AIDS drugs may be lost due to cutbacks

By Bill Decker
Staff Writer

While new drugs are offering new hope for Acadiana AIDS patients, state health-care cuts are threatening their access to those drugs.

Some of those patients, many of whom already rely on University Medical Center, 2390 W. Congress, and other state-run charity hospitals for their AIDS medication, are scrambling for alternative sources of the drugs called "protease inhibitors."

"It's all real scary right now," said Yvette Robinson, who helps local AIDS patients apply for health benefits. "It's very tough on the clients."

UMC administrator Larry Dorsey said budget cuts and questions about possible side effects have prevented the hospital from distributing protease inhibitors. The hospital's AIDS clinic has been on a long list of programs that might be eliminated because of reductions in federal Medicaid funding.

But no final decisions have been made, Dorsey said. "If the doctors order the protease inhibitors, we plan to have them in the HIV drug program."

A meeting on the issue is scheduled for next week, Dorsey said.

Some Acadiana patients are signing up with drug companies in hopes of participating in drug trials, said Robinson, director of client services at Acadiana Concern for AIDS Relief, Education and Support, or Acadiana CARES.

The problem: The clinical trials often have strict requirements that participants haven't taken other protease inhibitors or other drugs.

Some patients are turning to programs run by drug companies to help poor patients, according to AIDS program social service directors in Lafayette and New Orleans.

At the HIV Outpatient Program in New Orleans, 40 people are currently waiting to learn if they're eligible for the drug company programs. The results of trials in which the AZT-type drugs were combined with a protease inhibitor indicated that the therapy lowers the amount of AIDS virus in the patient's blood and increases the number of an important immune-system cell.

The protease inhibitors haven't been around long enough for doctors to determine their long-term effectiveness. But the results of trials encouraged the Food and Drug Administration to make the drugs available beginning in late 1995.

The problem is cost. "It's phenomenally expensive," said Robinson of Acadiana CARES. "You have to be a rich person to afford them."

Taryn Lindhorst, director of social services for the HOP program in New Orleans, said one AZT-type drug and a protease inhibitor can cost $13,000 a year. And two-thirds of her clients don't qualify for Medicaid.

At UMC, Dorsey said the cheapest of the three available protease inhibitors costs more than $4,000 a year. UMC's HIV drug program offers medication for patients who aren't covered by private insurance or haven't yet qualified for other government health care.

Earlier in the year, the list of drugs available to patients referred to UMC by private physicians included saquinavir, the first protease inhibitor approved by the FDA. But in May, state health authorities took saquinavir off the list.

All three protease inhibitors are on the approved-drug list for patients treated at UMC's AIDS clinic. So far, the drugs haven't been distributed there.

The clinic itself may be safer from the budget cuts than it was a few months ago. "It looks like it's going to make it," Dorsey said.