TAC
TREATMENT ACTION CAMPAIGN

ZIYINI IZIQONDISO EZINTSHA ZOKWELAPHA

NgoSuku LweNgculazi Lomhlaba 2009, uMongameli Jacob Zuma wamemezela izinguquko ezibalulekile eziningana eziqondisweni zokwelapha kokwelashwa ngezidambisi gciwane i-antiretroviral therapy (ART). Izinguquko kufanele ziqale ukusetshenziswa ezweni lonke kusuka ngo-**Ephreli 2010.**

Kubalulekile ukwazi ukuthi ziyini izinguquko nokuthi kungani zibalulekile ukuvikela impilo yakho, impilo yomlingani wakho kanye/noma impilo yengane yakho.

1. Abantwana abasandokuzalwa abane-HIV abangaphansi kwezinyanga eziyi-12 ubudala kufanele baqalwe ngama-ART ngokushesha.

Uma ingane yakho ingaphansi konyaka owodwa ubudala futhi ine-HIV kufanele inikwe i-ART ngokushesha. Uma ingane yakho ine-HIV, isheshe iqala ukwelashwa kungandiswa amathuba engane okuphila ngama-75%. Lokhu kuncishiswa kokufa kwabantwana abasandakuzalwa kwakhonjiswa ocwaningweni olwenziwa eNingizimu Afrika olubizwa ngokuthi uhlolo Lokusheshe Kwelashwe Ngezidambisigciwane izingane ezine-HIV (Children with HIV Earlier Antiretroviral Therapy (CHER).

- ***Ukwazi isimo sengane yakho kudingekile ukuze isheshe ithole ukwelashwa. Cela ukuthi ingane yakho inikezwe ukuhlolwa kwe-PCR emasontweni ayisithupha ukuze uthole isimo sayo. Ukuhlolwa kwe-HIV okwejwayelekile kunamaphutha ezinganeni ezisandakuzalwa, ngakho-ke kuzodingeka ukuthi wenze ukuhlolwa i-PCR, okungakabi bikho kuyo yonke imitholampilo, ngakho kufanele ucele.***

2. Abantu abane-TB kanye ne-HIV kufanele banikwe i-ART esibalweni se-CD4 esingu-350

Uma une-HIV futhi une-TB, kufanele manje unikezwe imithi yokukwelapha ngokushesha lapho isibalo sakho se-CD4 siba ngaphansi kuka-350. Ukuthola imithi yokwelapha kulesi sigaba esisekuqaleni kuzosiza umzimba wakho ukuthi uhlale uphilile futhi ulwe nezifo ezingena ngentuba. Ngokuvamile, umsebenzi wokunakekela ezempilo uzoqala izidambisigciwane emasontweni ambalwa emva kokuqala imithi ye-TB, ukuze umzimba wakho ube nesikhathi sokujwayela imithi ye-TB kuqala.

Uhulumeni futhi uhlela ukuhlanganisa izinsizakalo zezempilo ze-HIV ne-TB. Lokhu kuzosho ukuthi uzokwazi ukuthola imithi yakho ye-HIV neye-TB emtholampilo ofanayo.

- ***Yazi isimo sakho se-TB/HIV ukuze usheshe uthole ukwelashwa.***

3. Bonke omama abakhulelwe abane-HIV kufanele banikwe i-ART esibalweni se-CD4 esingama-350

Izinguquko ezimbili ezithinta abesifazane abakhulelwe zizoqala ukusetshenziswa. Okokuqala, uma ukhulelwe futhi unesibalo se-CD4 esingaphansi kuka-350, kufanele unikwe ukwelashwa okuphindwe kathathu nge-ART ngokushesha.

Okwesibili, uma ukhulelwe kanti isibalo se-CD4 yakho singaphezu kuka-350, kufanele unikwe imithi yokwelashwa kwe-PMTCT ukusuka esontweni lesi-14 lokukhulelwa kunokuba unikwe kuphela esigabeni sesithathu (amasonto angama-24). Abesifazane abaningi bayajikiswa emitholampilo yokubelethela ngaphambi kokuba bafike emasontweni angama-28 – kufanele ugcizelele ukuthi ubonwe futhi uhlolelwe i-HIV ngaphambi kwamasonto awu-14 ukuze usheshe uthole ukwelashwa.

- ***Hlolelwa i-HIV ukuze uthole ukusheshe welashwe nokuvikela impilo yakho kanye neyengane yakho.***

I-TAC izoqhubeka nokweseka bonke abantu abaphila ne-HIV ukuthi baqale ukwelashwa ngesibalo se-CD4 esingu-350. Ukusheshe welashwe kuzonciphisa ukufa, izifo ezingena ngentuba kanye nezifo eziphathelene ne-AIDS kanjalo nezifo ezintsha.

Ukwelulekelwa i-HIV Ngokwengqondo kanye neziqondiso zokuHlola

Ngaphani kweziqondiso ezintsha ze-HIV Counselling and Testing (HCT), kufanele ngokwenjwayelo unikwe ukuhlola kwe-HIV uma ungena endaweni yezempilo kahulumeni. Yize ukunikezelwa kokuhlola kwe-HIV kufanele kwenziwe ngokuyinjwayelo, angeke walelwe ukufinyelela ezinsizakalweni zokunakekelwa kwezempilo uma wala ukuhlolwa. Kodwa-ke, ukwala ukuhlolwa kumisa ukufinyelela ekwelashweni ngezidambisi gciwane, ukuvimbela i-TB, futhi kukubeka ezingozini ezingenasidingo zezifo, umdlavuza kanye nokunye ukugula, uma ulinda isikhathi eside.

- ***Ukwazi isimo sakho kubalulekile ekuvikeleni impilo yakho kanye nempilo yabalingani bakho bocansi.***

UMKHANKASO WOKUFINYELELA EMITHINI

I-Tenofovir (TDF)

I-TAC ikhankasela ukuthi i-tenofovir ifakwe emithini yomugqa wokuqala ngoba inemiphumela emibi embalwa futhi idinga ukushintsha kwemithi yokwelapha okumbalwa kune-stavudine (d4T). Lokhu manje sekuyiqiniso!

Ngaphansi kweziqondiso ezintsha, abantu abadala kanye nezingane ezingena ebudaleni abaqala ukwelashwa manje sebezonikwa imithi encike ku-tenofovir. Zonke iziguli ezinemiphumela emibi ku-d4T kanye nemithi encike ku- zidovudine (AZT) kufanele zishintshelwe ku-tenofovir ngokushesha.

Imiphumela emibi kakhulu ehambelana ne-d4T ibandakanya i-lactic acidiosis, i-lipodystrophy kanye ne-peripheral neuropathy. Iziguli ezimbalwa eziku-tenofovir ziba nokulimala kwezinso okufanele kuqashelwe, kodwa kungumphumela omubi ongajwayelekile.

Bika nanoma yimiphi imiphumela emibi onayo kumsebenzi wokunakekela impilo yakho.

Izinhlanganisela zomthamo ongaguquki kanye nemigodla ehambisanayo

Izinhlanganisela zomthamo ongaguquki zihlanganisa yonke imithi emithini ibe yiphilisi elilodwa – okusho ukuthi uzodinga kuphela ukuthi uphuze iphilisi elilodwa ngelanga. Izinhlanganisela zomthamo ongaguquki zizokwenza lula imithi ezigulini nakubasebenzi bokunakekela ezempilo. Kuthenda ka-2010, uhulumeni kufanele athenge izinhlanganisela zomthamo ongaguquki uma kunokwenzeka. Uma izinhlanganisela zomthamo ongaguquki zingekho, uhulumeni kufanele athenge imithi efakwe kanye kanye emgodleni waba ibhilista eyodwa

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