

Global Health Committee

A Personal Thank You



January 2008: Without treatment, suffering from TB and AIDS



July 2008: With treatment, and a new life

December 24, 2008

On behalf of the Cambodian Health Committee, I would like to thank you for your support of our work through the years. We are very proud of the difference our programs continue to make, which your support has made possible. We continue to move forward one person at a time with our approach of delivery, discovery and advocacy as you can see on the enclosed sheet of 2008 achievements.

In last December's letter I wrote that in 2008, we were looking forward to making intensive, integrated, community-based medical care available to even more Cambodians, and to using our model to help people in other countries. We have done both. In 2008 we expanded our operations to Ethiopia, and in 2009 we will move forward in Vietnam and Swaziland. In recognition of this expansion, and for the work that we will perform in these countries, we have adopted the name of Global Health Committee, Inc and linked it to the Cambodian Health Committee name. In Cambodia, where we have become the largest and arguably most effective local NGO, we will continue to be the CHC.

In Cambodia, our TB programs have cured over 17,000 men, women and children of TB since our founding in 1994 and we are treating approximately 4,000 patients infected with HIV-1, all the while achieving outstanding levels of reconstitution of the immune system with the AIDS drugs. These programs are reaching the remotest villagers in this post-conflict and extremely poor country establishing an international bar on how TB and AIDS can and must be treated together, no matter the logistic obstacles or the poverty.

Our TB community model is being scaled up to the whole country of Cambodia and our multidrug (MDR) TB program is working to achieve universal access to MDR care for all Cambodians who need it. And both of these program models are being transferred to Ethiopia.

Our children's program at the Maddox Chivan Children's Center for AIDS-infected and affected children continues to thrive having assisted over 600 children since opening in 2006. We are developing counseling materials and our integrated social-medical approaches for scaled up use in Cambodia and for transfer to Africa.

This year we broke ground on the new Sullivan outpatient clinic for children with AIDS and TB and along with a renovation of the pediatric ward of the Khmer-Soviet Friendship Hospital. There, we are already caring for 400 children with AIDS jointly with the hospital staff enhancing local knowledge and capacity. Similar to what we have done with the hospital's adult TB/AIDS ward, we will make this a center of excellence for TB and AIDS care for children in the country.

You can see pictures of two of the children on this sheet who have already benefited from this project. Both How and Sorita were near death from TB and AIDS when we first found them and are now both cured of their TB and thriving on AIDS medicines and the educational and social opportunities at the Maddox Center.

From the discovery and research standpoint, we continue to make strides forward. The clinical trial that we are leading, which will set the international standard for how to time TB and AIDS drugs in very sick AIDS patients, is nearing completion. As we have done since CHC's inception, we are trying to learn lessons in the laboratory from what we are treating on the ground, so that we can discover new medicines and vaccines to ease future suffering.

This year has marked the 5th year we have worked with Time Magazine photojournalist James Nachtwey. Through exposing the suffering caused by TB and AIDS and the positive impact of CHC's work on the ground in major photo exhibits in Paris, Bangkok and New York, and in publications such as Time Magazine, the Boston Globe and the London Sunday Observer, we hope to shed light on the TB and AIDS emergency and move the humanitarian agenda forward.

In Ethiopia, we have been involved in a unique south-to-south collaboration, where the CHC has been assisting colleagues to address the emergency of MDR TB. Using the approaches to TB and MDR that CHC established in Cambodia we are bringing these lessons to Ethiopia. In fact the Ethiopian TB team from its Federal Ministry of Health will arrive in Cambodia next week to be trained by Cambodian colleagues. Following this, our CHC team will go to Ethiopia and initiate the first patients in the country on MDR therapy. There are an estimated 6,000 Ethiopians awaiting treatment.

We will also bring to Ethiopia our lessons learned in our children's projects in Cambodia where we have begun the planning for a multisectoral children's center for TB and AIDS care.

While we have made great progress in 2008, we remain very humbled by the challenges in front of us. There are vast numbers of adults and children all over the world who have no access to medicines or care that would cure or treat their disease just because they are poor or live in post-conflict situations. We are driven to continue to address this problem on all the levels that we can: by delivering what drugs we have in hand, by developing model approaches that can be used globally, by seeking new knowledge for cures and medicines of the future, and by advocating for our patients.

We are humbled by the generosity of all of you who through your support have made the difference between life and death and between a life of dignity and quality versus hunger and discrimination for so many of the people we serve.

With wishes for a wonderful and happy new year for you and your families

Sincerely,

Anne Goldfeld, M.D.
President and Co-founder CHC/GHC



Remember Ye How?

Some of you have asked about him. We are happy to announce that he has recovered from TB and is stable and is doing great on his AIDS medicine. He attends the MCCC and is a star pupil in his second grade class.

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