

Prevention is better than Cure- AIDS: A Short Review

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Abstract

Acquired Immune Deficiency Syndrome (AIDS) was first described but undiscoverable its clinical entity in 1981 in which the goal remains the same, though at first lifestyle and behavioural factors were hypo the sized to be causally related, finally in 1983 the HIV was identified as the true cause of AIDS. Since the first identity approach to HIV infection shows a divergence in structure and its pathogenesis still emerges as an HIV epidemic and so far resulted in 70 million infections and 35 million deaths in the developed and under developing countries around the globe. HIV infection increases the risk of several autoimmune diseases; the most frequent damages concern the several other organs are the concern. As for as concern on the antiviral therapy and condoms can help to reduce the immunological impact of the disease but it brings up uncountable disadvantages—not the least of which is that they are also good job at which they were originally developed, namely contraception. For those who wish to have children, condoms thus pose a dilemmatic situation. So two recent pieces of news, one scientific and one administrative, are particularly welcome the present review article focus on the prevention is better than cure most deadly disease in the globe to overcome.

Keywords: AIDS

Introduction

History

AIDS and HIV epidemic began with illness, fear and leads to the death of an individual. However, the development of highly effective antiviral drugs represented a major turning point by allowing people living long and healthy lives even though infected with HIV diseases_[1-5]. It is widely believed that HIV originated in Kinshasa, in the Democratic Republic of Congo around 1920 when HIV species intertwine from chimpanzees to humans. Until the 1980s, we do not know how many people developed HIV or AIDS. HIV was unknown and transmission was not accompanied by noticeable signs or symptoms. While sporadic instances of AIDS were documented prior to 1970, available data suggests that the current epidemic started in the mid- to the late 1970s [6-12]. Several Open access journals on the se topic provide more visibility and accessibility to the readers in gaining the required information of the present scenario and other ongoing researches all over the world, which are being exhibited through open access journals, serve as the main source of information in various field.

Researching Support

By 1980, HIV has already spread to several countries (America, Brazil, England, Africa countries, Australia). In the over a period of decade about 100,000 and 300,000 people could have been infected [12-19]. Several societies like Australian Federation of AIDS Organisation stared with a vision "*Working together to defeat HIV and new HIV infections in Australia, Asia and the Pacific*' were part of a wider trial to investigate the efficacy of the virus and preventing loss of human and helping them to overcome psychologically and providing information government authority[20-26]. Whole blood from survivors thought to contain antibodies specific to the disease is injected into patients in the active phase of infection. This is believed to supplement or kick-start the patient's own immune system production against the HIV proteins. In Jan 1983, AIDS was reported that female partners of males who were diagnose suggested that it would be passed on via heterosexual sex and after some unique information gathering by CDC identified all major routes of transmission and ruled out transmission by casual contact such as sharing food with the infected person, drinking water, air or surfaces[27-35].

Research Society

In recent years, a number of multi-site RCTs of promising biomedical/technological interventions for HIV prevention, such as microbicides, vaccines, and the female diaphragm, have yielded either null or negative findings. In 1995, Ministry of Health Community Development, Gender, Elderly and Children, Tanzania has started a society PMTCT Tanzania to started to provide up to data information on mother-to-child transmission of HIV (MTCT), HIV early infant diagnosis[36-45]. The society PMTCT Tanzania became an international symbol of AIDS awareness in Tanzania. PMTCT Tanzania and Australian Federation of AIDS Organisation is collaborating with several conferences for example like OMICS conferences which provides perfect platform for global networking as it brings together renowned speakers and scientists across the globe. That is, there was no difference between experimental and control groups with respect to HIV infection rates or, in a couple of cases, participants in the experimental arm appeared to have higher rates of infection than those in the control [46-52].

Perhaps most notably on the research front, basic biomedical researchers now regularly commune with clinical trials researchers and behavioral interventionists – and, once in a while, even social scientists – in interdisciplinary discussions of HIV prevention topics. Certainly, there are still separate scientific meetings and journals for various disciplines and approaches, but increasingly, there are also mixed conferences and publications, with a great deal more crosstalk than occurred in the first two decades of the response [53-65]. In November 15th, 2015 the 3rd International Conference on HIV/AIDS, STDs & STIs in Hilton Atlanta Airport, Atlanta organized with a theme "*Raising Global Awareness on STD/AIDS and Fighting the Stigma Surrounding the Disease*". As a result, the HIV prevention field as a whole has come to recognize that HIV is fundamentally a pathogen that is transmitted in the course of human relationships that occur and are influenced by social and cultural contexts, and that targeting only one aspect of the interacting biological, behavioral, and social features of HIV/AIDS will have limited effect [32, 39,66-75]. In October 03, 2016 4th International Conference on HIV/AIDS, STDs and STIs Florida, USA with a theme "*The search for a cure*" with good number keynote speaker discussed about the search for a cure.

Timothy Fouts is one of the Founders and Principle Scientists at Profectus Bio Sciences Inc presented his work with a title *"The balance of cellular and humoral immunity determines the level of protection offered by an HIV vaccine in macaque models of HIV infection"* at 3rdInternational Conference on HIV/AIDS, STDs & STIs vaccine outcomes raise a host of questions whose answers will affect the ability to conduct future, successful HIV prevention trials, including: how is null and negative findings communicated to and understood by trial participants and other members of their communities? [77-82]. How can expectations about optimal trial results are managed? How, in the face of disappointing – and even harmful –

findings, can support for HIV prevention trials be maintained among communities and funders? Does a null result in a large trial of a particular product (e.g., the latex diaphragm) doom that product for any subsequent trials, even if the finding may be a result of uptake of risk reduction behaviors among all trial participants rather than product non-efficacy? If so, will we ever truly be able to know if the product itself is effective; and might we be running the risk of ruling out a potentially efficacious product [83-91]. Edward M Kian is the renowned member of Welch-Bridgewater Endowed Chair of Sports Media in the School of Media and Strategic Communications, Oklahoma State University, USA presented his abstract with a title *"The world has changed in 25 years: Re-examining media framing of Magic Johnson living with HIV-AIDS*" discussed the how the world media tickled when highly professional basketball player lived with HIV[92-99].

A Need for a Discussion

Open Access literature assumes a key role in proving the information and current researchers across the world. Journal of Virology and Antiviral Research has especially publishing interesting article on Human immunodeficiency virus types1 (HIV-1) mother-to- child transmission occurs at a rate of more than 30% and is the predominant cause of AIDS in children. Several maternal factors including advanced clinical stages, low CD4 lymphocyte counts, and high viral load, immune response, and disease progression have been implicated in an increased risk of vertical transmission. Journal of AIDS & Clinical Research is a peer reviewed open access journal whose follows rigorous double blind review process and focusing on articles related to HIV and AIDS both clinical & medical research and published the papers on specific topic on Co-infections: HIV as a Special edition of its Volume 3[100-110]. In addition, Journal of Antivirals & Antiretrovirals has been discussing about drugs and development of HIV and the transmission of a major and multiple genotypes have been suggesting the analysis of other regions of HIV - 1 genome, shows a high conservation of intact and functional gag p17 and NC, pol RT, tat, rev, vif, vpr, vpu, and nef open reading frames (ORFs) the following mother - to - child trans mission.

Moreover, the Nafees Ahmad is currently a Professor and Chair of Immunobiology Department at the University of Arizona, USA, serving as an Editorial board member of a journal of virology and antiviral research. His central research interest is the study of how social and cultural forces shape the behaviours that place individuals at higher risk for disease outcomes. Professor Nafees Ahmad began work in 1984 on the AIDS Research Project, one of the first longitudinal studies of AIDS risk taking behaviours in the world. Since that time he has published over 120 scientific papers and Professor Abdul A Waheed, [11,45,66,111-118] is particularly proud of his record of collaborative research conducted with AIDS community-based organisations, which include a broad range of organisations within the United States and abroad. We should target the properties of transmitting viruses and those that are associated with disease progression in the development of effective and better treatment.

In HIV prevention science, the randomised controlled trial (RCT) with an HIV incidence, outcome measure remains the gold standard method for establishing efficacy among the biomedical community. But its hegemony is being challenged by social scientists who argue that experimental methods often are not appropriate for addressing social-level questions. Norman D Goldstuck speaks out his view about the prevention of HIV with a title "*The Role of Adult Male Circumcision in the Prevention of HIV/AIDS- Does the Technique Make a Difference*?"[119-125] in his review article presented about the Does, Adult Male Circumcision is a technique to the prevention of HIV. They also note that declining HIV infection rates observed over the course of the pandemic in a number of diverse settings (e.g., San Francisco, Thailand, Uganda, and Senegal) resulted from community-driven behavioural and social change, not from experimental interventions, and that such community-

generated responses do offer observational evidence of effectiveness – even if it is not entirely clear to what specific c actions the declining infection rates may be attributed [126-135].

Arthur Horton from Lewis University came out with research article examines a possible success story in coping with the epidemic as found in the decrease of the HIV/ AIDS death rates for the city of Chicago with a title "*AIDS in Black America: A Study of the City of Chicago*". So, while RCTs remains valid and necessary for assessing the efficacy of some types of HIV prevention strategies, they will never produce the entirety of relevant evidence of what actually works in different modes, populations, and setting [136-145].

Conclusion

To be sure, we need rigorous research, value for money, and international coordination. However, the commitment to tackle AIDS will permit us not alone to contend HIV in those were already infected with it but also to place the utmost effort in seeking to protect future generations from this major scourge of humankind. It could also provide the information crucial to arrest and future vaccine policies and classification along with the distribution of HIV genotypes and the biological and public health implications of genetic variability of this deadly pathogen. Maybe, may not be sure that we able provide upcoming generation to be HIV free world unless we take precaution [3,9,145-151].

REFERENCE

- 1. Sindhura BR, Vishwanath Reddy H, Inamdar SR, et al. Lectins: magic bullet towards HIV gp120. J Antivir Antiretrovir 2012; 4:101-102.
- Obiako OR, Muktar HM, Garko SB, et al. Adverse reactions associated with antiretroviral regimens in adult patients of a university teaching hospital HIV program in zaria, northern nigeria: an observational cohort study. J Antivir Antiretrovir 2012; 4:6-13.
- 3. Mathur P, Zurlo J, Albright P, et al. Rising syphilis infection among rural HIV-infected men who routinely received risk-reduction counseling: new challenges to HIV prevention in clinical care. J AIDS Clin Res. 2014; 5:384.
- 4. Lilian O, Magala I, William S, et al. The role of a special prevention of mother to child transmission clinic in improving prevention, care and treatment of infected and exposed infants; Taso Masaka experience. J AIDS Clin Res. 2014;5:333.
- 5. Birk TJ,Prolonged and shorter aerobic exercise training in HIV. J AIDS Clin Res. 2014; 5.
- 6. Jbilou J, Robertson SS, Jazebizadeh H, et al. Men-centered approaches for primary and secondary prevention of HIV/AIDS: A scoping review of effective interventions. J AIDS Clin Res. 2013;5:270
- Anígilájé EA, Dabit OJ, Ageda B, et al. The prevalence and predictors of HIV infection among children of mothers who missed prevention of mother to child transmission of HIV interventions in Makurdi, Nigeria. J AIDS Clin Res. 2013; 4:257.
- Horner P, Nassiri R. Social cultural stressors in Dominican republic HIV/AIDS prevention and treatment. J AIDS Clin Res. 2013; 4:249.
- 9. Tjen-A-Looi A, Naseer SN, Worthing AB, et al. Hypophosphatemic osteomalacia associated with tenofovir use in HIVinfected patients: A case series and review of the literature. J AIDS Clinic Res S. 2013; 4:242.
- 10. Nachega JB, Adherence to antiretroviral therapy for the success of emerging interventions to prevent HIV transmission: A wakeup call. J AIDS Clinic Res S. 2012; 4:8.
- 11. Hong SY, Knowledge of HIV transmission and associated factors among HIV-positive and HIV-negative patients in rural Kenya. J AIDS Clinic Res. 2012; 3:7.
- 12. Avery AK, Decreasing missed opportunities for HIV testing in primary care through enhanced utilization of the electronic medical record. J AIDS Clinic Res S. 2012; 4:170.
- 13. Rice E, Holloway I, Winetrobe H, et al. Sex risk among young men who have sex with men who use GRINDR, a smartphone geosocial networking application. J AIDS Clinic Res S. 2012; 4:6.
- 14. Frew P, Parker K, Horton T, et al. Assessment of a microbicide candidate among a diverse cohort of urban southern us women and their male sexual partners. J AIDS Clinic Res S. 2012; 4:5.

- 15. Ramjee G, Daniels B. Targeted combination HIV prevention packages to halt the global HIV epidemic. J AIDS Clinic Res S. 2012; 4:4.
- 16. Horton A. AIDS in black America: a study of the city of Chicago. J Addict Res Ther. 2012; 4:2.
- 17. Chamcha V. Probiotics based approaches to target mucosal compartments: Potential novel approaches to HIV vaccine development. J AIDS Clin Res. 2013; 7:148.
- 18. Moulignier A, Lafaurie M, Savatovsky J, et al. Back pain in HIV-infected patients may be due to spinal epidural lipomatosis. J AIDS Clin Res. 2016;6:e119.
- 19. Linguissi LSG. Prevention of mother-to-child HIV transmission. J AIDS Clin Res. 2015; 6:505.
- 20. Fuchs JD. Safety and immunogenicity of a recombinant adenovirus serotype 35-vectored HIV-1 vaccine in adenovirus serotype 5 seronegative and seropositive individuals. J AIDS Clin Res. 2015; 6:491.
- 21. NHabibzadeh. How can improve DNA vaccine modalities as a therapeutic approach against HIV infections? J AIDS Clin Res. 2015; 6:461.
- 22. Naik S, Das BR. New WHO guidelines: Implications on therapeutics and monitoring of HIV infections. HIV Curr Res. 2016;1:102.
- 23. Iyer AS, et al. Response to pneumococcal polysaccharide vaccination in HIV-positive individuals on long term highly active. Antiretroviral Therapy J AIDS Clin Res. 2015; 6:433.
- 24. Ma M, et al. Predictors of willingness of participate in HIV vaccine trials among African. Americans J AIDS Clin Res. 2015; 5:421.
- 25. Olanrewaju O. Willingness to participate in cardiovascular clinical research among African-Americans. J Clinic Res Bioeth. 2014; 6:361.
- 26. Nageswara Rao A. The pursuit of a HIV vaccine Trials, challenges and strategies. J AIDS Clin Res. 2014; 5:1-5.
- 27. Salah S. A novel approach to inhibit HIV-1 infection by actively neutralizing the antibodies of reverse transcriptase system. J AIDS Clin Res. 2014; 5:298.
- 28. Gouvêa AdFTB, et al. Long-term persistence of hepatitis a antibodies in pediatric HIV-infected patients after primary immunization: Association with immunological profile and response to revaccination. J AIDS Clin Res. 2014; 5:310.
- 29. Shete A, et al. Is prime boost strategy a promising approach in HIV vaccine development? J AIDS Clin Res. 2014; 5:295.
- 30. Van Regenmortel MHV. Paradigm changes and the future of HIV vaccine research: A summary of a workshop held in Baltimore on 20 November 2013. J AIDS Clin Res. 2014; 5.
- Desaint C., Long-term persistence of vaccine-induced HIV seropositivity in healthy volunteers. J AIDS Clin Res. 2014; 5:281.
- 32. Okpokoro E. Preparing for HIV vaccine trials in Nigeria: Building the capacity of the community and national coordinating, regulatory and ethical bodies. J AIDS Clin Res. 2014; 4:275.
- 33. Varela M. The current state of HIV vaccine research. J AIDS Clinic Res. 2013; 8:260.
- 34. Van Regenmortel MHV. An introduction to the current state of HIV vaccine research. J AIDS Clinic Res. 2012; 8: e002.
- 35. Kong L. Antigenicity and immunogenicity in HIV-1 antibody-based vaccine design. J AIDS Clinic Res. 2012; 8: e001.
- Vose M, Acanthamoeba keratitis in an HIV positive daily disposable contact lens wearer. J Clin Exp Ophthalmol. 2012; 6:3-5.
- 37. Santiago FV, Envelope gene evolution and HIV-1 neuropathogenesis. J Neuroinfect Dis S. 2015; 2: 456-458.
- 38. Musso C, Proximal tubule function and free water clearance: Comparison between healthy elderly and young HIV+ patients. Aging Sci. 2015; 1:3.
- 39. Horton A, AIDS in black America: A study of the city of Chicago. J Addict Res Ther. 2013; 4: 106.
- 40. Dhalla S, What are the current advances regarding HIV vaccines and HIV vaccine trials. J Bioanal Biomed. 2013;4: 148.
- 41. Bastian AR. Microbicides that can pop HIV-1. J Antivir Antiretroviral. 2012;6: 54-56.
- 42. Reeves RK. Mechanisms, consequences, and treatment of chronic inflammation in HIV disease. J Antivir Antiretroviral. 2010;6: 51-56.
- 43. Nguyen L, Prevalence of nocturnal oxygen desaturation in subjects with HIV infection. J AIDS Clin Res. 2014; 7.
- 44. Le Dû D, Maraviroc intensification in HIV-1 infected patients with persistent low level Viremia. J AIDS Clin Res. 2014;7: 54-56.

- 45. Jean Louis F, Low prevalence of cryptococcal antigenemia among patients infected with HIV/AIDS in Haiti. J AIDS Clin Res.2014;7: 35-37.
- 46. Nizami S, Evaluation of fib-4 index as a marker for hepatocellular carcinoma in HIV hepatitis C co-infection. J AIDS Clin Res.2016;7: 580.
- 47. Chatterjee A, Congenital cytomegaloviral infection causing severe pulmonary hypertension in a newborn with an HIV seropositive mother a case report from eastern India. J AIDS Clin Res. 2016;7: 578.
- 48. Laresgoiti E, Depressive symptomatology, tnf-a, and perinatal outcomes among HIV- seropositive pregnant women. J AIDS Clin Res. 2016;7: 577.
- 49. Mzingwane ML, Molecular characterization and HIV drug resistance patterns of HIV-1 variants in plasma and peripheral blood mononuclear cells sample pairs. J AIDS Clin Res. 2016;7:570.
- 50. Antonio MMJ, Clinical and epidemiological differences between women and men with HIV infection in Mexico. J AIDS Clin Res. 2016;7: 567.
- 51. Delavande A, The impact of repeat HIV testing on risky sexual behavior: Evidence from a randomized controlled trial in Malawi. J AIDS Clin Res. 2016;7: 564.
- 52. Schadé A, Mindfulness based cognitive therapy. J AIDS Clin Res. 2016;7: 562.
- 53. Gwadz M, Exploring factors associated with recent HIV testing among heterosexuals at high risk for HIV infection recruited with venue-based sampling. J AIDS Clin Res. 2016;7: 551.
- 54. Rico JC, The presence of a malignant comorbidity is a significant predictor of increased 30 day hospital readmission rates in HIV-1 infected individuals. J AIDS Clin Res. 2016;6: 549.
- 55. Upton RL, HIV prevention, infertility and concordance in partner selection among couples living with HIV and aids in rural and peri-urban contexts in Botswana. J AIDS Clin Res. 2016; 6.
- 56. Iwuji CC, The art of HIV elimination: Past and present science. J AIDS Clin Res. 2016;6: 544.
- 57. Pereira H, Sexual behavior and HIV testing practices among men who have sex with men in Portugal. J AIDS Clin Res. 2015;6: 532.
- 58. Goparaju L, Women want pre-exposure prophylaxis but are advised against it by their HIV-positive counterparts. J AIDS Clin Res. 2015;6: 526.
- 59. Hamdela B, Predictors of early antenatal care booking in government health facilities of hosanna town, Hadiya zone, south Ethiopia: Unmatched case control study. J AIDS Clin Res. 2015;6:525.
- 60. Patekar D, Prevalence of viral co-infections with ebv and cmv and its correlation with cd4 count in HIV- 1 serpositive patients. J AIDS Clin Res. 2015;6: 524.
- 61. Liu X, A quantitative exploration of health care workers' opinions and attitudes towards HIV infected co-workers and patients in Beijing, China. J AIDS Clin Res. 2015;6: 522.
- 62. Chakraborty A, Cytomegalovirus retinitis with multiple co infections in an HIV/AIDS patient having extreme low cd4 count: A case report and review of literature. J AIDS Clin Res. 2015;5: 521.
- 63. Srivastava S, To probe the conformational adaptability of conserved g-p-g-r segment in the v3 loop of HIV-1. J Antivir Antiretrovir. 2015;4:520.
- 64.
- 65. Takuva S, Durability of first line antiretroviral therapy: reasons and predictive factors for modifications in a swaziland cohort. J Antivir Antiretrovir 2012; 4:14-20.
- 66. Rockwood N. A comparative analysis of risk factors associated with renal impairment and highly active antiretroviral therapy. J Antivir Antiretrovir 2012; 4:21-25.
- 67. Navarro-Mercad. Long-term effectiveness of first-line antiretroviral theraphy in a cohort of HIV-1 infected patients. J Antivir Antiretrovir 2012; 4:26-31.
- 68. Parruti G, Efficacy of 1998 Vs 2006 first-line antiretroviral regimens for HIV infection: an ordinary clinics retrospective investigation. J Antivir Antiretrovir 2012; 4:32-37.
- 69. Yanagisawa N. HIV-infected men with an elevated level of serum cystatin c have a high likelihood of developing cancers. J Antivir Antiretrovir 2012; 4:38-42.
- 70. Haidara A. Drug resistance pathways and impact of protease mutation 110i/v in HIV- 1 non-b subtypes. J Antivir Antiretrovir 2012; 4:43-50.
- 71. Mishra KP. Plant derived antivirals: a potential source of drug development. J Virol Antivir Res 2013; 2:2.
- 72. Lisnica VJ. Modulation of natural killer cell activity by viruses. Curr Opin Microbiol 2010; 13.

- 73. Zaki MS, Occult hepatitis b among patients under hemodialysis at mansoura university hospitals: prevalence and risk factors. J Virol Antivir Res 2014; 3:1.
- 74. Liu TC, Kirn D. Gene therapy progress and prospects cancer: Oncolytic viruses. Gene Ther. 2008; 15.
- 75. Yamakawa K, Response-guided peg interferon a-2a monotherapy for hemodialysis patients with chronic hepatitis C. J Virol Antivir Res 2014; 3:1.
- 76. Lu LF, Liston A. MicroRNA in the immune system, microRNA as an immune system. Immunology 2009; 127.
- 77. Karbalaie Niya MH, Comparison of real-time rt-pcr assay with direct sequencing for detection of sensitivity or resistant to oseltamivir in influenza a/h3n2 viruses. J Virol Antivir Res 2014; 3:1.
- 78. Mallery DL, Antibodies mediate intracellular immunity through tripartite motif-containing 21 (TRIM21). PNAS USA, 2010; 107.
- 79. Russo RR. Phospholipase A2 crotoxin b isolated from the venom of crotalus durissus terrificus exerts antiviral effect against dengue virus and yellow fever virus through its catalytic activity. J Virol Antivir Res 2014; 3:1.
- 80. Randall RE, Good S. Interferons and viruses: An interplay between induction, signalling, antiviral responses and virus countermeasures. J Gen Virol 2008; 89.
- 81. Chheda P.Study of HIV-1 co-receptor tropism and resistance to integrase strand transfer inhibitors in the Indian patients for inducting new antiretroviral drugs in treatment regimens recipient. J Virol Antivir Res 2014; 3:3.
- 82. Sen GC. Viruses and interferons. Annu Rev Microbiol 2001; 55.
- 83. Zaki MES, Pilot Study of Epstein Barr virus Infection at the Onset of Acute Lymphoblastic Leukaemia in Egyptian Children. J Virol Antivir Res 2014; 3:3.
- 84. Tortorella D.Viral subversion of the immune system. Annu Rev Immunol 2000; 18.
- 85. Gutierrez JA. Vitamin D metabolites inhibit hepatitis c virus and modulate cellular gene expression. J Virol Antivir Res 2014; 3:3.
- 86. Welsh RM. Immunological memory to viral infections. Annu Rev Immunol 2004; 22.
- Sinclair J, Sissons P. Latency and reactivation of human cytomegalovirus. Journal of General Virology 2006; 87:1763-1779.
- Khanna KM, Immune control of herpes simplex virus during latency. Current Opinion in Immunology 2004; 16:463-469.
- 89. Shaheen M, Anti-rotaviral effects of calliandra haematocephala leaf extracts in-vitro and in-vivo. J Virol Antivir Res. 2015; 4:1.
- 90. Grmek MD. Les ruses de guerre dans l†Â™Antiquite. Rev Etud Grec 1979; 92:141-163.
- 91. Chanda SD. Cordycepin an adenosine analogue executes anti rotaviral effect by stimulating induction of type i interferon. J Virol Antivir Res 2015; 4:2.
- 92. Srivastava S, Kanyalkar M. To probe the conformational adaptability of conserved g-p-g-r segment in the v3 loop of HIV-1. J Antivir Antiretrovir 2012; 4:088-093.
- 93. Norris J. East or west? The geographic origin of the black death. Bull Hist Med 1977; 51:1-24.
- 94. Hadi QN. Correlation between the HBsAg Level and the peripheral blood lymphocytes profile in chronic hepatitis b patients from malaysia. J Virol Antivir Res 2016; 5:2.
- 95. Noorali S. Human microRNA-602 inhibits Hepatitis C virus genotype 1b infection and promotes tumor suppressor gene expression in a hepatoma cell line. J Virol Antivir Res 2016; 5:2.
- 96. Ma X. Development of an indirect-elisa to detect antibodies against porcine reproductive and respiratory syndrome virus nucleocapsid protein in gansu china. J Virol Antivir Res 2016; 5:2.
- 97. Aljarbou AN. Current prevalence of hbv and hcv seropositivity: the initiative for attentiveness and deterrence of viral hepatitis in the qassim region of saudi arabia. J Antivir Antiretrovir 2012; 4:75-79.
- 98. Brown JC. DNA zip codes in herpesvirus genomes. J Virol Antivir Res 2016; 5:2.
- 99. Jabareen A. Effect of extracts of passiflora edulis leaves on herpes viruses infection. J Virol Antivir Res.2:2.
- 100.Dimonte S and Babakir-Mina M. Variability and signatures of capsid amino acid of HIV-1 D-subtype from drug-naive and arv-treated individuals. J Virol Antivir Res 2016; 5:1.
- 101. Choi WJ. Adefovir plus entecavir therapy in chronic hepatitis b patients with treatment failure to lamivudine-entecavir sequential therapy: outcome at 2 years. J Virol Antivir Res 2016; 5:1.
- 102.Shrivastava KR. Assessment of T-cell immunoregulatory cytokine-patterns for liver fibrosis in chronic hepatitis b patients before and after interferon therapy. J Virol Antivir Res 2016; 5:1.

- 103. Mukherjee S. Protease inhibitors for recurrent hepatitis c after liver transplantation-when less is more. J Antivir Antiretrovir 2012; 4:1
- 104. Aljofan M. The era of scientific blossom. J Antivir Antiretrovir 2012; 4:1
- 105.Dong BJ. Safety and effectiveness of tenofovir/emtricitabine or lamivudine plus ritonavir boosted atazanavir in treatment experienced hiv infected adults at two urban private medical practices. J Antivir Antiretrovir 2012; 4:1-5.
- 106.Brown JC. Control of host gene expression by a herpesvirus transcription factor. J Virol Antivir Res 2015; 4:3.
- 107. Christdas J, Shakila H. Occurrence of escape favoring mutations in the targets of 2f5 and 4e10 antibodies of HIV gp41: a metadata analysis. J Virol Antivir Res 2015; 4:3.
- 108.Nurka T. Prevalence of viral hepatitis B and C markers in multitransfused patients with chronic kidney disease compared with the general population in Albania. J Virol Antivir Res 2015; 4:3.
- 109. Cola A. HIV Gp120 sequence variability associated with hand in Hispanic women. J Virol Antivir Res 2015; 4:3.
- 110.El-Wahab EWA. Seroprevalence, immunostatus and factors associated with blood borne viral infections among Egyptian municipal solid waste workers. J Virol Antivir Res 2015; 4:4.
- 111. Aseel DG. Two isolates of potato virus y (pvy) and the response of different potato cultivars against the viral infection. J Virol Antivir Res 2015; 4:4.
- 112. Shi C. The influence of porcine reproductive and respiratory syndrome virus infection on the expression of cellular prion protein in marc-145 cells. J Virol Antivir Res 2016; 4:4.
- 113. Streblow DN, Nelson JA. Models of HCMV latency and reactivation. Trends in Microbiology 2003; 11:293-295.
- 114. Turett GS. Vitamin D levels in an HIV-infected and uninfected cohort in New York City. J Virol Antivir Res 2013; 2:2.
- 115. Thorley-Lawson DA. Epstein a "Barr virus: exploiting the immune system. Nature Reviews 2001; 1:75-82.
- 116. Appolin CM, Ribavirin has an in vitro antiviral effect in rabies virus infected neuronal cells but fails to provide benefit in experimental rabies in mice. J Virol Antivir Res 2013; 2:2.
- 117. Thorley-Lawson DA. EBV the prototypical human tumor virus -just how bad is it? Molecular Mechanisms in Allergy and Clinical Immunology 2005; 116:251-261.
- 118. Kho MML, Gastro-intestinal involvement of primary varicella zoster virus infection in a renal transplant recipient. J Virol Antivir Res. 2004; 3:3.
- 119. Chheda P, Study of HIV-1 co-receptor tropism and resistance to integrase strand transfer inhibitors in the Indian patients for inducting new antiretroviral drugs in treatment regimens recipient. J Virol Antivir Res 2014; 3:3.
- 120. Aliyari R, RNA-based viral immunity initiated by the Dicer family of host immune receptors. Immunol Rev 2009; 227-176.
- 121.Coiras M. Understanding HIV-1 latency provides clues for the eradication of long-term reservoirs. Nat Rev Microbiol 2009; 7.
- 122. Gutierrez JA. Vitamin D metabolites inhibit hepatitis c virus and modulate cellular gene expression. J Virol Antivir Res 2014; 3:3.
- 123.Crotty S, Andino R. Implications of high RNA virus mutation rates: Lethal mutagenesis and the antiviral drug ribavirin. Microbes Infect 2002; 4.
- 124.Cullen BR. Five questions about viruses and microRNAs. PLoS Pathog 2010; 6.
- 125.Maselko MB. Basant, a polyherbal topical microbicide candidate inhibits different clades of both ccr5 and cxcr4 tropic, lab-adapted and primary isolates of human immunodeficiency virus-1 in vitro infection. J Virol Antivir Res 2014; 3:4.
- 126.Ding SW, Voinnet O. Antiviral immunity directed by small RNAs. Cell. 2007; 130.
- 127.Coppel E, BA randomized clinical trial of pegylated interferon for acute hepatitis c virus infection in active injection drug users. J Virol Antivir Res 2014; 3:3.
- 128. You DM, Twice daily dosing of telaprevir for treatment-naive and treatment-experienced patients with hepatitis c infection. J Virol Antivir Res 2014; 3:4.
- 129. Grijalva-Chon JM and Longoria CR. Viral threats in aquaculture: the battle continues. J Virol Antivir Res 2015; 4:1
- 130. Ahmed AM.Role of interleukin-10, interleukin-12 in the response prediction during combined peg-interferon-alpha 2a and ribavirin therapy in patients with chronic hepatitis C. J Virol Antivir Res 2015; 4:1.
- 131.Santiago F, Longitudinal analysis of cerebrospinal fluid and plasma hiv-1 envelope sequences isolated from a single donor with HIV asymptomatic neurocognitive impairment. J Virol Antivir Res 2015; 4:1.
- 132. Ahmad N. Influence of HIV-1 genetic variability on vertical transmission and pathogenesis. J Virol Antivir Res 2015;4:1.

- 133.FArir G. Griffiths in, alone and combined with all classes of antiretroviral drugs, potently inhibits HIV cell-cell transmission and destruction of CD4+ T-cells. J Antivir Antiretrovir 2012; 4:103-112.
- 134. Upton RL. HIV prevention, infertility and concordance in partner selection among couples living with HIV and aids in rural and peri-urban contexts in Botswana. J AIDS Clin Res. 2015; 6:526.
- 135.Seloilwe ES. Parent and youth communication patterns on HIV and AIDS, STIS and sexual matters: Opportunities and challenges. J Child Adolesc Behav. 2015; 3:203.
- 136.Goparaju L. Women want pre-exposure prophylaxis but are advised against it by their HIV-positive counterparts. J AIDS Clin Res. 2015; 6:52.
- 137. Indridason H. Long term nationwide analysis of HIV and AIDS in Iceland, 1983-2012. J AIDS Clin Res. 2014; 5:387.
- 138. Ahmad N. Influence of HIV-1 genetic variability on vertical transmission and pathogenesis. J Virol Antivir Res. 2015;4:1.
- 139.Saggurti N. Men's heavy alcohol use and risk of HIV acquisition and transmission to sexual partners within marriage in India. J Alcohol Drug Depend. 2014; 2:147.
- 140.Majelantle RG. Knowledge, opinions and attitudes towards HIV and AIDS among youth in Botswana. J Glob Econ. 2014;1:108
- 141.Pindani M. Perception of people living with HIV and AIDS regarding home based care in Malawi. J AIDS Clin Res. 2013; 4:201.
- 142. Johnbull OS. HIV and AIDS in Nigeria: Meeting the rural challenges. J AIDS Clin Res. 2013; 4:e111.
- 143.Rahman M, Genetic characterization of hepatitis C viruses in HIV positive people who inject drugs, Dhaka, Bangladesh. J AIDS Clinic Res. 2012; 3:165.
- 144.Ramovha R, The psychological experience of HIV and AIDS by newly diagnosed infected patients at hospital a of Vhembe district, Limpopo province. J AIDS Clinic Res S. 2016; 1:1.
- 145. Antonio MMJ, Clinical and epidemiological differences between women and men with HIV infection in Mexico. J AIDS Clin Res. 2012; 7:6.
- 146. Upton RL. HIV prevention, infertility and concordance in partner selection among couples living with HIV and aids in rural and peri-urban contexts in Botswana. J AIDS Clin Res. 2016; 6: 551.
- 147. Linguissi LSG, Prevention of mother-to-child HIV transmission. J AIDS Clin Res. 2015; 6: 526.
- 148.Bagchi S, Underutilization of statins for prevention of cardiovascular disease among primarily African-American HIVinfected patients. J AIDS Clin Res. 2015; 6.
- 149. Abiodun O, The effect of training on traditional birth attendants' PMTCT related knowledge and care practices in Nigeria. J AIDS Clin Res. 2015; 6: 499.
- 150.Pereira H. HIV prevalence and hiv-related sexual practices among men who have sex with men in Portuguese bathhouses. J AIDS Clin Res. 2015;6: 498.
- 151. Asare-Bempong G. Recruiting black men who have sex with men and women. J AIDS Clin Res. 2015; 6:415.
- 152. Chamroonsawasdi K, Monitoring and evaluation of a model development project and strategic campaign on HIV/AIDS prevention among Muslim communities in Thailand. J AIDS Clin Res. 2015; 5.