





## HIV: BASIC FACTS

HIV stands for the Human Immunodeficiency Virus. The main way HIV is spread is through unprotected sex. Babies can also get HIV from their HIV-positive mothers during pregnancy, birth and breastfeeding.

UNPROTECTED SEX



## HIV IN THE BODY

HIV weakens the immune system - the body's defence force that protects the body against infection and disease. It hijacks the immune system's CD4 cells and turns them into factories to make more copies of HIV. In the process of making more HIV, the CD4 cells are destroyed. When the immune system is weakened, the body can't fight infections and diseases, such as TB.

IMMUNE SYSTEM IS WEAKENED



## PREVENTING HIV INFECTION

HIV can be prevented by practising safe sex - using a condom correctly every time. HIV-positive mothers can enrol in the Prevention of Mother-to-Child Transmission (PMTCT) programme, which involves taking ART, practising safer sex and exclusive breastfeeding. Adhering to the PMTCT programme reduces the chance of passing HIV on to the baby.

SAFE SEX

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Please take a chance on these antiretroviral (ARV) pills. Look at me. Four years of treatment and I am still here. I know now that I really need these pills. I have seen the difference it has made in my life and to my body. The pills have made living with HIV become so easy."

TREATMENT

ARVs



Saidy Brown



*Antiretroviral treatment (ARVs) reduce the amount of HIV in the body, which results in viral load suppression. This means there is only a low amount of HIV in the body. If you are virally suppressed you can enjoy a healthy and productive life. You also have less chance of passing HIV on to your partner. Start taking ARVs today and begin your journey to viral suppression.*



## Antiretroviral Treatment (ARVs)

*The medicine that suppresses or controls HIV is called antiretrovirals or ARVs for short. ARVs work by stopping HIV from hijacking the body's CD4 cells to make more HIV. ARVs do two things:*

- 1. They stop HIV from making more copies of itself;*
- 2. They stop HIV from destroying CD4 cells (the immune system).*

*This is why when ARVs are taken properly, the viral load goes down, which means there is less HIV in the blood and body. And, at the same time, the CD4 count goes up and the immune system recovers and becomes strong again.*

*There are many different types of ARVs. To suppress HIV properly and stop it from multiplying, three different ARVs must be taken together.*

*Sometimes the three ARVs used to suppress HIV are combined in one pill that is taken once a day, this is called a Fixed-Dose Combination (FDC). The three ARVs can also be taken as two or three separate pills, taken once or twice a day.*



The medication is what saved my life. When I first started treatment my CD4 count was very, very low. I was bedridden. But last month, when I went to the clinic I found that my CD4 count was up and perfect. I feel like a young person again. It's not like I'm an old man that needs a walking stick to help him like before. I'm alive again. Nothing can stop me."

CHOOSE LIFE



**Thomas Mashego**

*The combination of different ARVs is called Antiretroviral Treatment (ART) or an HIV treatment regimen. These different medicines put up roadblocks that stop HIV to make sure that it cannot hijack CD4 cells.*

*The ARVs stop HIV when:*

- 1. It is entering the CD4 cell;*
- 2. It is inside the CD4 cell;*
- 3. It is ready to release the new copies of HIV from the CD4 cell.*

## The benefits of ARVs

*Taking your treatment every day at the same time can suppress HIV. Taking treatment consistently and correctly is called adherence – you must adhere to your ARV treatment regimen. Adherence to ARVs leads to viral suppression. This is when the amount of HIV in the blood has dropped so much – to less than 50 copies of HIV per millilitre of blood – that it cannot be detected by a viral load test. This does not mean that HIV is cured but that there is only a small amount of HIV in the blood.*

*What happens when you are virally suppressed?*

- HIV is not harming the body, which means you can live a healthy and productive life.*
- There is less risk of developing drug resistance and having to switch to new second-line HIV treatment, which can have more side effects.*
- There is less chance of passing the virus on to a sexual partner.*
- There is an opportunity for you to have HIV-negative children without passing HIV on to your partner.*



**For more information on adherence to ARV treatment get a copy of the Zenzele 'Living with HIV: Reaching Viral Load Suppression' Brochure.**

**Fagmedah Miller**



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*Sometimes it is very difficult taking that tablet every night. It's like, 'do I have to,' but then I remember how sick I was before I started taking ARVs, and then I basically jump up and go to take my medication because I know if I don't take it, I will die quicker with HIV.”*

**FAMILY**



**UNDERSTANDING**



*Starting ARV treatment early, as soon as possible after you have tested positive, means ARVs can get to work quickly before HIV gets out of control, which means better health overall.*

## When should you start taking ARVs



*Starting treatment sooner, and not waiting to be sick or have symptoms is better. South Africa has a Test and Treat Policy, which means that if you test positive for HIV you can start taking ARVs immediately, no matter what your CD4 count is. You can talk to your healthcare worker to find out what your treatment regimen will be.*

*Once you start taking ARVs, you must take them every day at the same time. It is a lifelong commitment. It is important not to skip or stop taking ARVs. Skipping or stopping can lead to drug resistance.*

*Get support to start treatment. Find a family member or friend who can be your treatment buddy to provide support. Talk to your healthcare worker if you are not sure whether you can stick to taking your ARVs.*

### Start treatment today!

## Will disclosing my HIV-positive status help with adherence?

*Telling a person that you trust like a close family member, friend, teacher, pastor or a healthcare worker about your HIV-positive status will help you feel loved, accepted and supported. Getting support and encouragement to take ARVs will help you to adhere and reach viral load suppression.*

### How to disclose

*Disclosure is a personal choice and often a difficult decision to make. Speaking to a counsellor at the clinic may be helpful or you can use the five “W” questions as a guide:*

*Who to tell*

*What to tell them and what is the expected response*

*When to tell them*

*Where to tell them*

*Why tell them*

*You should think about how disclosing might affect you and the person you are telling. How a person reacts will depend on what kind of relationship you have. You should be prepared to answer any questions or concerns the person you are telling might have.*



*For more information on support and disclosure get a copy of the Zenzele ‘Living with HIV: Getting Support’ brochure.*

## Know your ARVs

ARVs have generic names and brand names, for example Paracetamol is the generic name and Panado is the brand name. It is important to know the difference.

The generic name of the ARV medicine is the ingredient or recipe it is made of.

The brand name is the name that the pharmaceutical company gives it.

Two different pharmaceutical companies can make the same ARV with the same ingredients. Each of them will give their ARVs different brand names. The medication might be different colours or shapes, and come in a different package, but they have exactly the same ingredient in them.

If you are not sure whether you have the correct ARVs ask your healthcare worker or call the AIDS Helpline: 0800 012 322.

**\*\*The most important thing is the generic name of the ARV medicine\*\***

Generic Name	Brand Name
<b>Dolutegravir</b>	<b>Tivicay</b>
<b>Abacavir</b>	<b>Ziagen</b>
<b>Ritonavir</b>	<b>Norvir</b>
<b>Efavirenz</b>	<b>Sustiva</b>
<b>Emtricitabine</b>	<b>Emtriva</b>
<b>Lamivudine</b>	<b>Epivir</b>
<b>Lopinavir</b>	<b>Kaletra</b>
<b>Nevirapine</b>	<b>Viramune</b>
<b>Tenofovir</b>	<b>Viread</b>
<b>Atazanavir</b>	<b>Reyataz</b>

**FIXED DOSE COMBINATION (FDC) ARVs = 2 or more ARVs in 1 pill**

<b>Emtricitabine + Tenofovir</b>	<b>Truvada</b>
<b>Lopinavir + Ritonavir</b>	<b>Aluvia of Kaletra</b>
<b>Tenofovir + Emtricitabine + Efavirenz</b>	<b>Atripla, Atroiza, Odimmune, Tribuss, Trutiva</b>
<b>Tenofovir + Lamivudine + Dolutegravir</b>	<b>Kovatrax, Acriptege, Dovimil, TELADO, VOLUTRIP, Telatri, EMDOLTEN, Deltevir</b>

## First-line ART Regimens

There are many different types of ARVs and that means there are different treatment regimens. When you start taking ARVs, your healthcare worker will discuss which regimen is best for you.

### Treatment regimens for all people initiating ART, 15 years and older.

**Regimens for all people testing positive for HIV including:**

- > Pregnant & breastfeeding women
- > People with Hepatitis B
- > People with TB

- **Tenofovir (TDF) + Emtricitabine (FTC) + Efavirenz (EFV)**  
*Usually given as 3 ARVs in 1 pill taken once a day (FDC)*  
**OR**
- **Tenofovir (TDF) + Lamivudine (3TC) + Efavirenz (EFV)**  
**OR**
- **Tenofovir (TDF) + Emtricitabine (FTC) + Dolutegravir (DTG) +**  
*Available from 2019*  
*Not for females of child bearing age who might fall pregnant (not using family planning methods)*

**If Efavirenz is not right for someone it will be replaced with Nevirapine.**

**If Efavirenz and Nevirapine are not right for someone, they will be replaced with Lopinavir/Ritonavir:**

- **Tenofovir (TDF) + Lamivudine (3TC) + Nevirapine (NVP)**
- **Tenofovir (TDF) + Emtricitabine (FTC) + Lopinavir/Ritonavir (LPV/r)**  
**OR**
- **Tenofovir (TDF) + Lamivudine (3TC) + Lopinavir/Ritonavir (LPV/r)**

**If Tenofovir is not right for someone, it will be replaced with Abacavir:**

- **Abacavir (ABC) + Lamivudine (3TC) + Efavirenz (EFV)**  
**OR**
- **Abacavir (ABC) + Lamivudine (3TC) + Nevirapine (NVP)**





## Tips for taking ARVs

*Taking ARVs is a lifelong commitment and that might feel overwhelming sometimes. But there are real steps you can take that can help you to take your ARVs every day, at the same time, to keep HIV under control and reach viral load suppression:*

- **Use a 7-day pill box to keep ARVs organised. Make time once a week to refill the box for the week ahead.**
- **Setting an alarm, or a reminder, on a cell phone and taking the ARVs straight away when it goes off.**
- **Setting a reminder on a cellphone or using a wall calendar as a reminder to return to the clinic for more ARVs a week before the medication runs out.**
- **Choosing a regular daily activity to help you to remember to take the ARVs, like brushing teeth, or when a favourite TV show or radio programme starts.**
- **Keep a treatment diary. Enter the name of each ARV. Include the dose, number of pills to take, and when to take them. Record each ARV as it is taken.**
- **Plan ahead for changes that might be coming up, like weekends, going home or going on holiday. You should make sure you have enough ARVs to last the whole time you are away.**
- **Get a reliable treatment buddy – someone who can remind you to take your ARVs.**
- **Disclosing – telling someone about your HIV status can help you feel loved, accepted and supported.**
- **Talk to your healthcare worker about your treatment if you are not sure of your ARVs or if you are struggling to take your treatment.**
- **Join or start a support group for people living with HIV. These can be based at clinics, churches, schools and in the community.**
- **If you have been on treatment for over a year and you are virally suppressed you can join an adherence club at your clinic or in your community.**

## Don't let the fear of side effects stop you from taking **ARVs**

*Many people are scared to take ARVs because they have heard bad stories about their side effects. When you first start taking ARVs you might experience side effects, but not everybody does. Two people taking the same medication might experience different side effects. Often side effects are not permanent. They usually last for two to four weeks while your body is getting used to the ARVs. Even if side effects are experienced, it is important not to skip or stop taking the ARVs. It is best to speak to a healthcare worker about steps that you can take and medication that can help manage side effects. Sometimes the healthcare worker will swap an ARV in the treatment regimen for a different one that the body handles better depending on how severe the side effects are.*

### What if I skip a dose?

*Take the missed dose as soon as possible, unless it is almost time for the next dose. In that case, the next dose must be taken and treatment continued as usual. Never take a double dose to make up for the missed dose!*

### What if I vomit after taking ARVs?

*If you vomit less than an hour after taking your ARVs, you should take the dose again. If vomiting continues please consult the nurse or doctor.*

### Should ARVs be taken with or without food?

*It is best to take ARVs as advised by your healthcare worker.*

Short-term side effects can include:

- **Tiredness**
- **Nausea (feeling sick)**
- **Vomiting**
- **No appetite**
- **Diarrhoea (running stomach)**
- **Headache**
- **Fever**
- **Muscle pain**
- **Dizziness**
- **Insomnia (sleeplessness)**
- **Change in body shape**

## Becoming resistant to ARVs

*Missing treatment – skipping doses or stopping ARVs – can lead to drug resistance. This means that the ARVs can no longer suppress HIV. If ARVs are not taken properly the level of the ARVs in the blood get low and HIV takes the chance to make changes to itself that can cheat the ARVs. If this happens, other ARVs need to be taken, these ARVs are called second-line treatment. If you become resistant to second line treatment, then treatment becomes difficult.*

*This is why it is essential to adhere to the prescribed treatment regimen.*

*ARVs cannot cure HIV, they can only suppress or control the virus. ARVs are the only effective way to suppress HIV infection. Since the South African government introduced ARVs into hospitals and clinics, the number of AIDS-related deaths has gone down, and fewer people are sick with HIV-related illnesses. If you have tested HIV-positive and are not on ARVs, you should visit a clinic and start treatment today.*



***Do it for yourself and accept your HIV-positive diagnosis***

***Know that you are not alone,  
Know that you have support.***

***You have the choice to live.***

***Choose life because you can.***

***ARVs allow you to live a long and healthy life.***

***So, look beyond your diagnosis.***

***And commit to a solution for positive living.***

***Initiate and adhere to ARV treatment.***

***Live better. Do more. Inspire others.***

***Zenzele! This is your life.***

***Your dreams and goals matter.***

***Don't ever give up on them because of an HIV-positive diagnosis.***

***Your status does not determine your future.***

***Do not wait.***

***There is no time to lose.***

***Don't hide away any longer.***

***Stand tall and leave your mark.***

***Start treatment today.***

***Adhere to treatment and follow-up with clinic visits.***

***It is not a punishment, it is the key to your health and future.***

***A key that enables you to do everything you planned.***

***Zenzele! The Future is ours!***



The 'Zenzele Living with HIV' publication range includes the following brochures :



1 TREATMENT



2 DISCLOSURE



3 ADHERENCE



4 PMTCT



5 LOVE AND SEX



6 NUTRITION AND LIFESTYLE



7 ADOLESCENTS AND HIV



8 AGEING WITH HIV



9 UNDERSTANDING TB



10 WELCOME BACK

*If you are living with HIV  
You are not alone. You can get help and support.  
To find a Facebook support group write to  
ask@brothersforlife.co.za or send us a message via our  
page [www.facebook.com/BrothersforlifeSA](http://www.facebook.com/BrothersforlifeSA) and we can  
introduce you to a group moderator. You can also visit  
[www.brothersforlife.mobi](http://www.brothersforlife.mobi)  
[www.thefutureisours.co.za](http://www.thefutureisours.co.za)*

*For youth and adolescent support visit  
[www.facebook.com/BWiseHealth](http://www.facebook.com/BWiseHealth)*

*There are also many experienced counsellors that  
can help you at the organisations listed below.  
All calls are free and counsellors are available  
24 hours a day.*

**AIDS Helpline 0800 012 322**  
**LifeLine 0861 055 555**  
**Childline 0800 055 555 for children**  
**and teenagers under 17 years**  
**Momconnect \*134\*550#**

*If you are looking for HIV support services in  
any part of the country visit  
[www.healthsites.org.za](http://www.healthsites.org.za)  
to find a support group in your area.*

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