



US ban on visitors with HIV *could end soon*

WASHINGTON (AP) — A two-decade ban on people with HIV visiting or immigrating to the United States may end soon through a Senate bill aimed at fighting AIDS and other diseases in Africa and other poor areas of the world.

The U.S. is one of a dozen countries — including Sudan, Saudi Arabia, Libya and Russia — that ban travel and immigration for HIV-positive people.

Even China, said Sen. John Kerry, D-Mass., recently changed that policy, deciding it was “time to move beyond an antiquated, knee-jerk reaction” to people with HIV.

“There’s no excuse for a law that stigmatizes a particular disease,” Kerry said Tuesday at a speech to the Center for Strategic & International Studies HIV/AIDS Task Force. Even people with avian flu or the Ebola virus have an easier time than those with HIV when it come to applying for visas, he said.

Kerry and Sen. Gordon Smith, R-Ore., are trying to repeal the ban, first implemented in 1987 and confirmed by Congress in 1993. The two have attached their measure to legislation — which the Senate may pass this week — that would provide \$50 billion over the next five years to fight AIDS and other diseases in Africa and other poor areas.

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Foreign citizens, students and tourists can apply for a difficult-to-obtain special waiver for short-term visits, but an HIV-positive person has little chance of obtaining permanent residency.

Under current law, HIV is the only medical condition explicitly listed under immigration law. The Kerry-Smith provision would make HIV equivalent to other communicable diseases where medical and public health experts at the Health and Human Services Department — not consular officials at U.S. embassies — determine eligibility for admission.

Those with HIV seeking legal permanent residency would still have to demonstrate they have the resources to live in this country and would not become a “public charge.”

The HIV ban was “adopted during a time of widespread fear and ignorance about the HIV virus,” said Allison Herwitz, legislative director of the Human Rights Campaign, the nation’s largest gay and lesbian civil rights group.

Among the consequences, experts on HIV and AIDS who are themselves infected have been unable to attend conferences in the U.S. Students and refugees in the country who may be at risk of infection have been reluctant to seek testing or treatment.

“Health care professionals, researchers and other exceptionally talented people have been blocked from the United States,” some 160 health and AIDS groups said recently in a letter urging Congress to end the current policy. “Since 1993, the International Conference on AIDS has not been held on U.S. soil due to this policy.”

Herwitz said some HIV-positive people seeking visas lie on their applications and then don’t bring their medications. “It’s not only wrongheaded and discriminatory, but can also cause people to not tell the truth.”

Both President George H.W. Bush and President Clinton sought to ease the policy and in 2006 the current President Bush asked the Homeland Security

Department to streamline the waiver process. Congress so far has not gone along. There’s still opposition.

Sen. Jeff Sessions, R-Ala., may offer an amendment to eliminate the Kerry-Smith provision from the Senate bill. Sessions cited Congressional Budget Office estimates that the new immigrants coming in under the relaxed policy could cost the government more than \$80 million over a 10-year period. “Most people just don’t want to talk about that.”

Sessions said the Health and Human Services Department already has considerable flexibility to grant entry visas.

The measure would offset the costs of new immigrants by raising the price of applying for a visitor’s visa by \$1 for three years and then \$2 for the next five years.

The House version of the Africa AIDs bill does not have the travel and immigration provision, but advocates said it will be included in the final version of the bill that goes to the president.

Rep. Barbara Lee, D-Calif., is sponsoring companion legislation in the House.



For more information contact us in complete confidence.

Call toll free from anywhere in New Zealand

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Sexual Dysfunction linked to *Poor Treatment Adherence*



HIV-positive people with sexual dysfunction are less likely to adhere to their antiretroviral (ARV) treatment regimens, according to a study published in the May 2008 issue of *AIDS Patient Care and STDs*.

There have been few studies examining the prevalence of sexual dysfunction—which can include problems with libido, erections or orgasms—among people living with HIV. Though certain risk factors for sexual dysfunction, such as depression and smoking, are common among people with HIV, studies have yet to determine whether HIV itself, or the medications used to treat it may be associated with a greater risk of sexual dysfunction.

To explore these potential associations, Maria Paola Trotta, MD, from the Istituto Nazionale per le

Malattie Infettive in Rome, and her colleagues surveyed 612 people living with HIV on ARV treatment about their emotional, physical and sexual well-being. The majority, 72 percent, were men. The average age of the participants was 37 years, and their average CD4 count was 543.

Trotta's team found that 21 percent of the participants reported some degree of sexual dysfunction, and 6 percent had moderate to severe dysfunction. Though the participants were not formally assessed for clinical depression or anxiety, those who reported having worse emotional well-being were not more likely to report having sexual dysfunction. Neither drug nor heavy alcohol use was associated with sexual dysfunction, nor

was CD4 count, age, the specific ARVs being used or the duration of ARV therapy.

Participants who reported more ARV side effects, however, and those who reported fat accumulation in their guts were more likely to report sexual dysfunction. People who reported having sexual dysfunction, especially those in whom the dysfunction was moderate or severe, were also more likely to report skipping or missing ARV doses. Trotta's team found that people with sexual dysfunction were likely to blame the antiretroviral drugs for the problem, and so they hypothesized that this could have reduced a person's motivation to remain adherent.

The authors did not report whether the use of antidepressant medications, which can lower libido and delay ejaculation, had an impact on sexual functioning in this study.

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To have a **free confidential test** just drop in
to our discreet K-Rd Clinic (part of Kiwi Health)
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between 10am - 5pm**

or if you would like to book a time please
call the clinic on **3090-230** or

0800 HIV-LINE



* *Koha appreciated* *



Designer
Hair Sytlist

Event Promoting HIV Awareness

On Saturday 4th October over 20
Stylists from all over Auckland
City will congregate at David Playle's
salon in Canada Street, just behind
Karangahape Road in Auckland.

The discerning public will be invited to
have their hair styled, cut and designed
for absolutely FREE. To qualify for this
free offer an HIV test is offered prior to
the hair cut.

This is a unique way of bringing HIV
awareness to people and promoting the
information to best protect ourselves
and sexual partners from HIV
transmission.

The HIV test we will use is the new
Canadian "Insti" test and results are
immediate. Trained staff will be on
hand for information, support, and
assistance where required.

Watch this space for further information*



Pan Pacific Conference gathers steam as Ministers agree to attend



On Tuesday 2nd September, Body
Positive will host HIV+ people from
all over the Pacific region. Delegates
from Australia, Samoa, Fiji, Tonga,
Papua New Guinea, American Samoa,
Solomon Islands, and further afield

have registered to meet in Auckland to
discuss the progress HIV+ people have
made in their respective home countries
in combating stigma and discrimination,
securing treatment options, and human
rights. The conference will be hosted at
the University of Otago, in their Queen
Street, Auckland premises. Contributors
from Auckland, Massey, La Trobe
(Melbourne) and UNITEC Universities
will upskill delegates in a range of
skillsbuilding workshops and delegates
will have a chance to experience
Auckland's warm hospitality.

Minister Winnie Laban (Minister of
Pacific Islands) will open the conference
on Tuesday 2nd September and
Minister Chris Carter will close the
conference on Friday 5th.

For all enquiries telephone Ron Graham
on 09-309 3989 at Body Positive Inc.

Chlamydia and Gonorrhoea in MSM with Newly Diagnosed HIV

Sexually transmitted infections (STIs)
are important risk factors for HIV
infection. Ulcerative STIs, such as herpes,
significantly increase the risk for HIV
acquisition, but the association with
nonulcerative STIs, such as gonorrhoea and
chlamydia, is not as strong. Nevertheless,
these infections are prevalent among men
who have sex with men (MSM) and are
frequently asymptomatic. Consequently,
the CDC recommends annual screening
for gonorrhoea and chlamydia among all
sexually active MSM, independent of HIV
status.

To examine the frequency of gonococcal
and chlamydial infection among MSM
being tested for HIV at STI clinics,

investigators from the San Francisco
Department of Public Health studied data
from 6864 MSM who were not previously
known to be HIV infected and who were
tested for HIV at clinic visits between
January 2004 and
December 2006.
The men were also
tested for rectal,
pharyngeal, and
urethral gonococcal
and chlamydial
infections based
on the types of sexual behavior reported,
regardless of condom use.

Three percent of MSM were classified as
having newly diagnosed HIV infection.

**In this San Francisco study,
38% of MSM had gonorrhoea,
chlamydia, or both at the
time of HIV diagnosis.**

These men were 2.4 times more likely
than HIV-negative MSM to be infected
with gonorrhoea (26% vs. 11%) or
chlamydia (19% vs. 8%); most of the STIs
were rectal infections (53% for gonorrhoea
and 92% for
chlamydia).
Approximately
58% of the HIV-
infected men
with gonorrhoea
and 37% of those
with chlamydia

received same-day treatment because of
symptoms or reported contact with the
infectious agents. based on these findings,
the authors have instituted presumptive
gonorrhoea and chlamydia treatment at

their STI clinic for all MSM with newly
diagnosed HIV infection.

Comment: Some readers may be surprised
to learn that, although HIV is recognized as
an STI, most STI clinics did not routinely
test for HIV until recently. The data
presented in this paper suggest that MSM
with newly diagnosed HIV are likely to also
have gonorrhoea, chlamydia, or both, and
the investigators propose that presumptive
therapy be given without waiting for
the results of gonorrhoea or chlamydia
testing. The strategy is appealing and may
make sense in STI clinics that have large
populations of MSM, but it remains to be
proven as effective from a public health
standpoint.

— Carlos del Rio, MD

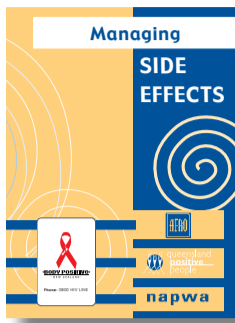
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Briefs

Managing Side Effects



A new publication licensed to Body Positive from the Australian Federation of AIDS organisations dealing with side effects and how to manage them is now available free of charge. For your copy, phone Body Positive 0800 HIV LINE

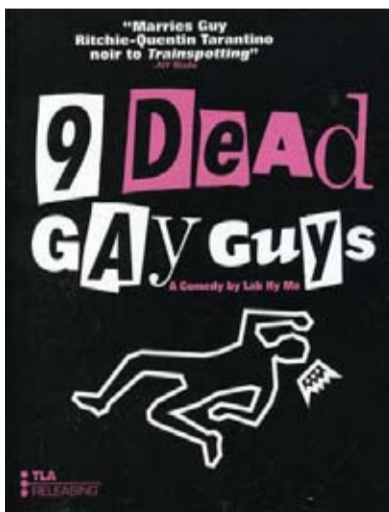
Pharmacy Charges Dropped

Grafton Pharmacy in Auckland no longer charge prescription fees for anti retroviral medications and will courier prescriptions anywhere in the Auckland region for a 5 dollar fee.

WANTED!!

Participants for a study examining the effects of lipodystrophy as a result of taking HAART medication for HIV infection management. The study examines how to physiological changes you have experienced impact upon your psychosocial functioning. A one-off questionnaire is required for involvement. If you are interested please contact Sarah Fuhrmann (MSc Student - Psychological Medicine, Auckland Hospital) on 021-256 5303 or sai.fuhrmann@gmail.com or Professor Keith Petrie on kj.petrie@auckland.ac.nz

Movie & Pizza Afternoon



Movie featured
 { NINE DEAD GAY GUYS }
 4pm-Sunday, August 10th
 * Come along for a relaxing afternoon at Body Positive house.
 * Koha appreciated

SOCIAL WORKER

Every person living with HIV has access to the capable services of two social workers at Body Positive. If you need help or know someone who might need help, please contact Craig or Glen at Body Positive Inc.

Phone 09-309 3989



K Road Clinic-AQUAMID

A permanent treatment for lipoatrophy (facial wasting). This clinic operates in our K Road Clinic on a Saturday once a month. Funding available for those living on a WINZ benefit. Please phone Craig at Body Positive Inc.

Phone 0800 HIV LINE



TRAVEL INSURANCE

Buy your Travel insurance from **Mike Henry** Agent Body Positive, whether you are Positive or Negative, travelling to Sydney or the Seychelles just call 0800 HIV LINE for a travel insurance quote. (When you buy from us you help support our work + you get a good deal!)

Call 0800 HIV LINE



VITAMINS

Body Positive has fantastic Swisse brand vitamins available to members for only \$7.00! (Usually over \$20) Swisse Women's Ultivite Multi vitamins & Swisse Men's Ultivite Multi vitamins. Both with the highest quality ingredients that will give you a kick! Drop by BP House or call **0800 HIV LINE**

RECYCLED MEDICATION

If you have unused medication or no longer need left over medication, please either return your unused medication to your prescribing physician or send it to us at:

Body Positive Inc
 P.O. Box 68-766
 Newton, Auckland

We will pass it on to physicians.



6 ON 6

The next **6 on 6 support Group** is due to start Monday, 18th August at Body Positive House. The support group is great for anyone that is newly diagnosed or any positive person male or female, gay or straight that just wants to know more about HIV in a casual environment.



Phone **0800 HIV LINE** to join the group.



FOOT DOCTOR

Announcing a new service: **A FOOT DOCTOR**

Yes, a real podiatrist will run a clinic here at Body Positive on a monthly basis.

Phone now for details and make an appointment at 09-309 3989

Fee: \$40.00 per consultation
 WINZ Benefit by negotiation.

MASSAGE



Both Swedish (Theropedic) and Sports massage are available FREE at Body Positive on Wednesdays and Thursday. Phone 09-309 3989 and book an hour to pamper your body.

* Koha appreciated.



QUIT SMOKING

Apart from adhering to your medication regime, quitting smoking is the next most significant improvement HIV+ people can take to improve their health and life expectancy. Smoking increases the risk of brain, heart and lung diseases, various cancers and opportunistic infections. If you would like to quit smoking, we can help. Phone 0800 HIV LINE

HIV RAPID TEST for our whanau & friends



The **60-second HIV Rapid Test** is now available at Body Positive House. A simple pin-prick is done, to test the blood with a 99.7% accuracy. It's always better to know your status early, so you can keep healthy, if you become HIV positive. Call **0800 HIV LINE** to book a FREE no-hassle Rapid Test.

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