

FACT SHEET HIV Information

This fact sheet is designed for people who want to find out more about HIV. It is specifically written for people who have been diagnosed with HIV. This is sometimes called being HIV antibody positive or living with HIV.

HIV is the virus which if left untreated, leads to AIDS. Treatment for HIV, using a group of drugs called antiretroviral therapy, is very effective and will stop the development of AIDS and will reduce HIV transmission.

► What is HIV?

HIV is short for the Human Immunodeficiency Virus. Once HIV enters the body it multiplies and targets the immune system, breaking down its ability to fight disease and infections. The amount of virus is measured using a test called the 'viral load test' or sometimes referred to as an NAAT or PCR test. Viral load goes up soon after infection with HIV. It then goes back down and in the untreated patient rises again and damages the immune system by infecting CD4 cells, also known as T cells. Damage to the immune system can be measured by testing your CD4 cell counts: CD4 cells are specialised white blood cells that are vital for a healthy immune system. HIV infection causes CD4 cell levels to fall over time and if HIV is left untreated, this will lead to very low CD4 cell counts and AIDS illnesses will develop. AIDS stands for Acquired Immune Deficiency Syndrome. AIDS develops when the immune system can no longer fight disease or infection.

▶ Treatment for HIV

HIV can be treated effectively. A range of drugs is now available that can control the virus and limit the amount of damage it can do to your immune system. These are called antiretroviral medications and most Australians with HIV can now have a near normal life expectancy due to these drugs. The aim of this treatment is to reduce your viral load (the amount of HIV in your blood). Ideally you would like your viral load to be so low that HIV cannot be detected in a regular viral load test. Treatment also allows your immune system to repair any damage that has occurred (by increasing your CD4 cell count). So starting treatment earlier, before damage occurs, is preferable to delaying treatment. Antiretroviral medications are usually given as a combination involving three different types of drugs. Some combinations are put into the one daily tablet.

▶ When should I start treatment and how long will it take?

The decision of when to start treatment is an individual one. The trend in Australia now is for people to start treatment earlier rather than delaying treatment. Along with your viral load, your doctor will perform a CD4 cell count or T-cell test. This indicates how much damage HIV has done to your immune system. Antiretroviral therapy can restore immune function, but as a general rule, the lower your CD4 cell count is the more important starting treatment becomes. Once you start treatment, it is essential that you take the prescribed amount of medication at the times indicated. Skipping doses is dangerous as it allows the virus to develop resistance and then the treatment will not work. Treatment is not a cure. Currently, once you start treatment, you will need to stay on treatment permanently. This is why the decision to start is such an important one, and one you may want to delay if other important things are going on in your life. You should discuss these issues with your HIV doctor.

► Monitoring your health

Whether you are on treatment or not, it is crucial to monitor your health through blood tests and having check-ups with your doctor to see how your body is coping with HIV. Soon after starting treatment, you will want to see that the treatment is working for you. This will be evidenced by a rise in your CD4 cell counts and a drop in your viral load and hopefully getting an undetectable viral load. Once you are stable on treatment, monitoring will be less frequent, but regular check-ups will be required to make sure your CD4 counts have gone up and your viral load remains undetectable. If your viral load goes up, it is an indication that the virus has developed resistance to the treatment you are on and you will need to change the treatment combination you are taking.

► How is HIV spread?

HIV can be spread through unsafe sex (sex without a condom), through sharing of needles and other drug-injecting equipment, and through other blood-to-blood contact. It can also be transmitted from mother to baby at or soon after birth or through breastfeeding, if the mother is not on treatment. Having a sexually transmissible infection (STI) makes the HIV viral load go up. If an uninfected person has an STI it also makes it more likely for that person to contract HIV if they are exposed to HIV. It is important to use condoms during sex, avoid sharing druginjecting equipment and to prevent any blood-to-blood contact. HIV is not transmitted through touch, kissing or sharing eating utensils or food. Viral load is an indicator of infectiousness. HIV is more easily transmitted at higher viral loads. Viral load can go up rapidly, without making you feel ill, so relying on what your last HIV viral load result was to prevent transmission is risky.

Your doctor

Your doctor has an important role to play. Your doctor is a good person to talk to about HIV in a private and confidential manner. She or he may be authorised to prescribe antiretroviral drugs. Authorised prescribers have undergone training on how to manage HIV, which allows them to prescribe antiretroviral drugs subsidised under the Pharmaceutical Benefits Scheme (PBS). If your doctor cannot prescribe HIV medications, then she or he can refer you to a doctor who can. If necessary, the Australasian Society for HIV Medicine (ASHM) can help you and your doctor locate a HIV specialist.

Confidentiality

Your HIV test result is personal. You do not have an immediate obligation to tell anyone, although it is a legal requirement in NSW and Tasmania to inform sexual partners of your status prior to having sex. In all states and territories you are expected to take precautions to prevent transmission of HIV to others through sexual or blood contact. You cannot donate any blood or body fluids and the Australian Defence Force tests all recruits. If you are a health care worker with HIV, you must not perform exposure-prone procedures. There is no legal requirement to disclose your HIV status to any of your treating doctors, nurses, dentists or healthcare providers. If you do decide to disclose to any of these professionals, they are required to keep that information confidential unless you give your consent or disclosure is required by law, court order or in exceptional circumstances.

Someone to talk to

You may like to start thinking about who you can talk to. It is important to ask questions and find the kind of information and support that suits you. HIV/AIDS organisations offer a range of information and services including counselling, peer support or simply someone to talk to confidentially. They can also refer you to other services that may be more suitable. Remember, you are not alone. These are organisations and groups that exist to provide you with information and support.

Useful contacts for information referral and support

ACT

AIDS Action Council of the ACT

Westlund House 16 Gordon St, ACTON Ph 02 6257 2855 www.aidsaction.org.au

PLWHA/ACT

Westlund House 16 Gordon St, ACTON Ph 02 6257 4985 Support@aidsaction.org.au NEW SOUTH WALES

AIDS Council of NSW - ACON

414 Elizabeth St Surry Hills, 2010 Ph 02 9206 2000 1800 063 060 www.acon.org.au **NSW HIV/AIDS Information Line**

Ph 02 9332 9700 1800 451 600

Positive Life

Level 5, 414 Elizabeth St Surry Hills 2010 Ph 02 9206 2177 1800 245 677 www.positivelife.org.au

Positive Hetrosexuals - Pozhet

Redfern Health Centre 103 Redfern St Redfern 2016 Ph 02 9395 0444 1800 812 404 www.poshet.org.au Multicultural HIV and Hepatitis Service – MHAHS

Level 1, Building 12 Cnr Gross St & Missenden Rd Camperdown, 2050 Ph: 02 9515 5030 1800 108098 www.multiculturalhivhepc.net.au

NATIONAL TREATMENT INFO

NAPWA Treataware Project Ph: 02 8568 0300 1800 259 666 http://napwa.org.au/treataware http://napwa.org.au/contact

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Arabic, Chinese, Indonesian, Khmer, Maori, Spanish, Thai and Vietnamese. Print more copies from:

www.ashm.org.au/hiv-patient-sheet