global funding has emerged with concept of clinical cure from functional cure. Vaccines experimented and reasons of failure were explored, measured and being sort out. Clinical remission (Berlin case and elite control) are being discussed and instrumented in laboratory.

By today HIV/AIDS is no more a feared fatal disease as perceived in the nineties. The paradigm shift of HIV in the globe from untreatable deadly social discriminated infections to preventable public health threat to near-normal life expectancy preserved viral disease. Promises for persistence remission has been eagerly awaited by *sapiens* to feel free from the pills burden.

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