Fact Sheet HIV overview



HIV (human immunodeficiency virus) is the virus that, if untreated, can lead to AIDS (acquired immune deficiency syndrome). When well, the body has an immune system that fights infections effectively. HIV attacks the immune system and replicates itself in immune cells. If untreated, it gradually overpowers the immune system leaving the body vulnerable to a range of infections.

Effective treatments have been developed that block HIV replication, preventing immune damage and HIV-related illness. Once treatment has begun it must be maintained throughout a person's life.

Is HIV the same as AIDS?

HIV is the virus that causes immune damage, and AIDS is the cluster of illnesses that occur as a result of that damage. People with HIV who take effective therapy are unlikely to develop AIDS.

How does HIV cause AIDS?

Inside the body are billions of cells with different jobs. Some of these cells, called CD4 cells, help the body stay healthy by fighting off disease. HIV replicates itself in CD4 cells, gradually killing them off, so that over time, the body is no longer able to fight disease. When a person with HIV starts getting the range of illnesses associated with immune deficiency – called 'opportunistic infections', he or she has AIDS.

Without treatment, people with HIV will eventually develop AIDS, though this may take ten years or more to occur. Effective anti-HIV treatment, however, prevents this from occurring.

How does anti-HIV treatment work?

Anti-HIV treatment, also known as 'antiretroviral therapy' or ART, stops HIV from replicating, which prevents the immune damage that leads to AIDS. The treatment involves a combination of anti-HIV drugs used together to suppress the virus in the body. These drugs can cause side effects, and must be taken for life.

What is HIV 'viral load'?

'Viral load' is a measure of HIV in an individual's bloodstream. Viral load tests count the number of HIV replications in each cubic millilitre of blood. The lower the viral load, the lower the chance of disease progression. The aim of anti-HIV treatment is to suppress viral load to undetectable levels (levels too small for the tests to count).

'Undetectable viral load' does not mean that a person is cured – he or she needs to keep taking treatment to keep the HIV suppressed – but it is a good sign that immune damage is not occurring.

Is there a cure for HIV?

There is no cure, but effective anti-HIV treatment will prevent the immune damage that causes disease and will reduce the risk of infecting sexual partners.

How is HIV transmitted?

HIV is transmitted through penetrative sex (vaginal or anal), blood-to-blood contact, or breastfeeding. HIV can be present in four kinds of body fluid:

- Blood
- Semen (cum)
- Vaginal fluid
- Breast milk.

Activities such as unprotected sex (sex without a condom), and sharing needles or syringes are the most common means of HIV acquisition. Blood transfusions in countries where the blood supply is not safe, or other invasive medical procedures with improper sterilisation of equipment, can transmit HIV. (The blood supply in Australia is deemed to be safe.)

HIV can also be acquired by a baby during pregnancy, birth or breastfeeding, however this can be prevented by effective anti-HIV treatment and other strategies to minimise the risk of transmission to the baby.

Oral sex is classified as a low risk (but not 'no risk') activity for HIV transmission. You cannot get HIV by hugging or kissing, by shaking hands, or by sharing food or toilet seats.

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Should I have an HIV test?

HIV is relatively rare in Australia but there are some circumstances that place you at increased risk of HIV acquisition:

- If you are a man who has sex with men, or a gay man, and you have ever had unprotected anal sex (anal sex without a condom)
- If your sexual partner has HIV, and you have ever had unprotected sex with him or her
- If you have had unprotected sex (vaginal or anal) with a person from a country that has high HIV prevalence, such as a country in Africa (particularly sub-Saharan Africa), the Caribbean, Cambodia, Thailand, Burma or Papua New Guinea
- If your current sexual partner has recently travelled to a high prevalence country and may have had unprotected sex there
- If you have had unprotected sex in Africa, Eastern Europe, South East Asia or Papua New Guinea with a commercial sex worker
- If you have ever shared injecting equipment.

If any of these risk factors apply to you, you should have an HIV test. Sexually active gay men, or men who have sex with men, are recommended to have an HIV test at least once a year. Current guidelines recommend that if you have had unprotected sex with a partner whose HIV status you do not know, you should have an HIV test.¹ Once you know your HIV status, future testing would depend on a personal risk assessment.

How and where can I get tested for HIV?

You can attend a family planning clinic, sexual health clinic or a GP to have an HIV test. The healthcare worker will ask you some questions to gauge your level of risk of HIV before arranging a blood test. The results usually take a few days to come back. Rapid HIV testing, or 'point of care' HIV testing, is now being trialled in various locations in Sydney and elsewhere in Australia for men who have sex with men. A result is available within 30 minutes, but needs to be confirmed by a blood test. For more information visit the Ending HIV website: http://endinghiv. org.au/nsw/test-more/all-about-hiv-testing/.

My test has come back positive. What now?

HIV is not a death sentence, but it can be a confronting diagnosis. Your doctor will tell you about treatment options, give you some written information, talk to you about safe sex, and help you find somebody to talk to about your feelings.

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Your doctor will also arrange a follow up appointment with you, and refer you to a specialist for counselling and potential treatment. You do not have to make any decisions about treatment immediately, however evidence now shows that there are benefits of starting ART as soon as someone is diagnosed with HIV.² You can discuss your options for treatment with the specialist and make an informed decision about if and when to start treatment.

You may feel shocked and scared by your diagnosis. It's a big thing to take in. Talking to a close friend, parent or counsellor can help to explore all your feelings about having HIV. The important thing to remember is that most people with HIV in Australia live long, healthy lives, but you will need to take some special care of yourself from now on.

How can I avoid HIV transmission?

Avoiding HIV transmission is everybody's responsibility. You can protect yourself and your partner(s) from HIV infection by using condoms when you have vaginal or anal sex, and by not sharing needles or injecting equipment. Check out our male condom and female condom fact sheets for details on how to use condoms correctly.

If you have had a slip up with condoms and either you or your partner has HIV, post-exposure prophylaxis (PEP) can lower the risk of transmission.

What is PEP? How does that work?

PEP (post-exposure prophylaxis) is a four-week course of anti-HIV drugs that may stop HIV infection if it is started soon after exposure to HIV.

To use PEP you have to move fast. Call 1800 PEP NOW (1800 737 669) to find out how to access it in your area. To be most effective treatment should begin as soon as possible after unsafe sex in which exposure to HIV was likely, but can be used up to 72 hours afterwards.

You can get PEP from sexual health clinics, emergency departments and some specialist GPs. PEP can cause mild side effects, such as nausea and fatigue, so sometimes anti-sickness medications are also given. The doctor will ask you some questions to assess your risk of contracting HIV before giving you PEP. PEP is not 100% effective at preventing HIV.

I've heard about PrEP – is that an option for me?

PrEP (pre-exposure prophylaxis) is a new HIV prevention method whereby people who are currently HIV negative, but are at high risk of acquiring HIV, take a daily pill to reduce the risk of becoming infected with HIV.



PrEP contains two antiviral medications and can be highly effective in preventing HIV infection. However, it is currently difficult to obtain as it is not yet TGA-approved or PBS-listed in Australia. You may be able to access PrEP via a clinical research trial, or from a specialist GP or sexual health physician. For more information visit the Ending HIV website.

If I go to a clinic will they tell my parents?

No. According to the law you can ask for and agree to medical care for yourself once you understand what the care is for, why you need it and what the effects might be. Information the health staff receive from you or discuss with you at a sexual health clinic is completely private and confidential and cannot be shared with your parents or people you know. To make sure, you can tell the clinic that you do not want your parents to know. It is illegal for a health worker to disclose information to another person regarding your HIV/AIDS testing or results unless there are exceptional circumstances.

HIV is a notifiable disease. This means that laboratory staff are legally required to tell NSW Health about new cases. This information is confidential and is used for public health planning and to prevent further spread. You can get information on STIs and having a sexual health check up by contacting the Family Planning NSW Talkline on 1300 658 886.

For more information

- Contact the Family Planning NSW Talkline on 1300 658 886 or go to www.fpnsw.org.au/talkline
- National Relay Service 133 677
- Visit your nearest Family Planning NSW clinic (www.fpnsw.org.au/clinics) or your local GP
- For PEP Information, call 1800 PEP NOW (1800 737 669)
- www.acon.org.au/hiv/HIV-Basics
- www.endinghiv.org.au

References

- 1. National HIV Testing Policy Expert Reference Committee. National HIV testing policy: indications for HIV testing. [Online, 2013] Available at: http://testingportal.ashm.org.au/hiv/indications-for-hiv-testing. Accessed on 8 December 2015.
- 2. US Department of Health and Human Services. National Institute of Allergy and Infectious Diseases. Starting antiretroviral treatment early improves outcomes for HIV-infected individuals. [Online, May 2015] Available at: http://www.niaid.nih.gov/news/newsreleases/2015/Pages/START.aspx. Accessed on 8 December 2015.

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