

# FREQUENTLY ASKED QUESTIONS ABOUT

# HIV AND AIDS



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## WHAT IS HIV?

**Human Immunodeficiency Virus (HIV)** is the virus that causes AIDS. It's only spread from people to people through body fluids. Once inside the body, the virus makes copies of itself and kills CD4 white blood cells. These cells are an important part of the body's immune system. Over time, so many CD4 cells die that the immune system gets weak. HIV also causes chronic inflammation. Medication can help slow HIV's impact on CD4 count and can decrease damage caused by chronic inflammation.



## WHAT IS AIDS?

**Acquired Immune Deficiency Syndrome (AIDS)** is a collection of illnesses people get due to HIV after their immune system is severely damaged. Some of these illnesses are called opportunistic infections. People with normal immune systems can also get some of these illnesses, but with HIV they occur at a much higher rate. It also takes longer for a person with HIV to recover. These illnesses occur as a sign of later-stage HIV disease called AIDS. A person with HIV can also be diagnosed with AIDS when their CD4 count falls to 200 or below. HIV antiretroviral drug therapy (ART) can delay the onset of AIDS for many years. We don't know yet, but it could be indefinitely.

## HOW MANY PEOPLE GET HIV?

Anyone who has unprotected sex, shares needles, or has certain other risks can get HIV. Each year about 200-300 people get infected with HIV in King County. There are about 7,200-8,000 people now living with HIV or AIDS in King County. Local experts believe that about 6-10% of people who have HIV don't know it, usually because they have not been tested recently. Some groups of people are disproportionately affected by HIV in King County, including African Americans, African immigrants, Latinos, injection drug users, and men who have sex with men.

## HOW CAN I GET HIV?

HIV can be found in body fluids including blood, semen, vaginal fluid, and breast milk.

### HIV is spread in 3 main ways:

#### 1. Unprotected sex

Vaginal or anal sex without a condom is very unsafe with a person who has HIV or an STD, even when they don't know it. During sex, HIV in semen or in vaginal fluid can enter the other partner's body. If one person has an STD, HIV is even more likely to be transmitted. Although HIV is more likely to enter through the vagina or the anus, it can also enter the penis.



HIV risk from oral sex is low, but there are known cases. It is possible to get HIV when giving oral sex if you have any cuts or openings in your mouth or gums, for example after brushing or flossing or if you have an open sore. Other STDs, like syphilis, chlamydia, and gonorrhea, are easily transmitted during oral sex.



#### 2. Sharing items to inject drugs

Blood is the body fluid that most easily transmits HIV. Any needle, syringe, cooker, or cotton can have blood in it after it has been used. Blood may also stay in the water or other liquid used to mix or divide drugs. If any of these items are shared, this blood can enter the body of the next user. If needles for body piercing or tattooing are shared, there is also risk of passing HIV.

#### 3. From an infected mother to her infant

An HIV-infected mother can pass HIV to her baby during pregnancy or birth from blood transmission, during breast-feeding, or in some cases by sharing chewed food. If the mother is taking HIV medications, the risk to the fetus or baby is much smaller.

### Getting HIV from a medical procedure is very rare.

Getting HIV from a blood transfusion or an organ transplant is very rare today. All donated blood, blood products, and organs are tested for HIV and other blood-borne germs.



### You cannot get HIV from:

- Sweat, saliva (spit), tears, urine, or mucous
- Hugging, touching, kissing
- Coughing or sneezing
- Mosquito bites
- Sharing household items\*
- Toilets, swimming pools, or hot tubs
- Donating blood

\*Public Health does not recommend sharing razors or toothbrushes because of possible blood transmission.

## HOW CAN I STAY SAFER IF I HAVE SEX?

### There is no risk of getting HIV from:

- Abstinence (not having sex)
- Non-sexual massage or touch
- Masturbation or hand jobs  
(where you keep your fluids to yourself)

Most other sexual activity carries some risk of spreading HIV. Talk with your partner(s) about HIV and other STDs before you have sex. Agree with your partner on things you will do and won't do.

You can both get tested for STDs to know you are in the clear or get treated if you are not. To reduce your sexual risks, don't let blood or sexual fluids get into your body. Be aware, withdrawal or pulling out before ejaculating or cumming will not prevent HIV or other STDs.

### Here are some **risk reduction techniques** you can use to decrease your risk of getting HIV:

- **Be aware** of your body and your partner's body. Cuts, sores, other STDs, or bleeding gums increase the risk of spreading HIV. Rougher sex can cause bleeding or small tears that give HIV an easier way to get into the body.



- Always use a **safety barrier**. For vaginal and anal sex, use a latex, polyurethane, or polyisoprene **male condom** or **female condom**. Condoms are also recommended if sharing sex toys. Pieces of latex or plastic wrap over the vagina or anus called **dental dams**, or latex condoms over the penis, are good barriers during oral sex. There are flavored condoms for this purpose. Even if you are HIV positive and your partner is too, it is safest to use condoms to prevent the spread of STDs like syphilis.
- **Lubricants** reduce the chance that condoms or other barriers will break. Don't use oil-based lubricants (Vaseline, Crisco, oils, or creams). They damage latex condoms. Only use water-based or silicone-based lubricants.

### ➔ **Have sex with fewer people.**

It is safer to have sex with just one partner.  
More partners = more risk!

➔ **Get tested and treated for STDs.** If you have an STD, it is easier to get HIV from an infected partner. And if you have HIV, it is easier to get STDs. Insist that your partners get tested and treated for STDs, too.

➔ **Serosorting** is when a person chooses a sexual partner known to be of the same HIV status. This can be a helpful strategy when both people know they are positive. But for people who are negative (or think they are negative), it's risky. One may have become infected since his or her last negative test result and not know it yet.

➔ **HIV treatment is prevention.** If your partner has HIV and their viral load is undetectable, your risk of getting HIV is almost zero. Viral load is a measure of the amount of HIV in blood.

➔ **PEP** is short for **Post Exposure Prophylaxis**. It is when a person who does not have HIV takes HIV medications to prevent infection after a possible exposure. PEP should be started within the first 48 hours - but no later than 72 hours - after exposure. **Obtain medical treatment IMMEDIATELY if you think you were exposed to HIV.**

➔ **PrEP** or **Pre Exposure Prophylaxis** can provide additional protection. With PrEP, people who are HIV negative take antiretroviral medication daily to lower their chances of becoming infected with HIV if they are exposed to it.

Male circumcision has been shown to reduce the risk of HIV transmission from women to men in Africa. However, there's no clear benefit for men who have sex with men. **No one is recommending circumcision as a way to prevent HIV for U.S. adult males at this time.**

**Birth control methods (the IUD, pill, patch, ring, or shot) do not protect you from HIV!**

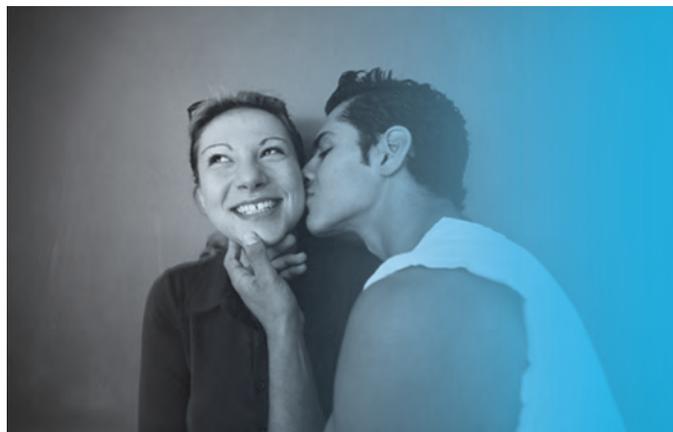
## HOW DO I USE A CONDOM?

**Condoms can reduce the risk of HIV and other STDs** if they are used correctly and used each time you have sex. All condoms must meet the same safety standards, and it is very rare for a condom to break due to defects. The best brand is the one you like to use and feel most comfortable with.

When you are done, throw the condom in the garbage. You cannot compost or recycle condoms. Never flush them down the toilet.

### **Using a Male Condom:**

1. Use only latex, polyurethane, or polyisoprene condoms.
2. Don't use "natural skin" or lambskin condoms. They have holes large enough to let HIV through.
3. Don't use condoms with Nonoxonyl-9, or if they say "spermicide" or "spermicidal". Spermicides can cause irritation in your body which can make HIV infection more likely.
4. Check the date on the package. Don't use a condom if the package is torn or expired. Do not store condoms in hot or sunny places.
5. Do not use two condoms at the same time. The extra friction may cause them to break.



## Using a Female Condom:

1. Despite the name, anybody can use the female condom for anal sex. Never use a male condom and female condom at the same time.
2. The outer ring covers the area outside the vagina or anus. The inner ring is used to insert the condom and hold it in place during sex.
3. To insert the female condom into the:

**Vagina:** Squeeze the flexible inner ring with your thumb and second finger so it becomes long and narrow. Gently slide the inner ring into the vagina. Place a finger inside the condom and push the inner ring up as far as it will go. Be sure the condom is not twisted.

**Anus:** You can use the same method as above. Some people take out the inner ring once the condom is in. Others put the condom (without the inner ring) over their partner's erect penis and insert both the penis and the condom at the same time into the anus.



4. The outer ring should lie flat outside of the vagina or anus. Gently guide your partner's penis into the condom's opening. Be sure the penis does not enter on the side, between the condom and bare skin.
5. To remove, twist the outer ring and gently pull the condom out.



## HOW CAN I STAY SAFER IF I INJECT DRUGS?

**The only way to be 100% safe is to not use drugs.**

If that isn't possible, **use a brand new syringe every time** you inject or divide drugs. Cookers, cottons, barrels, plungers, or water used for mixing or bleaching also can transmit HIV. Do not share any of these items.

There are several local needle exchange sites that can trade new syringes for used ones. They also have information on drug treatment.

See the current **Needle Exchange Schedule** at [kingcounty.gov/health/hiv](http://kingcounty.gov/health/hiv). Click on "Drug Use and Harm Reduction" and then "Needle Exchange Schedule". Pharmacies in Washington State may also sell syringes to injection drug users to prevent the spread of blood-borne disease.

Any drug, including alcohol, can impair your judgment and coordination, making condom use more difficult. Be aware and seek support if you think you have a problem with substance abuse.

## HOW CAN I TELL IF I'VE BEEN INFECTED WITH HIV?

### You need to get tested for HIV.

You can have HIV and not know it. Many people with HIV infection do not have symptoms for many years. Many of the symptoms of early HIV infection are the same as other, less serious illnesses.

More than 50% of people have at least one symptom when they get infected. Symptoms may appear 2-4 weeks after getting HIV.

### Symptoms of recent HIV infection include:

- Fever
- Fatigue
- Rash
- Swollen tonsils or lymph nodes
- Sore throat
- Headache
- Joint or muscle aches
- Diarrhea
- Nausea or vomiting
- Night sweats

Most people don't have all these symptoms. Having these symptoms does not mean you have HIV. It may be the flu, mono, or something else like strep throat.

**But if you develop any of these symptoms after a possible exposure, it's a good idea to get tested.**

RNA and newer "4th generation" tests can usually detect HIV within 2 weeks after infection. See your healthcare provider as quickly as you can if you think you have been exposed to HIV. The sooner you get tested, the sooner you can start treatment. And remember, starting PEP (Post Exposure Prophylaxis) within 72 hours after exposure can prevent HIV from establishing itself in your body.

## HOW CAN I GET TESTED FOR HIV?

There are several ways to test for HIV. Some tests look for antibodies your body makes to fight HIV; others look for the virus itself. Some take about a week to get the results; others can give results in a few minutes. Some require a blood draw from the arm or just a finger stick; others use an oral swab.

Most clinics now use a test that can detect HIV within a few weeks after infection occurs. These tests can find signs of the HIV virus before your body mounts an immune response. Many older tests detect HIV infection only after the body has started producing antibodies against it. Newer **4th generation** tests look for a protein contained in the HIV viral core, while **RNA tests** look for the genetic material of the virus itself. Both of these tests can detect HIV usually within 2 weeks after infection.

Your doctor will tell you which test is right for you.

If an initial test is positive or does not give a clear result, the lab will do additional tests to determine if you have HIV.

HIV is not detectable immediately after infection. The time between HIV infection and when it will show up on a test is called the window period.

**If you test during the window period, the result may not be accurate.** Again, talk to your doctor or health care provider about a testing strategy that will work best for you.



## In King County, you can get an HIV test through:

- ➔ Your doctor
- ➔ Public Health clinics and testing sites
- ➔ Community health clinics and programs
- ➔ At-home testing kits sold in pharmacies

For more information about where to get tested for HIV, call **206-263-2000** or go to [kingcounty.gov/health/hiv](http://kingcounty.gov/health/hiv).

## WHAT DO HIV TEST RESULTS MEAN?

An HIV test does not tell you if you have AIDS or how long you have been infected or how sick you might be. It just tells you that you have the virus.

**A negative test** means you do not have HIV at the time of the test. A negative result does not mean that you are safe from future HIV infection.

### A positive result means:

- ➔ You have HIV
- ➔ You can give HIV to others, even if you don't have symptoms or you are on treatment
- ➔ You may or may not have AIDS

## IS THERE A CURE FOR HIV AND AIDS?

**Not yet.** There are drugs that can slow down the virus and protect your immune system. Researchers are still looking for a vaccine to prevent HIV infection and treatments to cure it after infection happens.

## HOW ARE HIV AND AIDS TREATED?

HIV treatment is often called **anti-retroviral therapy** or **ART**. It is recommended that people who become infected start HIV treatment immediately. The newer treatments are highly effective. They do not cure HIV

but they can prevent or slow down the damage it does to your body. Most people who start the medications early can live a near normal life.

There are different classes of HIV drugs. Each class attacks HIV in a different way. As it makes more copies, HIV can change slightly and the drugs may stop working. This is called developing resistance. It's very hard for HIV to get past several drugs at once so doctors often prescribe drugs in combination. Many of the newest medications combine different classes of drugs into a single pill. People who develop AIDS may also take other drugs to prevent or treat opportunistic infections.

There are programs in King County and Washington State to help people access and pay for HIV treatment. For health care and other HIV resources in King County, call the **HIV/STD Program** at **206-263-2000**.





**Public Health**  
Seattle & King County



**HIV/ STD Program**  
[kingcounty.gov/health/hiv](http://kingcounty.gov/health/hiv)  
**206-263-2000**

**Alternative formats available**

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