## THE CAMBODIAN HEALTH COMMITTEE

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December 27, 2007

Dear Friend of CHC,

On behalf of the Cambodian Health Committee, I would like to thank you for your critical support.

Our programs continue to make a major difference in the lives of people with tuberculosis and AIDS, in Cambodia and elsewhere. Here are some highlights of our year:

- Due to the great success of the CHC approach to TB, with the cure of over 13,000 patients, the Cambodian National Tuberculosis Control Program this year recommended that our Community TB Program, now in operation in 74 health centers in rural Svay Rieng and Kampot provinces, should serve as a model for all of Cambodia.
- The CHC AIDS Programs, based in two rural provinces and in the largest public hospital in Cambodia in Phnom Penh, have gained global recognition as models for integrating TB and AIDS care.
- Enrollment in the CHC-led clinical trial, CAMbodian Early vs. Late Introduction of Antiretrovirals (CAMELIA), passed the halfway point with the recruitment of the 360th patient out of the intended 660 patients. The trial will determine the proper timing for initiation of antiretroviral medication (AIDS drugs) in severely immunodeficient AIDS patients already being treated for TB. The trial is supported by a five year, \$2.5 million dollar grant from the United States National Institutes of Health (NIH), through its Comprehensive International Program for Research on AIDS (CIPRA) and the French Agence Nationale de Recherches sur le Sida et les Hepatides Virales (ANRS). The results of the trial, which we expect to be completed in 2009, will lead the way and set the standard for international practice on treatment of co-infection by TB and AIDS. This knowledge is critical to the world, as TB is completely curable even in the setting of AIDS, yet now causes approximately 50% of AIDS deaths.
- CHC spearheaded the renovation of the pulmonary ward of the Khmer Soviet Friendship Hospital, the largest public hospital in Cambodia. The new ward opened it doors as a Center of Excellence for TB and AIDS treatment and research in January 2007, focusing on patient care as well as specialized training of Cambodian doctors, nurses, social workers, scientists, and laboratory technicians in partnership with the ward's physicians. This long-term investment in infrastructure development will allow patients to receive an outstanding level of care and provides a platform for research to change the course of AIDS and TB for patients everywhere. The first of its kind in Cambodia, the facility was rehabbed with money from the NIH and the Japanese Embassy.

- CHC's Maddox Chivan Children's Center in Phnom Penh continued to expand its integrated day care programs of medical care, nutrition, counseling and education, reaching more than 500 children since opening in February 2006. The center currently serves as a second home for 350 of the poorest children and adolescents who have lost at least one parent due to AIDS, or who themselves have AIDS. Critically, those children on AIDS medications have made spectacular improvements in their health. As the health and self-esteem of these extremely at-risk children has improved, so has their academic performance, with test scores in basic language skills and math on the rise in all age groups. Besides their schoolwork, the children participate in art therapy and sports, including an equestrian team have won local competitions. The "Maddox," as the center is called, is rapidly becoming an international model for care of children infected or affected by AIDS. It is literally providing futures for children and a new approach that can be used in other countries.
- The CHC is leading Cambodia's efforts to combat multi-drug resistant TB and is developing the country plan and training for the Cambodian National TB Program. CHC received the go-ahead from the World Health Organization to purchase low-cost medicines for the program this year.
- The CHC has been providing expertise to the Pediatric Ward of the Khmer Soviet Friendship Hospital and is initiating an AIDS clinic for children. During a Dengue fever epidemic in Cambodia this summer and fall, the worst outbreak in Southeast Asia in nearly 25 years, CHC staff worked to support the Pediatric Ward staff to care for hundreds of children on an emergency basis with wonderful outcomes.
- Through visits and consultations, members of the CHC continued advising, advocating for and encouraging our colleagues in the Democratic Republic of the Congo and Vietnam. We reached many others through sharing our knowledge at major international conferences in the U.S., Canada, China, and South Africa, talking with health workers who are striving to cure TB and treat AIDS in their own regions. Our goal is to spread, as widely as possible, our experience and the lessons we have learned in Cambodia, to benefit others around the world.

This year, total funding for the CHC totaled US \$1.1 million. This money came mostly from government grants and from international health organizations. However, a significant proportion resulted from the continued generous patronage of our private donors and foundations. Private support has been especially important in allowing us to pioneer new initiatives such as the TB drug resistance program, the Maddox Chivan Children's Center, the Pediatric Ward of KSFH and a new rural TB and AIDS treatment in Chipoo, Svay Rieng.

Together, we have accomplished a lot in 2007, but much remains to be done. The increasing interest in the CHC model from governments and international health organizations worldwide inspires us to work even harder to reach more people in need. In 2008, we look forward to making intensive, integrated, community-based medical care available to many more Cambodians, and to people in other countries.

All people want to be well, and if given the proper support, they will achieve that goal. That is our simple belief. We are grateful for your continued support of our work toward that goal.

Sincerely yours,

Anne Goldfeld

President, Cambodian Health Committee-USA Co-Founder Cambodian Health Committee