

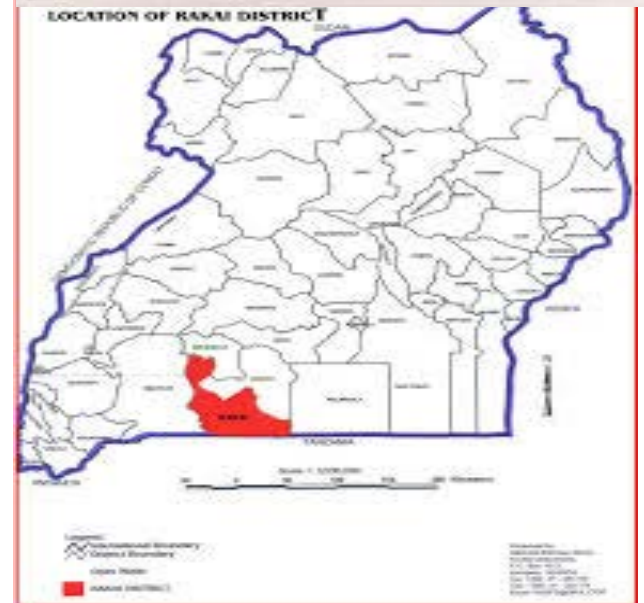
Historical Perspective of HIV In Uganda and Rakai Health Science Program, 1988-2019



David Serwadda
Rakai Health Science Program

Topics

- History of HIV in Uganda
- Introduction to Rakai Health Science Program



Aggressive Kaposi's Sarcoma, In Uganda;1982-

Br. J. Cancer (1986), **53**, 497-500

Further experience with Kaposi's sarcoma in Uganda

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Summary Four Ugandan patients (1 women, 3 men) with generalized Kaposi's sarcoma (KS) were seen in the Uganda Cancer Institute between October 1983 and December 1984. They presented with generalized lymphadenopathy, plaques/nodules on the body, general swelling of the head, oral and visceral involvement and respiratory distress. Initial responses to adriamycin as a single agent or a combination chemotherapy of actinomycin D, vincristine, adriamycin and imidazole carboxamide appeared to be favourable but no sustained response was obtained. Serological tests for human T-lymphotropic virus (HTLV-II) antibodies were positive in all 4 cases.





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THE STAR

300 mothers, babies rescued from fire

MORE than 300 women and new-born babies were saved in a dramatic evacuation when fire raged through a New Delhi hospital, officials said.

Firemen scaled ladders to the first three floors of the maternity block at Lok Navak Jai Parkash Hospital, broke the windows and carried patients to safety.

One woman jumped from the first floor and was slightly injured before the fire was brought under control after two hours. There were no casualties, police said.

Delhi's chief executive, Councillor Jagg Praveesh, said about 70 babies were rescued.

Meanwhile, seven people were hurt in an attack on

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Mysterious disease kills 100 people in Rakai

By STAR Correspondent

A STRANGE killer disease has struck the District of Rakai in South Uganda, killing at least 100 people in ten months. The victims of the disease, locally called SLIM, are youths aged between 15 to 36 years.

The worst hit area is Kyebbe-Kannebulumu sub-county. Hardly a fortnight passes without a death of one or more young men or women. Mourning is every where and several people I met wear dejected faces, carry heavy hearts and are living in great fear.

The disease has so far not responded to any treatment. All patients taken to various hospitals have died.

Investigations I made here indicated that the disease has been prevalent in the district for over a year now.

The disease which started at Kyebbe-Kannebulumu has now spread to Kyoteera Township and Kooki.

A common characteristic about this disease is that all victims have at one time or other been associated with the lucrative border trade between Uganda and Tanzania.

Once one has contracted it one experiences intermittent fevers of vomiting, diarrhoea, preceded and accompanied by fever, high temperatures and profuse perspiration. Despite treatment of whatever nature, the condition persists.

Gradually, the victim loses weight and progressively gets so emaciated that within a fortnight or month and too weak to become President of Uganda," said Aruo.

He added that of late the NLP leader has started to behave like a wounded bull in a Spanish amphitheatre.

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Okeny's comparison 'hopeless, ridiculous'

BY comparing himself to former US President Abraham Lincoln, the interim leader of the Nationalist Liberal Party (NLP) Mr. Tiberio Atwoma Okeny, is making his political position in Uganda more hopeless and ridiculous.

This scathing remark has been made by a senior lecturer at Makerere University Mr. S. K. Aruo, in a letter he has written to THE STAR in reply to remarks made against him by Okeny that appeared in THE STAR of November 27, 1984.

Aruo, said in his letter, that it may have taken the people of the United States many years to recognise in Lincoln the qualities that made him an outstanding President and statesman of America. "By the time the people of Uganda recognise any good qualities in Okeny, he will be too old and too weak to become President of Uganda," said Aruo.

He added that of late the NLP leader has started to behave like a wounded bull in a Spanish amphitheatre.

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Dollar likely to fall in 1985

Warnings that it was overvalued have been ignored repeatedly by investors and past predictions, by analysts that "the bubble's got to burst this year," have all proved fallible.

Even for 1985 most analysts expect the dollar to hit historic highs against the pound sterling before mid-year. It is only in the second half of 1985 that analysts see a steady decline setting in.

The main factor weighing in analysts' predictions for a dollar fall in 1985 is the size of the current account payments deficit with the rest of the world.

The dollar reached an 11 1/2 year high of 3.47 marks in late September.

Health center visit to Masaka and Rakai district

- In January 1985
 - A medical team:
(Drs Nelson Sewankambo, Roy Mugerwa, Bob Downing, Ann Bailey and David Serwadda)
 - Clinical examination on medical ward and clinical sample taken
 - Kitovu Hospital, Masaka referral Hospital and Kalisizo health center, Rakai

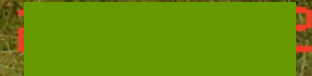


Why rural Rakai?

An HIV epicenter

D Serwadda, N Sewankambo *et al* first identified “slim disease” patients in Rakai in 1985.

The Lancet • Saturday 19 October 1985



Proposal to study the dynamics of HIV transmission in Rakai

- 1986-Proposal to study dynamics of HIV transmission sent to CDC
- 1987-Dr Jonathan Kaplan, CDC sends proposal to USAID Washington D.C
- 1987 USAID contact Dr Maria Wawer, Columbia Univ., as possible collaborator on this study



The core team-1988



- Dr Stan Musgrave
Research fellow, Columbia
University

- Dr David Serwadda
Makerere University

- Mr Semiyanga
Driver

- Ms Rose Mirembe,
Administrative Assistant

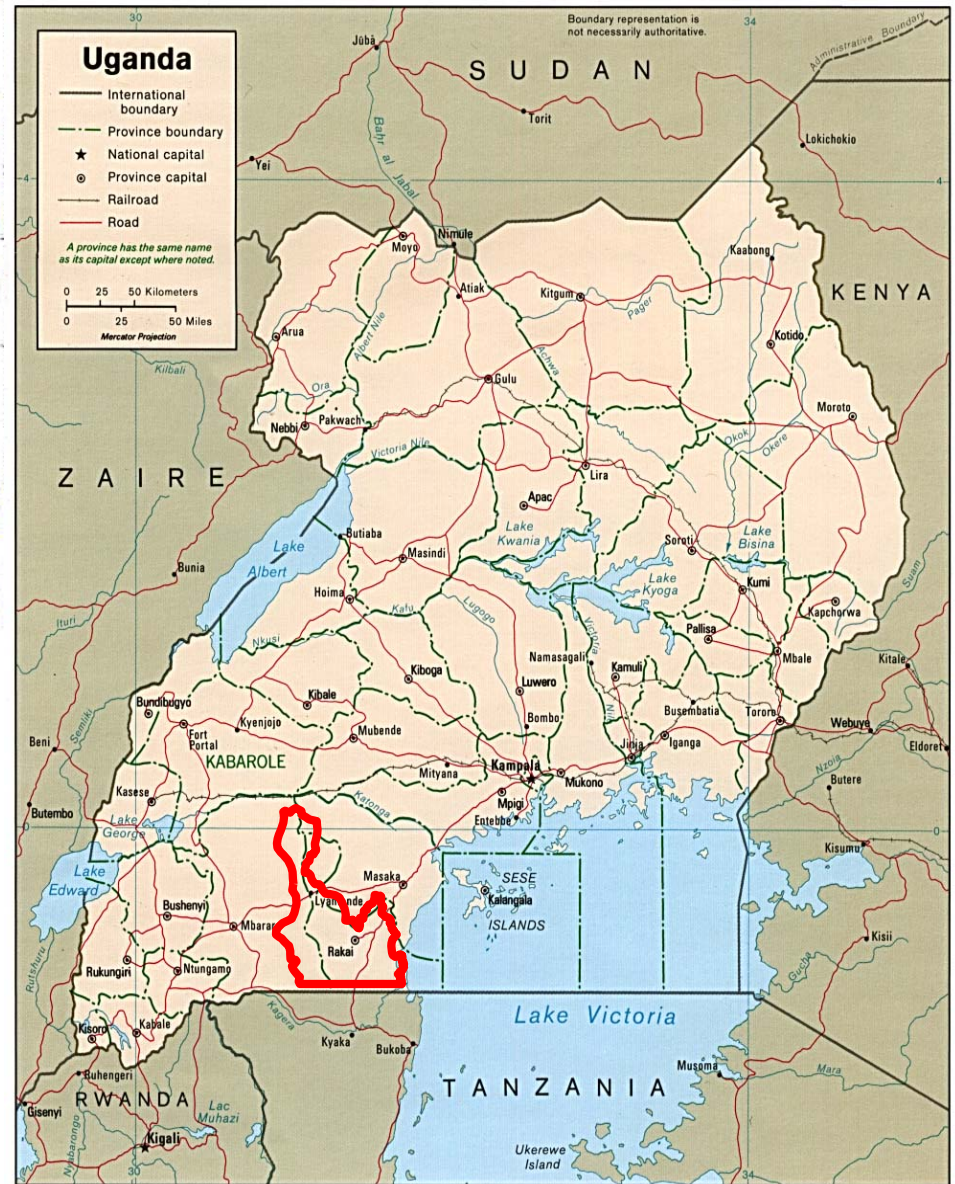


Rakai Project -1988

- Rakai Project -1988
 - Start operation based from Uganda
 - Virus Research Institute with three people, Dr Stan Musgrave technical advisor, Mr Semiyaga, driver and Ms Rose Mirembe, secretary
- Field work-Rakai-1989
 - First field work started in 1989



Rakai



Base 802426 (A05372) 12-95

Community Cohort:

- ~ 1,200 adults

"The genesis" 1989



- All activities were initially conducted in Milano Inn in Kyotera town



Rakai Lab, 1989

Personnel/ activities in the early days



2004: Transition from Rakai Project to Rakai Health Science Program

- In 2004 the Rakai Project had been in existence for about 15 years with a diverse research portfolio
- Project have a defined period of time~5yrs
- 2004-Rakai Project renamed Rakai Health Science Program



Rakai in 1998 and 2008



Rakai communities and participants



Collaborations

Key Partners and Collaborators

