

Starting HIV Treatment

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Together, we can change the course of the HIV epidemic...one woman at a time.

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First Things First



When you and your health care provider decide time is right for you to start treatment ...

... there are ways to set yourself up for success

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First Things First

Positive Thinking

- May be helpful to focus on how:
 - Starting treatment is the right decision for your health
 - HIV drugs will help you fight the virus
 - You can take your medications the right way
- Finding support for your commitment:
 - You don't need to go it alone in sticking to your treatment regimen
 - Providers, nurses, social workers, therapists, case managers, support group, online community, family, friends can help



First Things First

Life Issues

- Can be tough to stick with a treatment regimen if you need to work on other issues in your life
- Talk with your provider and get support if you:
 - Feel down a lot of the time and don't enjoy things that you once did you may be depressed
 - Feel stigmatized or fear stigma
 - Have issues with substance use
 - Are not feeling safe in your home, or are experiencing violence



Important

If you are feeling threatened right now, call 911 or the National Domestic Violence hotline in the US at 800-799-SAFE [1-800-799-7233; or 1-800-787-3224 (TTY)]. You can also search for a safe space online at <u>Domestic</u> <u>Shelters</u>.

Domestic Shelters: <u>www.domesticshelters.org</u>



First Things First

Health Issues – talk to your health care provider about:

- Other health problems
- Other drugs you take, including over-the-counter medications, vitamins, street drugs
- Alternative or complementary therapies (herbals) you use
- If you are in any recovery programs

Family planning

- HIV drugs can interfere with some birth control methods
- Women who are pregnant or plan to become pregnant may want to avoid certain HIV drugs



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Choosing an HIV Drug Regimen

- Classes of drugs approved for HIV treatment:
 - Nucleoside and nucleotide reverse transcriptase inhibitors (NRTIs)
 - Non-nucleoside reverse transcriptase inhibitors (NNRTIs)
 - Integrase inhibitors
 - Protease inhibitors (PIs)
 - Entry and fusion inhibitors
 - Attachment inhibitor
 - Post-attachment inhibitor
 - Combination pills
 - Boosting agents
- Some pills include several drugs





- When HIV makes copies of itself (reproduces), it can mutate
- Some mutations prevent certain HIV drugs from working, causing HIV to become **resistant** to a particular HIV drug
- If resistance occurs, your viral load can increase quickly and you may have to switch drug regimens
- Your provider should do a resistance test to find out if you have drug-resistant HIV before you start HIV treatment





One strategy in HIV treatment is to **think ahead**

- Drugs may stop working because of resistance and cross-resistance
- When choosing your regimen, think about which drugs could be used in the future if first HIV drug regimen stops working
- This process is called **sequencing your treatment**
 - Ensures that you will have other treatment options available if resistance develops





The best way to prevent resistance is with good adherence!

- Adherence means taking your HIV drugs exactly as directed
 - Gives drugs the best chance of working well to block HIV reproduction
 - The less HIV can reproduce, the less likely it will develop mutations



Dosing Schedule

- Questions to ask health care provider:
 - How many pills in a dose? How many drugs in a pill?
 - How many times a day should each dose be taken?
 - Any food requirements?
 - Any drugs/supplements that may interfere with this drug?
- Create a plan:
 - If once-daily regimen, pick an activity to remind you to take
 HIV drugs like having a cup of coffee in the morning
- If you miss a day, don't take double dose the next day



Dosing Schedule

- If you have children, make sure your pill-taking schedule fits in with their routine, but keep your drugs out of their reach
- Plan for weekends/holidays or trips out of town
- Keep a journal or chart, or use a reminder app on your phone to track how well you are taking your pills
 - Remember that everyone makes mistakes
 - When it happens, start again and commit to staying on track
 - If you start to miss doses regularly, tell your provider



Taking Your Pills

- If no one knows about your HIV status, you may feel like you have to hide your pill taking
 - Can make it harder to take your drugs
 - If you remove the original labels from pill bottles, re-label them in a way that helps you remember what to take and when to take it
- May be a good time to tell the people close to you about your HIV status
- Not ready? Put your meds in a pillbox and tell people you take vitamins/medicine for another condition





- All HIV drugs have some side effects; *not all people get them*
- Be prepared: Ask your provider about possible shortand long-term side effects and how to manage them
- If you may need medication to manage side effects, have a supply on hand before starting HIV drugs
- If you are having side effects:
 - Don't stop HIV drugs unless your provider tells you to stop
 - But don't "grin and bear it" talk to your provider



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Putting It All Together

- Believe in your ability to stick with your drug regimen
- Important to discuss with health care provider:
 - Other medications
 - Substance use issues
 - Pregnant or plan to get pregnant
 - Depression, other mental health issues
 - Support system
 - Resistance testing
 - Issues/barriers to taking your drugs on time every day
 - Dosing schedule



Learn More!

- To learn more, please read the full fact sheet on this topic:
 - <u>Starting HIV Treatment</u>
- For more fact sheets and to connect to our community of women living with HIV, visit:
 - www.thewellproject.org
 - www.facebook.com/thewellproject
 - <u>www.twitter.com/thewellproject</u>