

- **WHAT IS HIV/AIDS?**

Can you explain the difference between HIV and AIDS?

It is quite simple. **HIV** is the abbreviation for **Human Immuno Virus**; in other words, HIV is a virus that targets the human immune system. Once the virus enters your body and infects the **CD4 cells**, you are known to be infected with HIV; but that does not mean you have AIDS, so be careful when referring to someone as 'having AIDS'. **AIDS** is the abbreviation for **Acquired Immune Deficiency Syndrome**. In other words, once your immune system is depleted, there are no more CD4 cells to fight the virus and your body is open to all kinds of infections. The good news is that **Anti-Retroviral Treatment (ART)** **blocks** the HIV virus from further attacking your immune system. When this happens, your immune system gets a chance to repair itself. Fortunately, you no longer have to wait for your CD4 cell count to drop before you can start treatment. You can now start ART immediately after testing HIV positive.

- **HOW DO I CONTRACT HIV?**

1. Activities that put you at risk for HIV Infection

Sexual contact that involves semen, pre-cum, vaginal fluids or blood. Direct blood contact, particularly through sharing injection drug needles or 'works' (cotton, cookers, etc). Infections due to blood transfusions, accidents in health care settings or certain blood products. This is possible, although extremely rare, in the United States. Mother to baby (before or during birth, or while breastfeeding through breast milk)

2. Sexual intercourse (vaginal and anal)

Unprotected anal and vaginal intercourse are high-risk activities. In the penis, vagina and anus, HIV may enter through cuts and sores (many of which would be very small and hard to notice), or directly through the mucus membranes.

3. Oral sex (mouth-penis, mouth-vagina)

Oral sex is considered a low risk practice, but it's not completely risk-free. The virus can't survive well in the mouth (in semen, vaginal fluid or blood), so the risk of HIV transmission through the throat, gums, and oral membranes is lower than through vaginal or anal membranes. Having an STI, cuts or mouth sores, recent dental work or bleeding gums may increase risk for HIV infection during oral sex.

4. Sharing injection needles or works

Sharing needles or other materials used for injecting is considered a high-risk practice. Injection needles can pass blood directly from one person to another if you share them. If a person with HIV injects with a needle then shares it with another person, the second person is at very high risk for getting HIV.

5. Mother to Child

Mother to child transmission is now rare in the U.S. and other high-income countries because pregnant women who are HIV-positive are normally given medications to prevent the foetus from getting infected. However, it is possible for an HIV-infected mother to transmit HIV before or during birth or through breast milk. Breast milk contains HIV, and while small amounts of breast milk do not pose significant threat of infection to adults, it is a risk for infants.

- **HOW DO I PROTECT MYSELF FROM CONTRACTING HIV?**

- 1. Abstinence**

This is the only guarantee that you won't contract HIV or STIs, but there are other risks of contracting HIV and that is through needle prick injuries, being exposed to bodily fluids through assisting, for example, at accident scenes, through using drug users' contaminated needles, etc. The use of gloves can prevent work-related injuries like cleaning up someone's bodily fluids. Discarding contaminated materials, the correct way will prevent risk of exposure to bodily fluids or needle prick injuries.

- 2. Being faithful**

Although this is not a guarantee, it is important to know your HIV status and be faithful to the same partner. Having multiple sexual partnerships is a huge risk for HIV and STI transmission.

- 3. Regular condom uses during sex**

Condoms act as a barrier against HIV infection. When used correctly and 100% of the time, condoms will prevent exposure to the HI-virus and protect you from contracting HIV or STIs.

- 4. HIV counselling and testing**

Getting to know your HIV status is very important, because if you are tested HIV positive, you will be referred for further care and antiretroviral treatment. If you test HIV negative and were exposed to someone's bodily fluids less than three months ago, you will be asked to return for another HIV test within 3 months after your last exposure to that person's bodily fluids.

- 5. Treatment of sexually transmitted infections and other vaginal inflammation not caused by STIs.**

When the vagina or penis is infected with an STI or there is vaginal inflammation, the risk of lacerations is much higher, creating an entry point for the HI-virus. When an infection is treated, the risk is lower.

- 6. Voluntary Medical Male Circumcision**

This is the full removal of the foreskin. When an HIV negative male is fully circumcised, his risk of contracting HIV is up to 60% lower. Other health benefits include lowered risk of certain STIs; and being circumcised is more hygienic and reduces his female partner's risk of contracting cervical cancer.

- 7. Post exposure prophylaxis (PEP)**

This is antiretroviral treatment taken after a person was accidentally (or intentionally) exposed to another person's bodily fluids, varying from semen to vaginal fluids or blood. NB: This treatment must start within 48 to 72 hours after exposure.

- 8. Prevention of Mother to child transmission**

This is also known as PMTCT and is a method used to reduce the risk of HIV transmission from a mother who is infected with HIV to an infant. HIV can be transmitted from a mother to an infant before, during, and after labour.

- 9. Pre-exposure prophylaxis**

This is also known as PrEP and is an antiretroviral treatment that involves taking a pill every day and is used by people who are at risk of contracting HIV. The pill contains two drugs, tenofovir and emtricitabine, known as truvada.

- 10. Microbicide ring (Dapivirine)**

This is a matrix ring (silicon) that is inserted inside the vagina. The ring consists of an antiretroviral drug referred to as Dapivirine that is slowly released in the vaginal area with the objective of preventing HIV transmission. Recent study findings have proven that the ring reduces a female partner's risk of contracting HIV by up to 30%. The ring is not available as yet and still needs approval from the USA FDA and SA Medicine Control Council before it can be made available.

- **I AM HIV POSITIVE, NOW WHAT?**

- 1. Take time...**

An HIV diagnosis may be unexpected. Or may have been something you were worrying about for a long time. Even though it may not feel like it, your health will be better now you know your HIV status. This is because you can now get the right monitoring and treatment. If you had not found out, your health would have just got worse. Finding out you are HIV positive changes how you feel about your life. It is likely to change your relationships with other people. You have the time to work this all out. It will probably take a while for the news to sink in. Some aspects of being HIV positive take time to come to terms with.

- 2. Things will get easier...**

Even if you feel worried, frightened, upset or angry now, it will get easier. You will still be able to do all the things you wanted to do before you learned that you were HIV positive. HIV for most people can be easily managed and treated. This doesn't mean that life will always be easy or that HIV should be taken lightly. It does mean that if you are careful, you can live a long and healthy life. Treatment (called ART) is highly effective and generally easy to take. ART is now routinely recommended for anyone who is HIV positive. Effective ART also makes it difficult to pass HIV to other people.

- 3. Moving forward**

Although finding out you are HIV positive is a shock, it will get easier. Modern ART means that you can still do everything you planned before you found out you were positive. You can also have as long and as healthy a life as if you were HIV negative. However, you became positive – and many people never know this – it is better to move forwards than to look back. Decide what is right for you and your life now. Getting information about your choices will usually help.

- 4. Connect to others...**

It is difficult to cope with HIV on your own. If you don't know anyone else who is positive, find out about HIV support groups. Your clinic should know about these. Even if you only go a few times, the chance to talk to other people who have been through a similar experience will help. You can also connect online or with a telephone helpline. HIV organisations often have newsletters or other publications that can help you keep up to date about treatment. Learning about your care can also make you feel more in control.