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ACADEMIC AND PEER REVIEWED ARTICLES

Clinical and health policy challenges in responding to the COVID-19 pandemic

BMJ Global Health | Published July 2020

Donald Singer

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), the cause of the coronavirus disease 2019 (COVID-19) pandemic, is the worst challenge for a century for international health and financial systems. It was declared a global pandemic on 11 March 2020, 6 weeks after it had first been reported from China as a new respiratory virus. By then, 118 000 cases had been reported from 114 countries and 4291 people reported to have lost their lives. Only 7 weeks later, as of 5 May, **3 544 222** cases of COVID-19, including **250 977** deaths, have been reported from 187 countries and regions, and maritime quarantine. While severity and mortality have been highest in people with underlying morbidities, no age group is immune from COVID-19 nor are the rich and famous.

The COVID-19 pandemic and health inequalities

BMJ Global Health

Ryan Riordan, John Ford, Fiona Matthews

This essay examines the implications of the COVID-19 pandemic for health inequalities. It outlines historical and contemporary evidence of inequalities in pandemics—drawing on international research into the Spanish influenza pandemic of 1918, the H1N1 outbreak of 2009 and the emerging international estimates of socio-economic, ethnic and geographical inequalities in COVID-19 infection and mortality rates. It then examines how these inequalities in COVID-19 are related to existing inequalities in chronic diseases and the social determinants of health, arguing that we are experiencing a *syndemic pandemic*. It then explores the potential consequences for health inequalities of the lockdown measures implemented internationally as a response to the COVID-19 pandemic, focusing on the likely unequal impacts of the economic crisis. The essay concludes by reflecting on the longer-term public health policy responses needed to ensure that the COVID-19 pandemic does not increase health inequalities for future generations.

Case report: Emergence of dolutegravir resistance in a patient on second-line antiretroviral therapy

Southern African Journal of HIV Medicine | Published 2 July 2020

Kairoonisha Mahomed, Carole L. Wallis, Liezl Dunn, Shavani Maharaj, Gary Maartens, Graeme Meintjes

The integrase strand transfer inhibitor dolutegravir (DTG) has a high genetic barrier to resistance. Only rare cases of resistance to DTG have been reported when it is used as a component of antiretroviral therapy regimens in treatment-experienced patients unless there was prior use of a first-generation integrase inhibitor. A 38-year-old woman diagnosed with tuberculosis was switched to a second-line antiretroviral regimen of zidovudine, lamivudine and dolutegravir 50 mg 12-hourly together with rifampicin-based TB treatment. Based on treatment history and a previous resistance test there was resistance to lamivudine but full susceptibility to zidovudine. The patient did not suppress her viral load on this regimen and later admitted to only taking dolutegravir 50 mg in the morning because of insomnia.

Evaluation of a mobile application to support HIV self-testing in Johannesburg, South Africa

Southern African Journal of HIV Medicine | Published 30 June 2020

Natasha Gous, Alex E. Fischer, Naleni Rhagnath, Mothepane Phatsoane, Mohammed Majam, Samanta T. Lalla-Edward

Human immunodeficiency virus self-testing (HIVST) reduces barriers associated with facility-based testing; however, no formal mechanism exists for users to self-report results or link to care. The Aspect™ HIVST mobile application (app) was developed for use in South Africa. This study evaluated the acceptability and feasibility of the Aspect™ HIVST app for individuals from the inner city of Johannesburg.

HIV risk, risk perception, and PrEP interest among adolescent girls and young women in Lilongwe, Malawi: operationalizing the PrEP cascade

Journal of the International AIDS Society | Published 30 June 2020

Lauren M Hill, Bertha Maseko, Maganizo Chagomerana, Mina C Hosseinipour, Linda-Gail Bekker, et al

As a user-controlled HIV prevention method, oral pre-exposure prophylaxis (PrEP) holds particular promise for adolescent girls and young women (AGYW). HIV prevention cascades, critical frameworks for the design and evaluation of PrEP programmes, outline the priorities of identifying individuals at greatest HIV risk and motivating them to initiate PrEP through perceived HIV risk. To inform future iterations of these cascades and PrEP delivery for AGYW, the objective of this study was to understand the level of interest in PrEP among AGYW at highest HIV risk, and the potential role of perceived risk in motivating PrEP interest.

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RECENT PUBLIC HEALTH NEWS

How wearing a mask can slash COVID-19 deaths

Bhekisisa | 3 July 2020

With the advent of an infectious disease outbreak, epidemiologists and public health officials quickly try to forecast deaths and infections using complex computer models. But with a brand new virus like the one that causes COVID-19, these estimates are complicated by a **dearth of credible information** on symptoms, contagion and those who are most at risk. The Goldenson Center for Actuarial Research has developed a free, user-friendly computer model that has a different goal. It demonstrates how infections and deaths progress on a daily basis over a three-month period depending on how people behave in response to the outbreak. This model allows the public to input data that demonstrate how changes in safety measures in their communities, including wearing face covering and social distancing, can significantly impact the spread of this virus and mortality rates.

These health workers are more likely to die from COVID-19. Unions say not enough is being done to stop it

Bhekisisa | 26 June 2020

People who are over the age of 50, obese or living with diabetes or high blood pressure are more likely to die from COVID-19 than those who are younger or without these conditions

Covid-19 research insights excite

Health-e News | 30 June 2020

Scientists are hard at work learning everything there is to know about coronavirus – and their research

could lead to breakthroughs in preventing the spread of Covid-19, reducing mortality rates and improving treatment regimes.

Tackling antimicrobial resistance in the COVID-19 pandemic

Bulletin of the World Health Organization | July 2020

Antimicrobials have enabled medical advancements over several decades. However, the continuous emergence of resistance to antimicrobials restricts our ability to treat diseases and curbs efforts to achieve universal health coverage and the health-related sustainable development goal. Antimicrobial resistance is a neglected global crisis that requires urgent attention and action.

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TRAINING AND RESOURCES

Webinars – Cochrane South Africa Systematic review methods

Tuesday, 14 July, “Knowledge Translation Evaluation” presenter, Bey Marie Schmidt, Cochrane South Africa.

Tuesday, 21 July, “Appraising Diagnostic Test Accuracy Studies” presenter, Eleanor Ochodo, Centre for Evidence-based Health Care, Stellenbosch University.

Please consult the Cochrane website for registration details:

<https://southafrica.cochrane.org/learning-support/systematic-review-methods-webinars/2020>

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PUBLICATIONS AND REPORTS

Human Rights Watch World Report 2020

Human Rights Watch’s 30th annual review of human rights practices around the globe summarizes key human rights issues in more than 100 countries and territories worldwide, drawing on events from late 2018 through November 2019. At stake is a system of governance built on the belief that every person’s dignity deserves respect—that regardless of official interests, limits exist on what states can do to people.

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CONFERENCES AND EVENTS

Due to the disruption COVID-19 has caused the conferencing industry many events have been cancelled or postponed. As a result of this uncertainty we have decided not to list any conferences and events in the Bulletin for the time being.

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JOB OPPORTUNITIES

There are currently no vacancies at the Health Systems Trust.

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