LIVING in the wreckage of my future

Richard S. Ferri

So here goes the deal. My name is Ric Ferri. I have a ton of degrees and honors for my work in HIV disease. I have written for many HIV journals and magazines. I was president of the Association of Nurses in AIDS Care and went on to become president of the HIV/AIDS Nursing Certification Board, which credentials nurses as experts in AIDS care. I have also been a loud mouth and pain to many people in the area of HIV primary health care because I practice HIV medicine, write about HIV medicine, and am living with AIDS. As an HIV-positive AIDS medical provider my view of the world is a little different than most of the talking heads I sit on “expert” panels with around the world. So there you have the basics.

Addicts have a great way of living in fear of the future and making a mess of it. Why do you think I drank and slammed meth? Anything to escape today and avoid tomorrow. However, my new pills still sit in their nice sanitary bag from the pharmacy.

Living in the wreckage of my future is a nice comfortable place to hang out. I get to worry about what has not happened yet and build up enormous fantasies about the disaster that is certainly lying in wait. It is also comforting to worry and lets my mind wander back to why I bothered to get sober.

But I am also excited in my own way. While I am enormously thankful for 13 very long years on the same meds - which is totally unheard of - I know it is time to change. My old pill buddies have finally decided to smack me down with low T cells, paralyzing fatigue, and muscle wasting. But what the heck. I am told it is no big deal. Like hell it isn’t. It is a big deal. I have jumped over both sides of the HIV pill bottle too many times. I not only prescribe these medications, I take them. I may be many things, but I am not a fool. Life on HIV meds can be hard. Change is scary.

Now off to sneak a peek at my new pill bottles and decide if I dare unleash them from their bag. Ah, what the hell. Let’s em out and see what happens.

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His blog is posted on www.POZ.com (Blog adopted with some changes)

Visit our web site: www.camcrwp.com

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Changing Your HIV Treatment Regimen

How will my doctor and I know what medications to use next? Before changing your regimen, your doctor will try to find out why your current one is not working. Your doctor will evaluate your adherence, the regimen’s tolerability, and drug interactions. Whether you and your doctor decide to change your therapy and what new medications you will take will depend on why your current treatment is failing.

What is adherence? Adherence refers to how closely you follow (adhere to) your treatment schedule. If your regimen is failing because you cannot adhere to it, you and your doctor should discuss why you are having difficulty taking your medication and what you can do to improve your adherence. Your doctor may change your regimen to reduce the number of pills you take or how often you take them.

What is tolerability? Tolerability refers to how many and what types of negative side effects you experience while taking your medications. If the side effects are severe, you may need to change your regimen. Your doctor will ask you what side effects you have and how long you have had them. You and your doctor will decide whether to treat the side effects or to change your HIV medications.

What are drug interactions? HIV medications may interact with other medications you are taking. This may reduce the effectiveness of the medications or increase the risk of negative side effects. You and your doctor should review all of your medications, including over-the-counter medications and herbal remedies. You should also review whether your medications be taken with food or an empty stomach.

Changing Regimens. If your regimen is failing and you and your doctor have ruled out adherence, tolerability, and drug interactions, you should consider changing your regimen. Before changing HIV medications, talk with your doctor about –

• HIV medications you have taken before
• The strength of the new medications your doctor recommends
• Possible side effects of the new medications
• How well you will be able to adhere to the new regimen
• The number of HIV medications that you have not yet used

Your doctor will confirm that your regimen is failing with additional viral load tests and CD4 counts. You should also be tested for drug resistance while you are taking the failing regimen. In general, your new treatment should include three or more medications. You and your doctor will choose the medications based on your medication history, results of resistance testing, and side effects you have experienced. If you have already taken many of the FDA-approved HIV medications, your doctor may recommend a new medication currently under investigation.

This information is based on the U.S. Department of Health and Human Services’ Guidelines for the Use of Antiretroviral Agents in HIV-1-Infected Adults and Adolescents (available at http://aidsinfo.nih.gov).

KYLE FURNITURE MAKES GENTEROUS DONATION

KYLE Furniture Warehouse has donated cozy new furniture to decorate “The Neighborhood,” a private meeting place for Ryan White clients. Please stop by on your next clinic visit, check out the décor, and ask about our new support group. Thank you, Kyle Furniture, for making this possible!

Why you need antibiotics when your CD4 Count is low

Lisa Robinson, PharmD

CD4 cells, also called “T cells” or “CD4+ T” cells, are white blood cells that fight infection. HIV destroys these cells, making it harder for your body to fight these infections and for your HIV medications to be effective.

A “CD4 count” is the number of CD4 cells in a sample of blood. When the cell count becomes too low, germs that wouldn’t normally cause health problems can make you sick. Your doctor will prescribe antibiotics because they can help strengthen your body’s ability to ward off illnesses.

The antibiotics that you are prescribed will depend on your CD4 count. If it is less than 200, your doctor will start you on an antibiotic called Bactrim®, also called Septra® or sulfamethoxazole/trimethoprim. The Bactrim® will keep you from getting a strain of pneumonia called PCP (pneumocystis pneumonia). Pneumonia is a lung infection that can be very dangerous.

If your CD4 count is less than 50, your doctor will give you two of these antibiotics, azithromycin or clarithromycin. These drugs will keep you from getting pneumonia from a germ called MAC (Mycobacterium tuberculosis). If you have allergies to one of these antibiotics, there are others that you can take.

After your CD4 cell count has stayed within normal range for three months, your body will be strong enough to fight germs on its own without antibiotics.

Always remember that it is extremely important to keep taking your HIV medications. HIV meds help keep your immune system strong and your disease under control.

Lisa Robinson is a PGY1 Pharmacy Practice Resident at CAMC.

Take the test!

The decision to be tested for HIV is the first step in taking responsibility for yourself and the health of others with whom you may be intimately involved.

HIV testing locations

Many testing sites offer free testing, but some charge a fee. Some locations require an appointment; others accept walk-ins. Call ahead to be sure! On the Internet you can find a list of test sites in your area by entering your zip code. Go to www.hivtest.org.

By phone, you may call:

WV AIDS/STD Hotline: 1-800-642-8244

1-877-565-4423

National HIV/AIDS Hotline: 1-800-342-2437

Your local county health department

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Please stop by on your next clinic visit, check out the décor, and ask about our new support group. Thank you, Kyle Furniture, for making this possible!
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My old pills are like annoying friends that I never thought would desert me, but they have. They were the demons I knew well. I could dance with those devils very nicely.

However, my new pills still sit in their nice sanitary bag from the pharmacy.

So here I am in the panic of what is yet to be. My meds are still covered in paper, and I glance at them like they may try to attack while I am not looking. Well, they just might. If you are taking HIV meds you know exactly what I am talking about. You just never know when they might turn on you and bite you in your T cells.

Here are some tips for better control:

- Talk with your doctor about your lifestyle. He or she can design a treatment plan that works best for you. It’s easier to fit medications into your life instead of organizing your life around your medications.

- Understand your medication regimen before you start it. Talk to your doctor, nurse or pharmacist about medication instructions, including side effects. Ask questions and get detailed explanations until you are satisfied and understand the answers.

- Organize your medications. Pillboxes or empty prescription bottles can hold one or two weeks’ supply of pills. Some pillboxes have different compartments for morning, noon, evening and bedtime doses.

- Develop a system of reminders for when to take your medications. You can make a daily checklist and mark off each dose as you take it, or use alarms, beepers, or electronic planners.

- Plan ahead for any changes in your normal routine, such as vacations, weekends or holidays. Be sure to take enough medications and refill prescriptions with you. Be prepared to adjust your dosage times, as your eating and sleeping routines may change.

- Be prepared to take your medications at any time. Keep bottled water or other beverages in your car, office or handbag.

Check My Meds can keep you informed about whether the drugs you are taking interact with each other, or interact with certain foods and cause a bad reaction in your body. You can create a list of your drugs and the system will generate your personal drug interactions report. You can then save your list to update for future interactions checks.

Check My Meds

www.aidsmeds.com/cmm

Check My Meds

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Carrie E. Jeffers, PharmD

The introduction of Highly Active Antiretroviral Therapy (HAART) has added years to the lives of HIV-infected people. The benefits are remarkable, but not trouble-free. One of the most difficult problems is trying to keep track of multiple medications, taken at different times throughout the day. Taking your medications correctly (called “adherence”) can be an overwhelming task. Missing only one dose can help lead to drug resistance, which can result in limited treatment options. This is why sticking to your prescribed treatment regimen is important.

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