

AIDS : INFO, ITS CONTROL AND PREVENTION

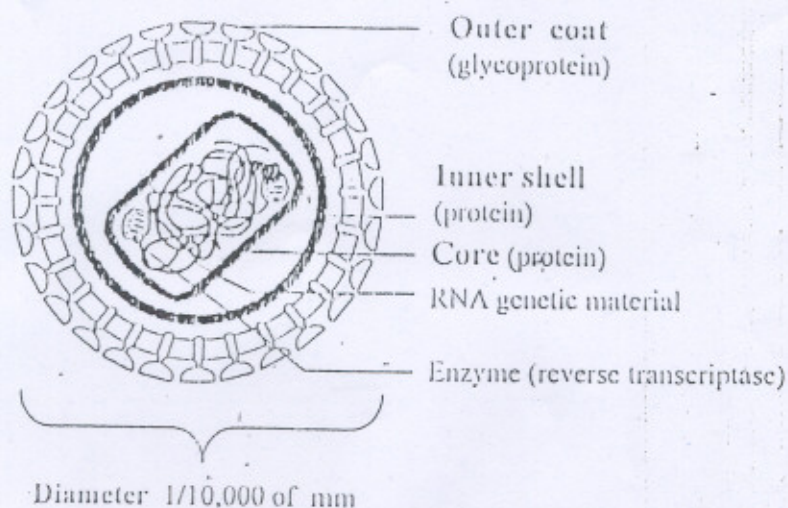
INTRODUCTION

1. The modern 'scourge' AIDS (Acquired Immune Deficiency Syndrome) emerged in early 80s and has now straddled the world. India alone is estimated to have about 2.5 million HIV positives (HIV +ve) cases and the number is still growing. It is a challenge for us in the new millennium. It could become a social tragedy if we do not control it.

WHAT IS AIDS/HIV INFECTION.

2. AIDS is a kind of STD (Sexually Transmitted Disease). It is caused by a very minute virus called 'HIV' (Human immunodeficiency virus).

FIGURE OF HIV



3. The HIV (Virus) on entry into our body invades our immune system (body defense system). The HIV virus enters the white blood cell (WBCs). WBCs are our body's defenders against invading microorganisms. Here HIV viruses multiply and kill the WBCs after a long struggle. Thus our body's defense (immunity) gets compromised. Our body then succumbs to various other infections/microorganisms. And such persons suffer various illnesses and finally die.

WHAT IS THE DIFFERENCE BETWEEN HIV +ve CASES AND AIDS CASES

4. HIV+ve person means a person whose blood test has indicated that his/her body harbors HIV virus. Such person may/may not be exhibiting the symptoms. However he/she can transmit the HIV infection to others. A healthy HIV +ve (HIV carrier) can unknowingly keep 'spreading' infection to healthy people. You cannot differentiate between a healthy HIV carrier and a really healthy person except by blood test.

5. AIDS case is a person suffering from and exhibiting symptoms of HIV infection. Of course he/she harbors and can transmit HIV infection to others.

HOW IS HIV/AIDS SPREAD ?

6. Sex fluids (semen/vaginal fluids) and blood of an infected person contains HIV (virus). Thus HIV/AIDS is spread by:-

- (a) Unsafe sexual behavior: i.e. promiscuity, sex with prostitutes, multiple sex partners and non-use of condom. By such behavior a healthy person is very likely to come in sexual contact with HIV+ve person and get infected.
- (b) Acceptance of infected bloods/infected blood products and infected medical equipment.
 - (i) Receive infected blood which has not been tested for HIV. Accepting blood on payment from professional blood donors is very risky as they are likely to be HIV+ve.
 - (ii) Unsterile/infected needles and syringes: Receiving injections from 'quack' is very risky. One can contract infection from infected razors (used by barbers). So also infected needles used in tattooing, piercing ear lobules, acupuncture and (scarifying) facials by beauty clinics can spread the infection.
 - (iii) Sharing of needles/syringes by drug addicts can spread HIV.
- (c) From infected mother to child: Either in the womb itself or during labour or later including through breast-feeding.

Note: Small quantities of HIV (virus) are found in breast milk, saliva, tears, sweat, urine and possibly in stools of infected persons. However generally these materials do not spread the disease to others.

7. HIV/AIDS is not spread by

- (a) Ordinary social contact with infected person e.g. shaking hands, hugging, 'peck' on the cheek (social kissing), coughing and sneezing.
- (b) Sharing of food, crockery/cutlery, toilet seats, telephone, keyboard, swimming pool & crowded bus.
- (c) Insect bites like bites of mosquito & bedbugs.

Note :- Donating blood cannot infect the donor however the recipient can get infected by receiving infected blood.

SYMPTOMS & SIGNS OF AIDS

8. Initially for 3-12 weeks immediately after infection with HIV (virus) the person has no symptoms and also his blood test is negative. This is called 'Window Period'. However such person can transmit the infection to others.

9. HIV+ve Stage : After the initial period of 3-12 weeks the infected person on testing shows HIV+ve result. Initially he is healthy (i.e. symptom less) but does transmit the infection to others (Carriers State). This healthy carrier state generally last 1-2 years but may extend upto 10 yrs.

10. Symptomatic Stage : Later the healthy carrier stage is followed appearance of symptoms and signs. The important symptoms/signs are listed below:-

(a) Early Symptoms (generally 1-2 years after infection)

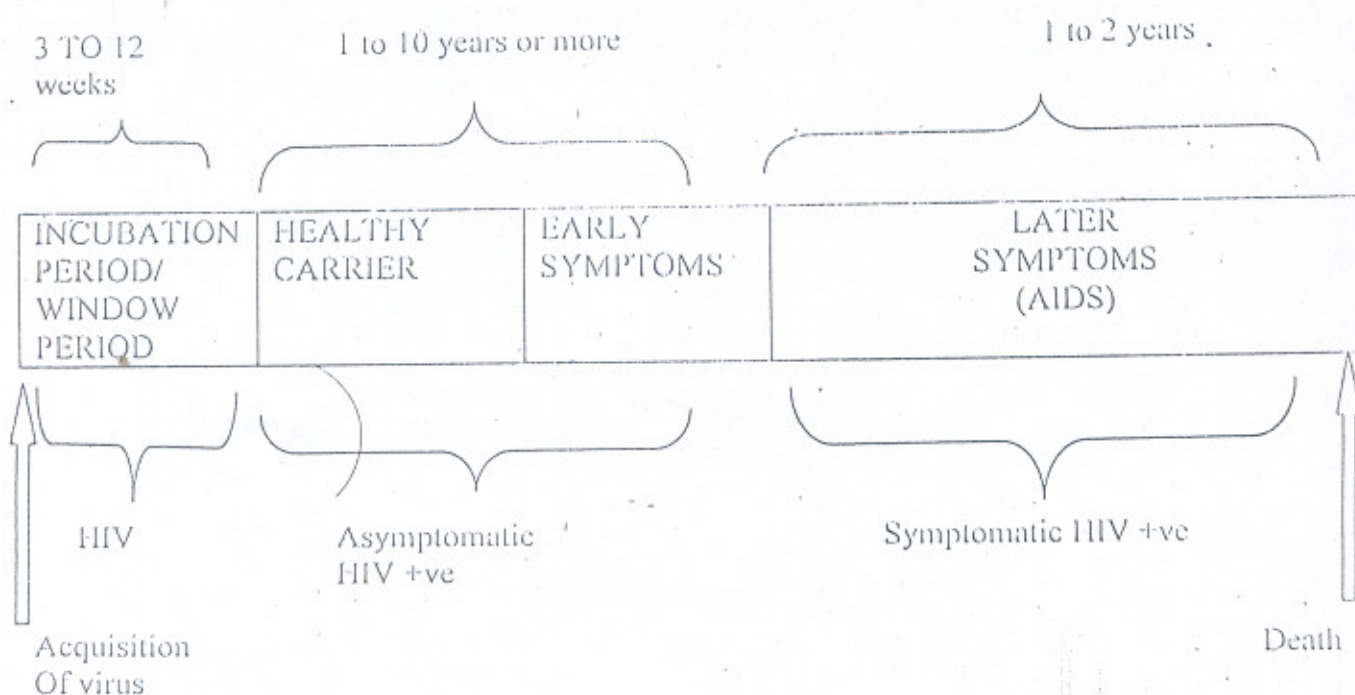
- (i) Marked unexplainable loss of body weight within a short period.
- (ii) Persistent watery loose motion.
- (iii) Intermittent/constant undiagnosed. } Lasting more than one month fever
- (iv) Persistent cough
- (v) Persistent sores on lips/around mouth (herpes simplex).
- (vi) Repeated attacks of painful sores on body (Shingles/herpes zoster)
- (vii) Persistent furry or ulcerated tongue and mouth.
- (viii) Swelling of glands in armpits, neck & groins.

Note: Above symptoms are only suggestive of AIDS and can be seen in many other diseases as well. Hence consult your doctor for his opinion/further test.

(b). Later Symptoms : Patients becomes progressively ill and bedridden due to pneumonias/tuberculosis, cancers, meningitis and mental deterioration.

(c) Finally death occurs (generally within 1 to 2 years from appearance of first symptoms)

STAGES IN AIDS/HIV CASE



TREATMENT

11. Many drugs are being used to control the virus but these drugs cannot eliminate the virus from HIV+ves/AIDS cases. However appearance of symptomatic stage can be delayed. Moreover much can be done by giving supportive treatment during symptomatic stage and thus reduce the suffering of AIDS case.

12. Please note the following:-

- THERE IS NO TREATMENT FOR AIDS/HIV positive cases.
- AIDS IS INVARIABLY FATAL.
- THERE IS NO VACCINE AGAINST AIDS/HIV.

PREVENTION AND CONTROL OF AIDS/HIV

PERSONAL PREVENTIVE MEASURES

13. Adopt safe sexual behaviour:

- Be faithful to one sex partner for life.
- Avoid pre- & extra- marital sex, abstain from casual sex or sex with prostitutes.

14. Use condom when indulging in high risk sex (i.e promiscuous sex). Annexure attached.

Note : Using condom reduces risk of contracting HIV/AIDS but it is not a fail proof insurance against contracting HIV/AIDS

15. Do not accept blood:

- (a) Which is not certified HIV-ve.
- (b) Which is obtained on payment from professional blood donors, from drug addicts and persons with high risk behaviour.

16. Avoid taking injections and surgical treatment from 'quacks' (unqualified medical practitioners). Insist on use of disposable needles and syringes. Alternatively accept only properly sterilized syringes/needles and instruments.

17. Avoid danger posed by:-

- (a) Use of razor by barbers, otherwise insist on use of fresh blade with each hair cut.
- (b) Tattooing
- (c) Piercing of ear lobules
- (d) Acupuncture treatment
- (e) Scarification treatment during facial, in beauty clinics
- (f) Sharing toothbrush/razors
- (g) Delivery by 'untrained' dais

18. Say No to Drugs : Drug addiction is bad and use of injectable drugs can be disastrous. Best to avoid drugs altogether. Otherwise atleast avoid sharing syringes and needles used for injecting the intoxicating drugs.

19. Do consult a qualified doctor on occurrence of suggestive symptoms or on suspicion of exposure to HIV infection. Do take full treatment of STD (Sexually Transmitted Diseases) like chancroid, syphilis and gonorrhea.

SOCIAL ACTIONS AND ACTION IN ARMY UNITS FOR CONTROL OF HIV /AIDS

20. Create awareness and education about HIV/AIDS and its prevention, through lectures, talks, pamphlets, banners and mass media. Fora like roll calls, sainik sammelan and family welfare meets could be utilized. Commanders at all levels and unit RMO/AMA should take active interest.

21. Children reaching adolescence should be educated about AIDS and safe behavior.

22. Identify red light areas and declare them out of bounds. Constant surveillance will be needed.

23. Promote healthy recreational activities in units especially in field areas e.g. games, music, trg events, etc.

24. Provide ^{access} points in unit area where condoms are readily accessible unobserved especially for individuals proceeding on leave/temp duty.
25. Encourage all individuals to freely consult qualified doctors for help specially if there is suspicion of contracting STD or HIV.
26. Do not reject or ostracise an HIV +ve person. Utilise his useful services for the society. Give him support and empathy.
27. Commanders and medical authorities must ensure confidentiality about HIV status of personnel.
28. Hospitals should exercise strict statutory controls on quality of blood and blood products. Med est must ensure strict system of ensuring sterility of medical instruments used in body invasive procedures.

CONCLUSION

29. HIV/AIDS epidemic has assumed dangerous proportions especially in developing countries like India. The tragedy is compounded by poverty, ignorance, absence of curative treatment and socio-economic cost involved. There is no treatment and death is certain. There is no vaccine. However this pall of gloom can be dissipated by effective education of general public about what they can do to protect themselves from contracting AIDS/HIV. Also resolute social actions and education of public can play a catalyzing role in winning the war against AIDS- 'the modern plague'

GUIDELINES ON CORRECT USE OF A CONDOM

1. While buying a condom the expiry date must be checked. Also see that the outer cover looks in good condition.
2. Keep a supply of condoms handy. Keep them somewhere cool and where they will not be crushed or exposed to direct sunlight.
3. Use a new condom each time one has intercourse.
4. Do not test a condom by inflating it or stretching it. Handle it gently and avoid opening the packet with any sharp object such as a blade, scissors, teeth or even fingernails. These can cause a tiny cut in the condom. Gently tear the packet.
5. Get ready to put the condom on the erect penis before inserting it in. Either partner can put the condom on the penis. The actual wearing of the condom can be made into a sensual act, a part of the erotic foreplay.
6. Hold the small nipple at the end of the condom; unroll the condom on the erect penis. The condom must be placed with the rolled portion out so that it will unroll properly. This small nipple at the end should be pinched to remove the air so that ejaculated semen can collect there.
7. If desired, lubricate the outside of the condom using contraceptive jelly or any other water-soluble lubricant. Do not use a petroleum-based lubricant such as Vaseline, cream or hair oil, as this will weaken the condom. Most of the good quality condoms are pre-lubricated.
8. After ejaculation, be sure that the condom does not become dislodged from the penis. Hold the rim of the condom firmly against the base of the penis during withdrawal, taking care not to spill any semen.
9. Tie a knot at the rim of the condom and dispose it off, preferably in a paper/polythene bag somewhere where children will not find it.