

**WORLD BEAT** 

## What's Life Worth?

RE PRIORITIES AT the United Nation's Global Fund to Fight AIDS, Tuberculosis and Malaria all screwed up? Yes, say three public-health experts in the May Lancet, which hit the stands just as the fund released its first round of grants—\$378 million for

31 countries. Of the 28 nations to get the nod for AIDS-specific needs, 21 were grants tagged for buying HIV drugs. Africa received 52 percent of the total, with South Africa alone nabbing \$25 million.

But Elliot Marseille, Paul Hofmann and James Kahn, dissenting docs at the University of California at San Francisco, seized the moment to argue that plans to devote money to African HAART may backfire by siphoning funds away from prevention-and ultimately yielding a greater loss of life. In their Lancet cost-effectiveness study, they calculated that for every one year of life saved by treatment, 28 years of life could be saved through prevention with the same amount of money. In other words, one year of an HIVer's life is worth 28 years of a neggie's.

Marseille said that even if the drugs cost next to nothing, the price of properly administering them—doing blood work, training physicians, delivering drugs—would be "worse than wasting it...if the money is coming out of the

prevention budget.'

Of the recent funding, just under half goes to "commodities and drugs," said Mazuwa Banda, Global Fund program manager. This includes everything from HAART to condoms to bed nets for malaria.

Lamenting this Sophie's choice between prevention and treatment, Kahn said, "It's atrocious that the U.S. and other governments can't put enough money into the fund to make this choice go away." The report points out that while \$9.2 billion is needed for an "adequate" response to global AIDS, less than \$2 billion has even been promised—and the U.S. is taking some of its pledge back [see "Fuzzy Math," this page].
—Benjamin Ryan

MALE ROY

## **Getting Snippy**

OSE THE TURTLENECK and save your own. That's the growing consensus as studies increasingly suggest that cutting it off cuts down a man's risk of HIV from unprotected sex. Foreskin foes even say that circumcision may be more important than clean water, pointing out that HIV rates remain stable in certain circumcizing African countries while they soar in non-nixing, neighboring nations with otherwise-identical risk factors.

A Lancet study back in 1999 estimated that uncut dudes had a two-to-eight-times greater chance of infection. Why? Beneath the surface of the easily ruptured—and supersensitive-foreskin is a forest of CD4, macrophage and Langerhan's cells—all top viral targets. And a just-released study from Rush-Presbyterian-St. Luke's Medical Center in Chicago ups the anti-skin ante with news that the inside tissue is seven times more susceptible to HIV than is cervical tissue. Some CDC epidemiologists are now calling for public-information campaignsand perhaps eventually a phalanx of phallic farmers.

But this CDC siren doesn't settle the matter. Other studies have found that cut men were more likely to have STDs (though not necessarily HIV) than their uncut bros. A 1998 immunological inventory of foreskin functions by P. M. Fleiss, MD, praised the protective shield and its glands for their pathogen-killing substances. "Eyes without eyelids would not be cleaner," Fleiss said. "Neither is a glans without its prepuce."

The pro-prepuce posse National Organization for Circumcision Information Resource Centers (NOCIRC) cites a host of data to prove that this circumcision—as—HIV prevention theory is bogus.

NOCIRC points out that in the developed world, the U.S. has the highest rate of both penile pruning and HIV.

"Tell that [theory] to all the circumcised men who are dead from HIV," said Marilyn Milos, NOCIRC head.

And don't tell Milos that a 2001 collection of Harvard AIDS Institute studies found a big interest in voluntary circumcision among men in six African countries-from 45 percent in Zimbabwe to 80 percent in Botswana. The real skinny? These guys don't believe HIV can be stopped by stepping up to the chopping block—they're worried about other STDs. Next question: If cut cock is less sensitive than uncut, will its owners be less likely to decrease pleasure further by using condoms? —Benjamin Ryan