



the**well**project

Starting HIV Treatment

Last updated: August 30, 2024

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

#onewomanatatime#thewellproject

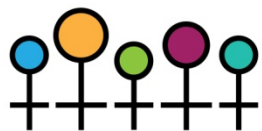
www.thewellproject.org

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***

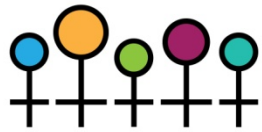


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First Things First

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

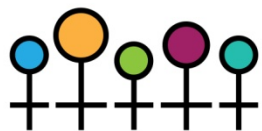


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First Things First

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 (disgrace or blame)
 - Have issues with substance use
 - Are not feeling safe in your home, or are experiencing violence

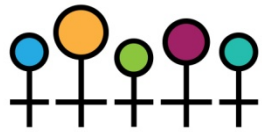


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Important

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)], or text START to 88788. You can also search for a safe space online at [Domestic Shelters](#).

Domestic Shelters: www.domesticshelters.org



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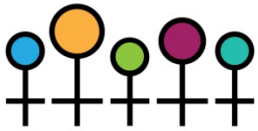
First Things First

Health Issues – talk to your healthcare 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

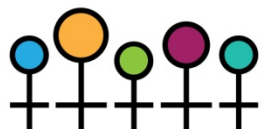
- HIV drugs can interfere with some birth control methods
- People who are pregnant or plan to become pregnant may want to avoid certain HIV drugs



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Choosing an HIV Drug Regimen

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



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Choosing an HIV Drug Regimen

- Many ways to combine drugs
- In US, usually start with one of the following:
 - Bictegravir/tenofovir alafenamide/emtricitabine
 - Dolutegravir/tenofovir alafenamide or tenofovir disoproxil fumarate/emtricitabine or lamivudine
 - Other dolutegravir combinations for people with a specific genetic variation or whose HIV disease is advanced
- Different recommendations if person had long-acting cabotegravir injected to prevent HIV acquisition, but acquired HIV anyway or if they also have hepatitis B



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Resistance

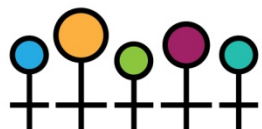
- When HIV makes copies of itself, it can **mutate**
- Mutations may cause HIV to become **resistant** to a drug
- If that happens, viral load can increase quickly
- Provider should do a **resistance test** before starting treatment
- Resistance testing is recommended for people who:
 - have just been diagnosed with HIV
 - are starting HIV drugs
 - are switching treatment and viral load is over 1,000 copies
 - have a viral load over 1,000 copies



Sequencing

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

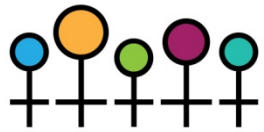


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Adherence

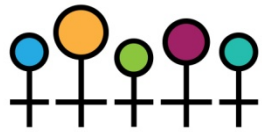
The best way to prevent resistance is with good adherence!

- 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
 - The fewer mutations it develops, the less likely resistance is



Dosing Schedule

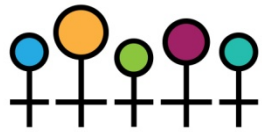
- Questions to ask healthcare provider:
 - How many pills in a dose? How many drugs in a pill?
 - How many times a day should each dose be taken?
 - Any food requirements?
 - Any drugs/supplements that may interfere with this drug?
- Create a plan:
 - If once-daily regimen, pick an activity to remind you to take your HIV drugs, like having a cup of coffee in the morning
 - If twice daily, pick a second activity to remember 2nd dose
- If you miss a day, don't take double dose the next day



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Dosing Schedule

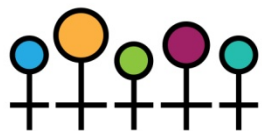
- If you have children, make sure your pill-taking schedule fits in with their routine, but keep your drugs out of their reach
- Plan for weekends/holidays or trips out of town
- Keep a journal or chart, or use a reminder app on your phone to track how well you are taking your pills
 - Remember that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



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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



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Side Effects

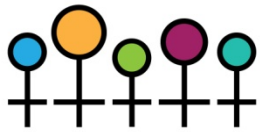
- All HIV drugs have some side effects; ***not all people get them***
- Be prepared: Ask your provider about possible short- and long-term side effects and how to manage them
- If you may need medication to manage side effects, have a supply on hand before starting HIV drugs
- If you are having side 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 healthcare provider:
 1. Other medications or vitamins
 2. Substance use issues
 3. Pregnant or plan to get pregnant
 4. Depression, other mental health issues
 5. Support system
 6. Resistance testing
 7. Issues/barriers to taking your drugs on time every day
 8. Dosing schedule



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Learn More!

- To learn more, please read the full fact sheet on this topic:
 - [Starting HIV Treatment](#)
- For more fact sheets and to connect to our community of women living with HIV, visit:
 - www.thewellproject.org
 - www.facebook.com/thewellproject
 - www.twitter.com/thewellproject
 - www.instagram.com/thewellprojecthiv
 - www.youtube.com/thewellprojecthiv