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Nota di contenuto	Opportunities and challenges -- Lessons learned -- Principles of scale-up -- Managing scale-up of antiretroviral therapy -- The path forward.
Sommario/riassunto	An estimated forty million people carry the human immunodeficiency virus (HIV), and five million more become newly infected annually. In recent years, many HIV-infected patients in wealthy nations have enjoyed significantly longer, good-quality lives as a result of antiretroviral therapy (ART). However, most infected individuals live in the poorest regions of the world, where ART is virtually nonexistent.

The consequent death toll in these regions-especially sub-Saharan Africa-is begetting economic and social collapse. To inform the multiple efforts underway to deploy antiretroviral drugs in resource-poor settings, the Institute of Medicine committee was asked to conduct an independent review and assessment of rapid scale-up ART programs. It was also asked to identify the components of effective implementation programs. At the heart of the committee's report lie five imperatives: Immediately introduce and scale up ART programs in resource-poor settings. Devise strategies to ensure high levels of patient adherence to complicated treatment regimens. Rapidly address human-resource shortages to avoid the failure of program implementation. Continuously monitor and evaluate the programs to form the most effective guidelines and treatment regimens for each population. Prepare to sustain ART for decades.
