

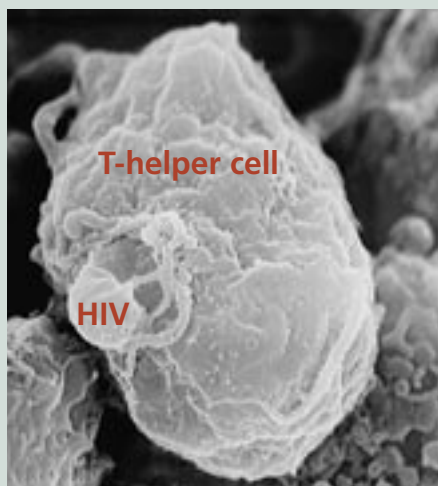
ACP SPECIAL REPORT

HIV/AIDS

Preventing Testing Treating



What is HIV/AIDS?



HIV infection is caused by the **Human Immunodeficiency Virus (HIV)**.

The virus attacks the immune system, gradually breaking it down and making the body more likely to get infections and certain cancers. When the virus has significantly damaged the immune system, certain conditions typically occur. At this advanced stage, the HIV-infected person is said to have Acquired Immunodeficiency Syndrome (AIDS).

HIV attacks the body by killing CD4 cells. Also known as “T-helper” cells, these help coordinate the immune responses that help fight off infections and other diseases. By doing this, HIV makes the patient more likely to get “opportunistic infections,” which

usually do not make healthy people sick. Opportunistic infections cause disease only in people with very weakened immune systems and include *Pneumocystis* pneumonia, ophthalmic CMV infections, toxoplasmic encephalitis, Kaposi’s sarcoma and others. The presence of one of these opportunistic infections in patients with HIV virus means the person has AIDS. In addition to infection, patients with AIDS can develop other conditions, including HIV dementia (a type of senility), various cancers and weakness and weight loss.

HIV is a global epidemic. The United Nations estimated that as of 2003, roughly 38 million people were living with HIV worldwide. In the United States, the Centers for Disease Control and Prevention (CDC) reports that in 2000, AIDS was one of the top three causes of death for African-American men between the ages of 25 and 44 and African-American women between the ages of 35 and 44. The CDC also notes that more than 859,000 cases have been reported in the United States through 2002.

If you suspect you might have HIV infection or AIDS, want to learn more about how to prevent this disease or are simply worried, use this guide and talk to your doctor, or call your public health department.

Protecting Yourself

page 3

Getting Tested

page 4

Methods of Treatment

page 6

Living With HIV/AIDS

page 7

Doctors for Adults

back cover

This ACP Special Report on HIV/AIDS is made possible by the American College of Physicians, the American Academy of HIV Medicine and Abbott Virology.



©2004 The StayWell Company
407 Norwalk St., Greensboro, NC 27407
www.StayWell.com All rights reserved.



Preventing HIV Infection

Protecting yourself from HIV is simple. Unfortunately, there is a lot of false information about HIV and AIDS, so it's important to separate truth from fiction. You **cannot** get HIV from:

- Working with people who have HIV
- Sweat, spit, tears, clothes, drinking fountains, phones, toilet seats or through sharing food
- Insect bites or stings
- Donating blood

HIV is spread through body fluids such as blood, semen, and vaginal and anal fluids. You can protect yourself from HIV by making sure you do not come into contact with these fluids.

HIV is most commonly transmitted through:

- Unprotected sexual contact (i.e., without a condom) with an HIV-infected partner. Sexual contact includes anal sex and vaginal sex.
- Sharing needles and other drug-injecting equipment with HIV-positive individuals.
- A woman can pass HIV to her baby during pregnancy, labor and delivery, or breast-feeding.

Here are the best ways to avoid HIV infection:

- Do not use drugs. If you do, do not

share needles, syringes or other equipment ("works").

- Do not share equipment for tattooing or body piercing.
- If you have sex outside of a mutually monogamous relationship, use a condom.
- Keep in mind that the only way to be completely certain is to abstain from sexual contact.
- If a pregnant woman's HIV is detected before she delivers, then she can be treated with medications and greatly reduce the risk of passing HIV to her baby.

Use male latex condoms consistently and correctly. Condoms must be used properly to protect against HIV. Roll the condom down the penis, leaving some air space at the tip. Use each condom only once. Do not use oil-based lubricants, condoms treated with Nonoxynol-9 or lambskin and other "natural fiber" condoms (which do not protect against HIV). Female condoms are also an option. (A polyurethane condom is an alternative, especially for those allergic to latex.)

However, keep in mind that condoms aren't perfectly safe because they can break during use. It's important to know that latex and polyurethane male condoms are the **only** birth-control products that protect against HIV and other sexually transmitted diseases.

How to Tell For Sure



It's often hard for doctors to diagnose HIV infection because some of the early symptoms (the first 2 to 4 weeks) can be very similar to flu or other common viral infections. More frequent or severe symptoms may not appear until several months or up to 10 years after the initial infection.

Some of the later symptoms include:

- Continually swollen lymph nodes (glands)
- Lack of energy
- Unexplained weight loss
- Frequent fevers and sweats at night
- Persistent or frequent yeast infections of the mouth or vagina
- Persistent or severe seborrheic dermatitis (a red rash on the face, scalp and chest with flaky skin)
- Infections of the pelvic region in women that do not respond to usual treatment
- Frequent or severe herpes infections, cold sores or "shingles"
- Trouble with memory or concentration

Since many people with early HIV infection have no symptoms, testing the blood for antibodies, the proteins that recognize the HIV virus, is used to diagnose the infection. Testing can confirm whether or not you're infected, and it can be the important first step toward starting a treatment plan if you test positive for the virus. With HIV, time is very important. These

Your confidentiality

A doctor or other health care provider can provide confidential testing. Many states now require the reporting of HIV-positive results to specified government agencies, but other organizations, such as insurance companies and employers, are not allowed to see your medical records unless you give them written permission to do so.

Most states provide anonymous testing sites where you can get tested without revealing your name. If you test positive, you may have to be tested again to confirm the diagnosis before beginning treatment. For more information, contact your local public health department or AIDS hot line.

antibodies appear in the blood usually within six weeks to six months after exposure to the virus.

Here are some of the most common ways to test the blood for HIV:

- The HIV ELISA or EIA tests look for HIV antibodies. The presence of these antibodies supports the presence of HIV.
- Home test kits are also available, but these collect only a blood sample that the user will need to send to a lab.



- There are now rapid HIV tests available that produce results within 20 to 40 minutes of testing. This test is a simple finger stick and is similar to the HIV ELISA test because it also looks for the presence of HIV antibodies.

Any HIV-positive test must be repeated to confirm results. The standard testing process is a screening test, such as the ELISA, with a positive result confirmed by repeating the test. If the positive test is confirmed, the Western Blot test is done next as final confirmation. Because it is possible for an HIV-positive individual to get negative results for the first 6 to 12 weeks following infection, it's important to know when the individual's last risky behavior occurred. If a test result falls within this early period, it should be repeated at 12 weeks.

Women, HIV and pregnancy

The Centers for Disease Control recommends that all pregnant women be tested for HIV infection. If a pregnant woman has HIV, she can be treated to improve her health and prevent her baby from getting HIV.

Babies born to HIV-positive mothers will often test positive for HIV at first, but that doesn't necessarily mean they're infected. Infants always begin life by sharing their mother's antibodies (but not necessarily their infections). Rapid testing should be done for women whose HIV status is unknown during labor or delivery.

If you are pregnant, see your doctor or clinic to find out about all of the tests (including HIV) that can be done at the start of prenatal care to improve your health and prevent harm to the baby. If you are planning a pregnancy, consider getting a test for HIV.

Taking Action

Although there is yet no cure for HIV infection, treatment with medications can delay the onset of AIDS, reduce symptoms and improve both the quality and length of your life.

If you're HIV-positive, it is important that you follow your doctor's directions closely. If you do, you could prevent serious health problems and delay the onset of AIDS.

Here are some steps to take to make your treatment more effective:

- Be an active partner with your doctor and health care team in managing your treatment. Keep all your scheduled medical appointments. Take notes, ask questions, read and learn more about HIV, and keep track of your medications and symptoms.
- Be sure to take every dose of all your medications. Because HIV can rapidly become resistant to drugs, taking all your medications every day is very important in preventing resistance to the drugs and fighting the virus's growth in your body.
- Your doctor may also tell you to get immunized against common infections, such as pneumonia and flu. Follow your doctor's directions.
- Avoid re-exposure to the virus.

HIV medicines

Most patients with HIV infection and AIDS will be prescribed a combination of drugs to fight the virus. This combina-



About AAHIVM

The American Academy of HIV Medicine (AAHIVM) is an independent organization of AAHIVM HIV specialists™ and others dedicated to advancing excellence in HIV/AIDS care. Through advocacy and education, AAHIVM is committed to supporting health care providers in HIV medicine and to ensuring better care for those living with AIDS and HIV disease. To find an HIV doctor or nurse in your area, visit www.aahivm.com and click on "Find a Provider" or call AAHIVM toll-free at 1-866-241-9601.

tion of drugs is known as HAART (highly active antiretroviral therapy). The use of multiple drugs has been shown to keep HIV from growing (and improve the immune system) and to delay or prevent resistance to the drugs.

In addition to drugs that fight the virus itself, a number of tested and approved drugs are used to treat and prevent the common and opportunistic infections that often occur with AIDS.

There are many "miracle cures" advertised on the Internet and elsewhere that have not been tested and approved by the U.S. Food and Drug Administration (FDA) and could not only be ineffective, but dangerous. It is important to ask your doctor about the other treatments.

Get Serious About Your Life



It's important to understand that HIV and AIDS are not a “death sentence.” With treatment, most people are able to live long lives with HIV/AIDS.

If you have HIV/AIDS, don't put yourself at risk

It's no secret that HIV weakens your body's defense system against disease. Risky behaviors, such as having unsafe sex or using unclean needles or works, can put you at risk for hepatitis and other infections of the bloodstream. And having unsafe sex puts you at risk for other sexually transmitted diseases (STDs) such as syphilis, gonorrhea and chlamydia. Because your immune system is already weakened, getting one of these infections is even more dangerous for you.

If you have HIV/AIDS, don't put others at risk

Since HIV is spread through body fluids such as blood, semen, vaginal and anal fluids, you can protect others from HIV by making sure they do not come in contact with these fluids.

- Do not share needles with others.
- Do not have sex (anal or genital) without a condom.

If you've been diagnosed with HIV infection, your doctor may suggest that you make some changes to your lifestyle. These may include advice on diet, exercise, smoking, drug use and preventing transmission to other people. You may

wish to join a support group in your area. Talking to others who are living with HIV or AIDS can be very helpful as a source of information and encouragement.

More information

An abundance of reliable, helpful information on HIV and AIDS is available to you.

■ **Web sites and toll-free phone lines**

- CDC National HIV/AIDS Hotline:
1-800-342-AIDS (24 hours)
1-800-344-SIDA (24 hours, Spanish)
1-800-243-7889 (TTY)
www.cdc.gov/hiv/dhap.htm
- HIV/AIDS National Resources Center:
1-800-362-0071
- Project Inform National HIV/AIDS Treatment Hotline: 1-800-822-7422
www.projectinform.org
- AIDS Clinical Trials Information Services (ACTIS): 1-800-874-2572; www.actis.org

■ **Other information sources:**

- MedlinePlus:
www.nlm.nih.gov/medlineplus/aids.html
- Gay Men's Health Crisis: www.gmhc.org
- National Minority AIDS Council:
(202) 483-6622; www.nmac.org
- Women Alive: 1-800-554-4876
www.women-alive.org
- National Lesbian and Gay Health Association:
(202) 939-7880

What is a doctor of internal medicine?

Doctors of internal medicine, often called “internists,” focus on adult medicine. They care for their patients for life—from the teen years through old age. Internists have had special study and training focusing on the prevention and treatment of adult diseases. At least 3 of their 7 or more years of medical school and postgraduate training are dedicated to learning how to prevent, diagnose and treat diseases that affect adults. Internists are sometimes referred to as the “doctor’s doctors” because they are called upon to act as consultants to other physicians and help solve puzzling diagnostic problems.



Why choose an internist for your health care?

An internist, just like a family or general practitioner, can serve as your primary care doctor. But internists are unique because they focus on adult medicine. Internists don’t deliver babies, they don’t treat children and they don’t perform surgery. They do, however, have wide-ranging knowledge of complex diseases that affect adults. With in-depth training in adult medicine, an internist is your best choice to help you navigate the increasingly complex world of medical care.

An internist can treat you for something as routine as the flu or fatigue, or provide in-depth care for diseases such as diabetes, depression, cancer or heart disease. Internists often coordinate the subspecialists a patient might see in the process of treating an illness. Internists’ patients like knowing that they have a relationship with a physician who is equipped to deal with whatever problem the patient may have—no matter how simple or complex.

What is the American College of Physicians?

American College of Physicians (ACP) is the nation’s largest medical specialty organization and second-largest physician group. Its membership includes more than 115,000 internal medicine physicians, related subspecialists and medical students. Internists treat the majority of adults in the United States. The ACP mission is to enhance the quality and effectiveness of health care by fostering excellence and professionalism in the practice of medicine. ACP is headquartered in Philadelphia, with an office focusing on public policy in Washington, D.C.

For more information about internists and internal medicine, visit www.doctorsforadults.com.

This Special Report courtesy of:

ACP
AMERICAN COLLEGE OF PHYSICIANS
INTERNAL MEDICINE | Doctors for Adults