



Strengthening HIV Response in Taunsa, Punjab Pakistan

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Abstract:

The Taunsa rise of pediatric HIV cases underscores systemic gaps in infection control, transforming a localized public health emergency into a national and provincial priority for pediatric HIV prevention. Present response provides an update and enumerate the progress made. Multiple transmission methods have been found that caused the spread of virus. Taunsa upsurge serves as a stark reminder of the consequences of systemic public health neglect. However, the response has been swift and ongoing

Key Words: Taunsa HIV outbreak, Iatrogenic HIV Transmission, Infection Control, Epidemic Preparedness, Pediatric HIV.

Introduction

Dear Editor, I am writing in response to the recent article "Silent Spread: Urgent Call to Address the HIV Outbreak among Children in Taunsa, Punjab, Pakistan" published in International Journal of Epidemiology and Public Health Research in April 2025.

This article serves as a poignant revelation for numerous public health authorities within the country. The aforementioned article highlights the devastating HIV outbreak among children in Taunsa, Punjab, Pakistan. Taunsa is a remote district with population of 6,75,756 in the largest and densely populated province of Punjab (1). I want to commend the author for highlighting this critical issue and would like to update a few facts and enumerate the progress made thus far.

In late 2024, a leading local pediatrician began observing the children with pyrexia of unknown origin that was refractory to antibiotic therapy. He subsequently referred these cases to a tertiary hospital for extended investigation. Confirmatory tests conducted on these children yielded HIV positive results. In response, the provincial Health and Population Department requested UN agencies to dispatch experts to investigate the method of transmission. I synthesized the findings of the UN Mission and traveled to the area and conducted Key Informant interviews.

The source of the virus remains uncertain; however, multiple methods of transmission have been reported, including vertical transmission with parental positivity. Injudicious administration of medical injections and the use of unscreened blood contribute to play a role(2).

The Department of Health and Population has established a dedicated treatment center as an urgent response measure (3). The center provides free-of-cost antiretroviral drugs supported by the Global Fund, treatment of opportunistic infections (OIs), and free testing services along with counselling to affected families. A thorough screening of healthcare providers has been completed. Illicit practitioners and blood banks have been sealed by local health authorities. School screening has been completed in the primary schools of the area. A grand awareness seminar involving parents, religious leaders, influential figures, tribal heads, educators, media and civil society has been successful. Plans are underway to expand access to ART in rural clinics and integrate HIV testing into the immunization program.

While these steps denote critical progress, the response is far from over and necessitates substantial funding. Taunsa upsurge serves as a stark reminder of the consequences of systemic public health neglect, as previously observed elsewhere (4); however, it has also mobilized unprecedented action so far. We urge the Health & Population Department to continue advocacy, secure funding, and enforce policy to ensure that no child suffers from preventable HIV transmission. Accountability and community engagement must remain central to this response. We hope the public health officials can transform this crisis into a catalyst for stronger healthcare safeguards for Pakistan's next generation.

Conflicts of Interest: None to declare

References:

1. Butts, J. B., & Rich, K. L. (2022). *Philosophies and theories for Advanced Nursing Practice*. Jones & Bartlett Learning. 1. GoP. District DG Khan, Taunsa DG Khan2025 [cited 2025 July 22]. Available from: https://lgcd.punjab.gov.pk/system/files/Tehsil_Council_Taunsa_Sharif.pdf.
2. Syed MA, Khan A, Chaudhry A, Baig MA, Memon NM, Kumar S, et al. An Epidemic of Pediatric HIV From Reuse of Infusion Equipment in Pakistan. *J Acquir Immune Defic Syndr*. 2022;89(2):121-8.
3. GoP. Primary and Secondary Healthcare Department, Civil Secretariat, South Punjab,Muzaffargarh road, Multan, 60000 Multan2025 [cited 2025 July 22. 2025]. Available from: <https://pshdsouthpunjab.gov.pk/>.
4. Mubarak N, Hussain I, Raja SA, Khan TM, Zin CS. HIV outbreak of Ratodero, Pakistan requires urgent concrete measures to avoid future outbreaks. *J Pak Med Assoc*. 2020;70(8):1475-6.