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Subsidised drugs for HIV patients

Health Minister agrees it should be treated like any other chronic disease

By Salma Khalik

PEOPLE with the human immunodeficiency virus (HIV), who have long complained about the cost of medication here, are about to get some relief - the Government has decided to subsidise their medicines.

This change of heart came on Monday, when the Health Minister asked the Communicable Diseases Centre (CDC) to draw up a list of drugs that should be eligible for subsidies.

This is a major change for those living with HIV, who number about 2,000 now.

It gives them access to drugs that can keep them well and alive for many years. More significantly, it means that HIV infection will finally be treated no differently from other chronic illnesses.

Left untreated, HIV causes Aids or the Acquired Immune Deficiency Syndrome, which can lead to death. It was the only major illness in Singapore for which medication was not subsidised.

The head of the CDC, Associate Professor Leo Yee Sin, said her doctors are overjoyed as the change means patients with HIV no longer need to die because they can't afford the drugs to keep them alive.

About a dozen CDC patients die each year as they cannot afford the medicines.

Infectious disease specialists at the CDC are 'burning the midnight oil' to draw up the list of medicines for the ministry's approval, she added.

Health Minister Khaw Boon Wan told The Straits Times he agreed with the view that HIV should be treated 'like any chronic disease'. 'The committee of experts will apply the same approach as they do when evaluating drugs for other diseases. We should not single out HIV for special treatment,' he said.

The move by public hospitals to offer HIV screening to in-patients is in line with this policy, he added.

People with HIV need to take a combination of at least three medicines, which can cost over \$1,000 a month here. Most patients find it hard to foot the bill.

The same medicines in Thailand cost \$100-\$200 for a month's supply.

Dr Leo said generic medication will be heavily used in line with national policy.

But some non-generic drugs would need to be subsidised, as generics can only help about 70 to 75 per cent of patients. Newer medicines are more effective and have fewer side effects, but also cost more.

Government subsidies for medicine take two forms: For most medicines, about 800 different types, patients pay \$1.40 for a week's supply. Another 180 drugs, usually more expensive but still essential, get a 50 per cent subsidy.

It is not known what rate of subsidy HIV/Aids drugs will receive.

Dr Roy Chan, president of the voluntary organisation Action for Aids, expects more people to come forward for HIV screening, with the prospect of cheaper treatment.

Those diagnosed and treated early can live a productive life well into their 60s.

Already, greater awareness of the benefits of early treatment and hospital screening has led to the CDC seeing 10 per cent more newly diagnosed patients this year.

Last year, 423 people were diagnosed with HIV. This year, the number may well reach 500, with 382 already diagnosed in the first 10 months.

In Singapore, the majority of those infected with HIV are heterosexual men.

A man in his 30s, who asked to be called Ben, needs the more expensive medicines, as he is allergic to other drugs.

Most of the \$1,000 to \$1,500 he used to earn each month went on the medicine. His Medisave money has been completely wiped out too.

He welcomed the move to provide patients like him with subsidised medicines.

Like many others here, he has been getting supplies of the HIV drugs he needs from Bangkok, where they cost less.

The recent shutdown of airports in Bangkok left people with HIV here worrying that their medicine supplies would be disrupted.

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