

HIV stands for **Human Immunodeficiency Virus**. Once someone is infected with HIV the virus will remain in their body for the rest of their life. There is currently no cure for HIV and no vaccine to prevent people from becoming infected. However, drug treatments can help most people with HIV to live much longer and feel well.

HIV can be transmitted in a number of ways. This booklet is mostly about sexual transmission. It gives you information about HIV, what you can do if you are worried that you might have the infection and advice on how to protect yourself.



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What causes HIV?

HIV is a virus. When someone becomes infected with HIV the virus weakens and damages their body's defence system (the immune system) so that it cannot fight off infections.

Someone who has HIV is diagnosed as having AIDS only when tests show their immune system cannot cope and they develop one or more particular illnesses. The term AIDS is not used very often now. Late stage or advanced HIV infection is used instead.

(a) How is HIV passed on?

HIV can be passed from one person to another through sexual contact, and in a number of other ways. Both men and women can have HIV, and can pass it on. You don't need to have lots of sexual partners to get HIV or to pass it on.

HIV can be passed on through heterosexual (straight) or homosexual (gay, lesbian) sex. In women who only ever have sex with women the risk of HIV being passed on is very low. Circumcised

and uncircumcised men can get HIV and pass it on. Circumcision is when the foreskin is removed from the penis. Research is looking into whether circumcised men may have less risk of becoming infected with HIV.

Most people with HIV will look and feel healthy, so you cannot tell who has the virus and you can pass on HIV without knowing you have it. HIV can be passed on even if someone is taking anti-HIV drugs.

HIV is passed from one person to another when the blood, semen, pre-ejaculate (precum), vaginal fluids or breast milk of an infected person enters the body of an uninfected person by:

- having unprotected vaginal, anal or oral sex
- sharing sex toys
- using a needle or syringe (works) which has already been used by someone who is infected with HIV.

A woman with HIV can pass the virus to her baby before or during birth, or by breastfeeding.

The risk of catching HIV from unprotected oral sex is low but it can happen. You are more at risk if:

- your throat or mouth is inflamed or you have cuts, sores, abrasions or any unhealed piercing in your mouth
- · your partner ejaculates in your mouth
- you have just brushed or flossed your teeth
- you are giving oral sex to a woman who is having her period.

Having another sexually transmitted infection increases the risk of getting HIV or passing HIV on if you already have it. For advice, see page 14.

Although tests can detect HIV in urine and saliva, the level of virus in these fluids is thought to be too low to be infectious.

You cannot get HIV from hugging, kissing, sneezes, coughs, sharing baths or towels, from swimming pools, toilet seats or from sharing cups, plates or cutlery. You cannot get HIV from any animals or insects, including mosquitoes.

Can HIV be passed on when receiving healthcare in the UK?

It is now extremely rare to become infected with HIV when receiving healthcare in the UK. In the UK all health professionals – such as dentists, doctors, midwives and nurses – are required to follow infection control procedures when caring for any patient.

Organ donors and blood from blood donors are also tested in the UK to reduce the risk of HIV being transmitted through infected blood, blood products or donated organs.

Some countries do not have the same standards of medical and dental care as the UK, so there may be a risk of getting HIV from infected blood products or unsterile medical equipment if you receive healthcare in another country.

What are the signs and symptoms of HIV?

Many people infected with HIV have no signs and symptoms at all. About half of people who become infected with HIV experience flu-like symptoms within a few weeks after infection. These may include fever, a rash, swollen glands, a sore throat, mouth or throat ulcers and aching muscles or joints. These symptoms are sometimes called sero-conversion illness and usually last for about 1–4 weeks.

Some people are first diagnosed with HIV when they become ill due to their immune system becoming weakened.

(i) How will I know if I have HIV?

You can only be certain you have HIV if you have a test. If you or a partner think you might have HIV it is important that you don't delay seeking advice and getting a test. Even if you don't have symptoms you may wish to be tested, particularly if:

- you have recently had unprotected sex with a new partner
- a sexual partner tells you they have HIV
- you have shared drug injecting equipment
- you, or your partner, have had unprotected sex with other partners
- you, or your partner, have another sexually transmitted infection
- you are pregnant or planning a pregnancy.

(i) How soon after sex can I have a test?

It is important not to delay getting a test if you think you might have HIV. You can have a test even if you do not have any signs and symptoms. You will usually be offered an HIV test when you go to the clinic.

It can take up to three months after coming into contact with HIV before it is detectable in the blood – this is known as the window period. HIV can still be passed on during the window period even though it can't be detected. As HIV may not show up on the test straightaway you may be asked to go back for a test three months after you had the sex that put you at risk of HIV.

What is an HIV test?

An HIV test checks your blood for antibodies to HIV. When HIV enters your body, your immune system tries to fight off the infection by producing antibodies to the virus. It can take between three weeks and three months after you have been

infected with HIV for there to be enough antibodies in your blood to show up on an HIV test.

Newer types of HIV tests look for part of the HIV virus known as the p24 antigen as well as looking for HIV antibodies. p24 antigen is a protein that is part of HIV which is produced in large quantities when you are first infected with HIV. This can be detected in the blood sooner than HIV antibodies. Tests that look for both antibodies and p24 antigen are known as combined antibody/antigen tests.

HIV antibody testing can also be done by taking a sample of saliva but this test is not routinely recommended in the LIK

Cervical screening tests, routine blood tests and swabs do **not** detect HIV. If you are not sure whether you have been tested for HIV, just ask.

What do the test results mean?

If the result is **HIV negative** this means that no HIV antibodies or p24 antigen were found in your blood. If the test has been done at least three months after the time of your possible risk of infection, then you do not have HIV. If it was less than three months since the last time you could have been exposed to HIV, the test will be repeated at a later appointment.

If the result is **HIV positive** this means that the test has detected HIV antibodies or p24 antigen in your blood. The test will be repeated to confirm the positive result. If both tests are positive this means you have HIV.

What does the test involve?

The HIV test involves taking a sample of blood (either from your arm or from a finger prick) and looking for HIV antibodies, or antibodies and p24 antigen.

An HIV test should only be done with your permission. You should understand what is involved in the test and how it might affect you. Before any testing takes place a doctor, nurse or health adviser should discuss with you:

- why you think you might be at risk of HIV
- the benefits of testing
- how the test result (negative or positive) might affect you and aspects of your life
- how and when the HIV test can be done
- where the information about the test result will be recorded
- how the result will be given to you.

They may also give you a leaflet to explain some of the things you have discussed. Don't be frightened to ask questions about anything you are not sure about.

Before you decide to have a test you may wish to talk to someone about the implications that this could have on all aspects of your life and about who might have access to the HIV test result. The doctor, nurse, health adviser or an HIV organisation can help you with this. Some people feel sure that they would like to know whether they have HIV or not, but may not want to discuss it at first. You should choose the approach that suits you best.

(i) How soon will I know the result of the test?

This will vary depending on where you had the test done. The doctor, nurse or health adviser will talk to you about when the result will be available.

At most services the result should be available within ten days. Some clinics offer same day testing. Not all clinics provide this service and an appointment is usually required.

There are also a small number of clinics that offer rapid testing. This is when you have an HIV antibody

test and are given the result in a short space of time (usually one hour). If the result is positive another test will be done to check that the result is correct.

Where can I get a test?

There are a number of services you can go to.

Choose the service you feel most comfortable with.

An HIV test can be done at:

- a genitourinary medicine (GUM) or sexual health clinic
- some general practices (ask your doctor or practice nurse)
- some contraception clinics and young people's services
- rapid testing clinics (these are listed at www.tht.org.uk)
- private clinics (for a fee).

Pregnant women attending antenatal services and women attending some gynaecology services will be offered a test. Call the **Department of Health** on 08701 555 455 for a leaflet about antenatal HIV testing.

Injecting drug users may be able to get a test through a local drugs service.

It is possible to buy home sampling kits from the internet – a sample of saliva is sent to the laboratory for analysis. Saliva tests are less reliable than using blood. Selling home tests that do not require laboratory analysis to the general public is illegal in the UK.

O How accurate are the tests?

No tests are 100 per cent accurate, but HIV tests should pick up almost all HIV infections if they are done at the right time. All positive HIV tests are repeated to confirm the result.

Will I have to pay for tests and treatment?

HIV testing is available on the NHS free of charge to anyone. All individuals who are ordinarily resident in the UK are eligible for free NHS treatment for HIV, as are certain categories of overseas visitors (those people not ordinarily resident in the UK). All asylum seekers are eligible for free NHS treatment. If HIV was diagnosed and treatment begun before any appeal for asylum fails, treatment can continue free of charge for as long as the individual remains in the UK. For the minority of people for whom treatment is not free, your doctor will advise you.

What is the treatment for HIV?

Once HIV is diagnosed, you will be given a number of tests to monitor the stage of the infection and to show if or when treatment should be started. People with HIV may be supported and treated by their own doctor or by a specialist at an HIV clinic or a GUM clinic. Services may work together to provide specialist care and support.

At the moment there is no cure for HIV or late stage HIV infection, but there are drugs, known as antiretroviral treatment (ART) or combination therapy, that reduce the level of HIV in the blood and prevent or delay the development of late stage HIV infection. Most people with HIV benefit from these treatments and live longer and have better health than if they had not taken them. There are also treatments available that can help prevent or treat many of the illnesses that people with HIV are more likely to get.

The treatments for HIV can be difficult to take and they can have unpleasant side effects. Your doctor or specialist can give you full information about treatment options, side effects and long-term effects of treatment. HIV organisations can also provide information (see back cover).

There is treatment that is available to help prevent a pregnant woman from passing the virus to her baby (see page 13).

Is there any treatment I can take immediately if I think I have just come into contact with HIV?

If you have had sex with someone in the last three days (72 hours) who is HIV positive or who has a high chance of having HIV then taking a short course of anti-HIV drugs may help to prevent infection. This is known as Post Exposure Prophylaxis or PEP. It involves taking a course of anti-HIV drugs for four weeks. It is more effective the sooner you take it.

PEP is usually only recommended if:

- you have had unprotected vaginal or anal sex with someone who is HIV positive
- you have had unprotected anal sex with someone who has a high chance of having HIV and you were the receiving partner.

PEP may be considered if:

- you had oral sex with someone who has HIV or is at high risk of having HIV and they ejaculated in your mouth
- you had unprotected vaginal or anal sex with someone who is at high risk of having HIV
- you are a healthcare professional and have been at risk at work, for example through a needlestick injury.

If you are worried that you have been exposed to HIV within the last 72 hours you can go to a GUM clinic, a sexual health clinic or an accident and emergency (A&E) department. The doctor or nurse will ask you some questions and assess whether or not the treatment will be of benefit to you.

O What happens if HIV isn't treated?

Once you are infected with HIV you will remain infected with the virus for the rest of your life, and will be able to pass it to someone else. There is currently no way of curing the virus or removing it from the body. Every individual will react differently to HIV. If the HIV isn't monitored carefully and treatment given when necessary, it will cause long-term damage, and this will develop into late stage HIV infection (which can cause death).

Will I know how long I've had HIV?

The HIV antibody test cannot tell you how long you have had the virus. If you have had more than one sexual partner it can be difficult to know which partner you got HIV from. If you feel upset or angry about having HIV and find it difficult to talk to your partner, family or friends, don't be afraid to discuss how you feel with the staff at the clinic or general practice, or at a support organisation.

O Should I tell my partner?

If the test shows that you have HIV then it is very important that your current sexual partner and any other recent partners are also tested. The staff at the clinic or general practice can help you with this, and discuss with you which of your sexual partners may need to be tested.

You may be given a 'contact slip' to send or give to your partner(s) or, with your permission, the clinic can do this for you. The slip explains that they may have been exposed to a sexually transmitted infection and suggests that they go for a check-up. It may or may not say what the infection is. It will not have your name on it, so your confidentiality is protected. This is called partner notification. You are

strongly advised to tell your partner(s).

For further information, see www.tht.org.uk.

O Does anyone else need to know that I have had an HIV test?

Information about your HIV test (whatever the result) should only be passed to someone else with your permission. You may be worried that other people may find out that you have HIV when you don't want them to. Talk to the doctor or nurse if you are concerned about the confidentiality of your results.

There are some circumstances when you might be asked if you have ever had a test, for example when applying for certain jobs, insurance or a mortgage. Nowadays it is more common only to be asked if you have had a positive HIV test or are having treatment for HIV. It is important to understand how the answers to these questions might affect you. You can discuss this with a support organisation (see back cover).

O Does HIV affect fertility?

Many women with HIV are able to become pregnant, and men with HIV can father children.

HIV positive men and women who are planning a pregnancy can get information and advice from an HIV organisation or their doctor or specialist on how to minimise the risk of infecting an HIV negative partner or the baby.

O What happens if I am pregnant and I have HIV?

If you have HIV and you are pregnant it is possible for HIV to pass to the baby while you are pregnant, during the birth and when you breastfeed. During your antenatal care you will be recommended to have an HIV antibody test. If you are HIV positive then you can discuss with the doctor or midwife:

- the benefits of antiretroviral therapy (drug treatment) to you and your baby
- whether a caesarean birth is recommended
- if breastfeeding should be avoided.

You can get further information about HIV and pregnancy from HIV organisations (see back cover).

O How can I help protect myself from sexually transmitted infections, including HIV?

The following measures will help protect you from sexually transmitted infections and will also help prevent you from passing them on.

- Use condoms (male or female) every time you have vaginal or anal sex. If you can, avoid using condoms or spermicides containing Nonoxinol 9. This does not protect against HIV and may even increase the risk of infection. Evidence shows that standard strength condoms offer just as good protection as extra strong condoms. Water-based lubricant should be used with condoms for anal sex.
- If you have oral sex, cover the penis with a condom or the female genitals and male or female anus with a latex or polyurethane (soft plastic) square. If you do not want to do this, try to avoid:
 - ejaculation into the mouth
 - giving oral sex to a woman during her period
 - oral sex if your throat or mouth is inflamed or you have cuts, sores or abrasions in your mouth or on your gums
 - brushing or flossing your teeth before or after oral sex. These may increase your chances of passing on or getting HIV.
- If you are a woman and rub your vulva against your female partner's vulva one of you should

cover the genitals with a latex or polyurethane (soft plastic) square.

- If you are not sure how to use condoms correctly visit www.fpa.org.uk or call **fpa**'s helpline.
- Avoid sharing sex toys. If you do share them, wash them or cover them with a new condom before anyone else uses them.
- Injecting drug users can call Frank (0800 776 600; www.talktofrank.com) for advice on how to protect yourself from HIV.

(i) Where can I get more information and advice?

Call **sexual health direct**, run by **fpa**, for confidential information and advice on all sexually transmitted infections, contraception, pregnancy choices, abortion and planning a pregnancy. We can also give you details of sexual health services and a wide range of booklets, including a guide to male and female condoms.

fpa helplines England

0845 122 8690 9am to 6pm Monday to Friday

Northern Ireland

0845 122 8687 9am to 5pm Monday to Thursday 9am to 4.30pm Friday

or visit fpa's website www.fpa.org.uk

Details of clinics can be found in your local directory under sexual health, genitourinary medicine (GUM) or sexually transmitted infections (STIs).



- © Call sexual health direct, run by fpa on 0845 122 8690 for confidential information and advice on sexually transmitted infections, contraception, pregnancy choices, abortion and planning a pregnancy or visit www.fpa.org.uk.
- For confidential information about sexually transmitted infections, sexual health or where to find local services call the Sexual Health Line on 0800 567 123. Textphone 0800 521 361. Lines are open 24 hours a day.
- For advice and support on HIV and AIDS contact:
 - THT Direct on 0845 122 1200 or visit www.tht.org.uk.
 You can also get details of rapid testing clinics and how to obtain PEP.
 - Positively Women, a helpline answered by HIV positive women, on 020 7713 0222 (www.positivelywomen.org.uk)
 - The African AIDS helpline on 0800 0967 500, which can provide services in a variety of languages.
- For information on HIV and AIDS visit www.condomessentialwear.co.uk, www.ssha.info (Society of Sexual Health Advisers), www.avert.org or www.aidsmap.com.
- Young people under 25 can also call Brook on 0800 0185 023 or visit www.brook.org.uk.
- Call NHS Direct on tel: 0845 46 47 (NHS 24 in Scotland, tel: 0845 4 24 24 24).
- A final word

The information in this booklet is based on evidence-based guidance produced by The British Association of Sexual Health and HIV (BASHH). Different people may give you different information and advice about certain points.







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