Circumcision Program in South African Town Reduces HIV Rates

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An effort to widely circumcise men in Orange Farm, South Africa, has proved popular with local men, has succeeded in lowering male HIV prevalence among males by a fifth in just three years and has not led to riskier sexual behavior, Agence France Presse reports. These findings are crucial proof that widespread programs to circumcise African men can succeed in combating HIV just as the research that prompted the programs has strongly suggested.

Following three randomized controlled trials in the mid-2000s that each showed that voluntary medical male circumcision (VMMC) reduced the risk of female-to-male HIV transmission, global leaders have thrown their support behind programs to provide VMMC to African countries with low circumcision rates and high prevalences of HIV.

Publishing their findings in PLOS Medicine, investigators from the University of Versailles in France instigated a three-year program beginning in 2008 to provide circumcision to men older than 15 in Orange Farm, which has a population of 110,000 adults and where men tend not to be circumcised. Then men were given education about the procedure, counseling on HIV risk reduction and treatment for sexually transmitted infections, and they were offered HIV testing. A total of about 18,000 men underwent VMMC.

The investigators compared surveys taken in 2007 and early 2008 to follow-up surveys taken in 2010 and early 2011. They found that the prevalence of circumcision among men 15 to 49 was 12 percent before the three-year program and 58 percent after.

The HIV prevalence among men in Orange Farm at the completion of the program was 12.3 percent. The scientists estimated that it would have been 14.7 percent without the program, meaning that VMMC led to a 19 percent reduction in male HIV prevalence in a relatively short period of time.

Importantly, the study also showed that VMMC led to a reduction in HIV incidence rate of 57 to 61 percent. (HIV incidence is the number of new infections each year, while prevalence is the cumulative number of existing infections.) These figures are in line with the widely accepted figure of 60 percent risk reduction found in the randomized controlled trials of VMMC, not to mention numerous observational trials conducted prior to those trials.

A major concern over VMMC programs in Africa has been that men may have riskier sex after receiving the procedure and possibly counteract its protective effect. However, in this study, there was no statistical difference (meaning any actual difference could have been the result of chance) between the condom usage or number of extramarital partners between those who were circumcised and those who were not. Condom usage was a respective 44 and 45.4 percent, and the proportion of those having two or more partners who were not a spouse was 50.4 percent and 44.2 percent, respectively.

The study's authors wrote, "This study suggests that the roll-out of adult [VMMC] is associated with a reduction in HIV in a sub-Saharan community where [male circumcision] is not a social norm…. The main implication of this study is that the current roll-out of adult [VMMC], endorsed by UNAIDS and WHO, and supported by international agencies such as PEPFAR, the Global Fund and by donors like the Bill & Melinda Gates Foundation, should be accelerated."

To read the Agence France Presse story, click here.

To read the study, click here.

To read a release on the study, click here.

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http://beta.docker.poz.com/article/VMMC-Proof-24496-9063