

LIFE&TIMES HEALTH

Leading normal lives

One partner is living with HIV, but with a new approach, a couple is looking forward to starting a biological family, writes **Aneeta Sundararaj**

YOU'RE young and in love. One day, he proposes. Ever so cautious, you ask if he'll undergo a blood test. He agrees.

He is given a clean bill of health, so you both get married. Then you become pregnant and when you go for a blood test, you're shocked to be told that you have HIV.

Malaysian AIDS Foundation chairman Professor Dr Adeeba Kamarulzaman, says this scenario isn't so far-fetched. "In the last few years, we've seen what I call a feminisation of the AIDS epidemic," she says.

While the AIDS epidemic continues to be male-dominated, there is an increase in the number of women reported to be living with HIV and data indicates that, among men, injecting drug use continues to be main mode of transmission, while women mostly contract HIV through heterosexual contact. Alarmingly, the tendency now is for more housewives to be living with HIV than sex workers.

Dr Adeeba presents a fascinating theory that women are medically more vulnerable to contracting the virus than men. "For one, the vagina has a bigger surface area than the penis and the virus can get absorbed faster. Also, the skin around the vagina is prone to more wear and tear."

Socially, women tend to be more vulnerable too. "I've seen women who are strong, independent and can speak their minds in public. However, in the bedroom, 'condom negotiation' can be difficult. They just cannot convince the man to use a condom," she adds.

TREATMENT AS PREVENTION

What about starting a family? Can a couple living with HIV have children?

Thankfully, Dr Adeeba paints

Five myths

THERE are five fallacies about a woman living with HIV or AIDS:

- She is a "loose woman".
- She cannot get married.
- She cannot have children naturally.
- She will die sooner rather than later.
- She must have her uterus removed.



an optimistic picture. Previously, affluent couples, where one person is living with HIV, would opt for IVF (In Vitro Fertilisation) with donor sperm. "This was not very effective as, sometimes, the child may not look like the parent."

However, there is a new approach, which Dr Adeeba likes to call Treatment As Prevention. The aim is to two-fold: To prevent transmission of the virus from husband to wife (or vice versa) and, if the mother is already living with HIV, to ensure that the baby is HIV-negative. To do this, the entire pregnancy is planned.

The first step is to encourage the couple to practise safer sex, i.e. to use a condom during intercourse. The person living with HIV will also be given "highly active anti-retrovi-

ral therapy" that primarily lessens his "viral load" (which measures how severe the viral infection is). When the viral load is minimal, the couple will be encouraged to have unprotected sex when the woman is ovulating to increase her chances of becoming pregnant.

Dr Adeeba says: "If you have sex with someone who is HIV+, it doesn't mean you will automatically contract the disease. What it means is that the risk is higher."

Sometimes, women don't know they are living with HIV. They visit the doctor when they are already pregnant. In such circumstances, she will be administered with anti-retroviral therapy the moment she knows she's pregnant. She will also be referred to a multi-disciplinary hospital where her pregnancy will

Misconceptions about HIV

- HIV equals sin: HIV is a virus and, therefore, cannot be a sin.
- Women who are living with HIV are sinful: Most women living with HIV did not contract the disease by behaving in a sinful manner. There are many women who contracted the disease from their husbands.
- It's easy to become HIV+: It's not easy to contract the HIV virus. You cannot contract it from hugging or kissing someone living with HIV or shaking their hand. You won't contract it by living in the same house as a person living with HIV.
- You can contract the virus from a mosquito: This is not true. The HIV virus is transmitted sexually, through sharing needles in drug use or from mother to child.
- Children living with HIV cannot go to school and must be shunned from society: This is not true. When a child is living with HIV, the child can go to school. The teachers will have first aid training and parents need not be afraid that their children will automatically contract the virus.

Getting to Zero

THIS is the universal theme for the 2011 World AIDS Day celebrations. It is the rallying call for countries all over the world to amplify their efforts to achieve the three zeros in the global response to the HIV/AIDS pandemic. These three zeros are Zero New Infections, Zero AIDS Deaths and Zero Discrimination — which are to be achieved by 2015 when the Millennium Development Goal deadline expires. Malaysia will adopt this United Nations-backed campaign and customise its messages to fit the local scenario.

be monitored by both her obstetrician and a doctor who specialises in infectious diseases.

During labour, it is recommended that a woman living with HIV opts for an elective Caesarean section as the trauma will be less and it will be easier for the doctors to monitor her condition. She will, thereafter, be advised not to breastfeed her baby to prevent transmission of the HIV virus to the child. The baby will also be monitored by a paediatrician.

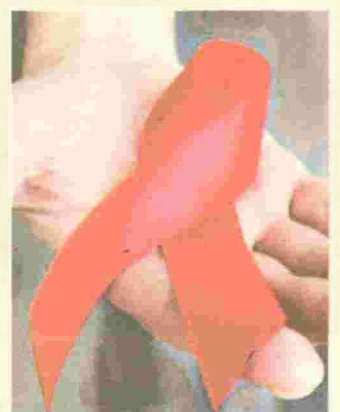
"Today, with over 32 drugs available in the market, we can almost eliminate the chances of a HIV+ woman giving birth to HIV+ baby," says Dr Adeeba.

NOT A DEATH SENTENCE

When the medication costs between

FYI

WHAT TO DO IF YOU'VE RECEIVED A POSITIVE RESULT ON THE AIDS TEST:



1. Inform anyone whom you may have exposed the AIDS virus to, of their potential exposure and encourage them to seek counselling and antibody testing.

2. Don't share toothbrushes, razors or other items that could become contaminated with blood.

3. Tell your doctor, dentist and eye doctor that you're infected with the AIDS virus so proper precautions can be taken to protect you, them and others.

4. Don't donate blood, plasma, sperm or other body tissues or organs.

"It is bad enough that people are dying of AIDS, but no one should die of ignorance."

Elizabeth Taylor



RM200 and RM600 per month, living with HIV does not have to be perceived as a death sentence. She adds: "Monogamy doesn't guarantee that women will not have to live with the HIV virus. They need to learn to protect themselves."

In the end, while the stigma attached to living with HIV still remains, there is hope for those affected by this disease to lead a normal life and to start a family. In short, a woman living with HIV can be treated and no longer needs to suffer in silence.

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