



# Hello Dr. Huang! Goodbye HIV?

by Kevin W. Klein, MD, DCMS President

**L**ast month, Dallas County welcomed its new Director of Dallas County Health and Human Services (HHS), Philip Huang, MD, MPH (UTSW '86). We have had several physician leaders in the past including Gordon Green and Randy Farris in the 1980s and 1990s. But, for more than 20 years Dallas County has not had a physician, or even someone with an advanced degree in public health, as HHS Director, and it was the most populous county in the nation without such leadership. Not long ago when news broke that Dallas was searching for a new Director, the Dallas County Medical Society offered to provide the Dallas County Commissioner's Court (DCCC) information regarding nationwide standards and desirable qualities in a new Director. A DCMS committee led by past president, John Carlo, MD, and comprised of past HHS physicians and epidemiologists, wrote a white paper which was submitted to DCCC administrator, Darryl Martin, and subsequently passed on to the Commissioners. Long story short,

our favorite, Dr. Huang, recently the Medical Director and Health Authority of HHS Travis County, was unanimously selected by the DCCC as our new Director of HHS.

In his State of the Union Address, on February 5, 2019, President Trump announced a plan to end the Human Immunodeficiency Virus (HIV) epidemic in 10 years. This seemed to be a good and ambitious goal, but I did not give it much thought until the following week when I attended a talk given by the US Assistant Secretary for Health Admiral Brett Giroir, MD (UTSW '86). He was speaking on the opioid epidemic and emerging public health priorities. At the end of his talk he segued into the United States' plan for ending the HIV epidemic. The US HIV initiative will take advantage of recent scientific advances in prevention, diagnosis, treatment, and care with the goals of reducing the incidence of HIV infections in the United States by 75% within 5 years and by 90% within 10 years. What really got my attention was the recognition that a key component of success for

this initiative is active partnership with local health departments and county medical societies. Of the more than 3,000 counties in the United States, fewer than 50 account for the majority of new HIV infections annually.<sup>1</sup> Naturally, Dallas County is on this list of hotspot counties with 18,000 people living with HIV and 800 new cases reported in 2017.<sup>2</sup> In the upcoming federal budget, Dr. Giroir expects additional funding for the HIV initiative to be directed to these areas. The strategic initiative includes 4 pillars:

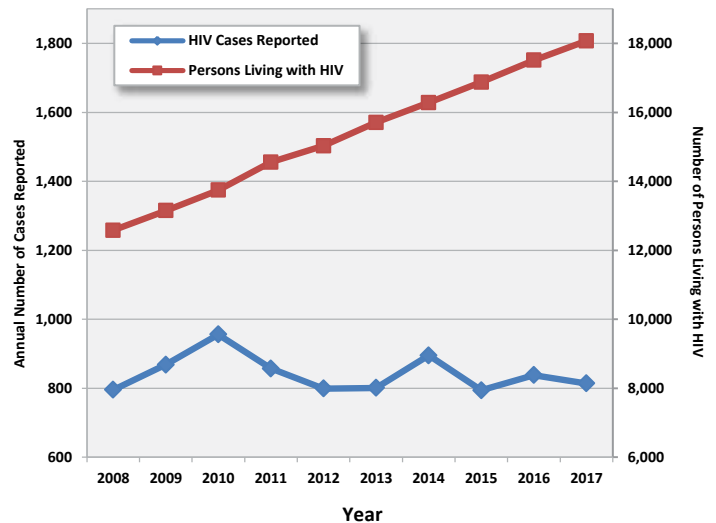
#### UNITED STATES STRATEGIC INITIATIVES

- Diagnose all individuals with HIV as early as possible after infection
- Treat HIV infection rapidly and effectively to achieve sustained viral suppression
- Prevent at-risk individuals from acquiring HIV, including pre-exposure prophylaxis
- Rapidly detect and respond to new clusters of HIV infection to reduce transmission



DCMS President Kevin Klein, MD with Dallas County Health and Human Services Director Philip Huang, MD

New HIV Cases and Cumulative Numbers of Persons Living with HIV in Dallas County, 2008-2017<sup>2</sup>



Dr. Huang has led Travis County and Austin, Texas in fighting the AIDS epidemic and, on June 18, 2018, Austin's mayor and county judge signed the Paris Declaration on Fast-Track Cities Ending AIDS.<sup>3</sup> This is a global initiative in which over 250 cities around the world and 20 cities in the US have adopted specific goals for 2020:

**GOALS FOR 2020**

- 90% of all people living with HIV will know their HIV status
- 90% of all people diagnosed with HIV will receive antiretroviral therapy (ART)
- 90% of all people receiving ART will have viral suppression
- 50% reduction in new HIV infections
- End stigma related to HIV

With the support of DCMS and Dr. Huang, we should get Dallas to join in this worthwhile effort.

I remember vividly when the AIDS epidemic began in 1981 while I was an intern at Parkland Hospital. At first the disease did not even have a name. Patients came in with bizarre skin cancers (Kaposi's sarcoma) and even stranger infections (pneumocystis pneumonia and cryptococcal meningitis). Everyone with HIV died rather quickly. Acquired Immunodeficiency Syndrome was a death sentence. There was great fear and uncertainty at the time about

how the disease was transmitted. I lost friends, classmates, coworkers, and even a family member. Doctors and nurses were afraid to enter the room, much less touch a patient. The stigma of HIV and its association with homosexual men and IV drug users was profound. For a reflection on the history of AIDS in Dallas see Dr. Green's excellent article in The Pharos, Spring 2018.<sup>4</sup>

We have come a long way in understanding HIV and its treatment and diagnosis over the past 40 years but there is still much progress to be made. Recent large clinical studies have demonstrated that undetectable equals untransmittable HIV (U=U).<sup>5</sup> This means that patients with HIV on antiretroviral therapy who maintain an undetectable viral load will not transmit HIV to others. Also, persons living with HIV and properly treated can expect to live a near normal lifespan. Both will go a long way to reduce the stigma of HIV infection. Additionally, pre- and post-exposure prophylaxis appear to be effective. Theoretically, these advances indicate that the HIV epidemic could be ended quickly in the US. Realistically, eliminating HIV will take a concerted and coordinated effort by federal, state, and local health departments as well as a grassroots effort by primary care physicians especially those who care for our indigent and underserved populace.

On February 19, the DCMS hosted a reception for Dr. Huang to

reintroduce him to the physicians of Dallas County. He was able to meet past directors of HHS, primary care physicians, infectious disease specialists, epidemiologists, UT Southwestern research physicians, and the DCMS Board of Directors. I am hopeful about our chances to make a significant impact on the HIV epidemic in our community. After all, we eliminated polio from the US. But, as I was reminded by my mentor, Professor Jim Luby, we have yet to eradicate syphilis and tend to be overly optimistic about eliminating disease. **DMJ**

**References**

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3. Huang P, Seidel S. Fast-track cities initiative to end the AIDS epidemic. *TCMS J*. 2018;64:26-28.
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