## Parallelism with the global reaction to the AIDS pandemic

What the world has experienced with the COVID-19 pandemic echoes what happened thirty years ago with the global expansion of AIDS in some respects:

1. No systems were established and no attitudes were promoted to know the individual and collective serological status in order to gain a better understanding of their epidemiological dynamics and to steer public health and individual responsibility actions. Whereas conscious and ethical HIV seropositive persons should have prevented infecting seronegative persons (mainly through the use of condom, hampered by the Catholic Church and the US government through its PEPFAR programme), in the case of COVID-19, those without IgG antibodies (rather then volatile PCR or antigen negative status) should have been subject to lockdown and vaccination while sero positives could have avoided the extreme degree of economic contraction, strengthened social services for older people and possibly led to herd immunity.
2. At that time and now, there was no comprehensive funding system for research into global public goods against the pandemic, i.e. universal access to effective and safe diagnostic tests, treatments and vaccines. In the case of AIDS, from the discovery in 1996 of anti-retroviral combined therapies that prevented death, to the establishment of the patent pool in 2004, around two million people died per year while corporations shielded patents, charged unaffordable treatment[[1]](#footnote-1) prices, and gained some $20,000 million profits even after recovering research investments (to a large extent originally financed by public systems). In the case of the COVID-19 pandemic, since the knowledge of effective vaccines in 2021 (even with the uncertainty of medium and long-term side effects), the main private Pharma corporations producing COVID mRNA vaccines distributed in high income countries have also protected patents and rejected to join any knowledge and patent pool. The high margins and the patent monopoly has fuelled profits while paying low tax revenues[[2]](#footnote-2). The high prices, together with the need of expensive ultra-cold chains, has de facto prevented most of the population in low and low-middle income countries from access to COVID vaccination. According to the efficacy rates some two million deaths could have been prevented had the COVID vaccine covered all persons over 60 years of age in the world regardless their country of origin or income level.
3. The sigma during the AIDS pandemic fell on those infected who came forward revealing their status while during the COVID pandemic the stigma is falling on those who question the systematic lock down and the vaccination to all age groups in terms of risk benefit and opportunity cost.
1. Https://supreme.findlaw.com/legal-commentary/profit-margins-death-rates-drug-patents-and-hivaids.html [↑](#footnote-ref-1)
2. <https://actionaid.org/news/2021/pharmaceutical-companies-reaping-immoral-profits-covid-vaccines-yet-paying-low-tax-rates> [↑](#footnote-ref-2)