

Kentucky Mountain Health Alliance, Inc.

What You Need to Know About HIV and AIDS

While there have been great strides in the prevention of HIV transmission and care of HIV infection and AIDS since AIDS was first recognized in 1981, many people still have questions about HIV and AIDS. The information below is designed to answer some of these questions based on the best available science.

What are HIV and AIDS?

HIV is the human Immunodeficiency virus. It is the virus that can lead to acquired immune deficiency syndrome, or AIDS. CDC estimates that about 56,000 people in the United States contracted HIV in 2006.

There are two types of HIV, HIV-1 and HIV-2 in the United States, unless otherwise noted, the term "HIV" primarily refers to HIV-1.

Both types of HIV damage a person's body by destroying specific blood cells, called CD4+ T cells, which are crucial to helping the body fight diseases.

Within a few weeks of being infected with HIV, some people develop flu-like symptoms that last for a week or two, but others have no symptoms at all. People living with HIV may appear and feel healthy for several years. However, even if they feel healthy, HIV is still affecting their bodies. All people with HIV should be seen on a regular basis by a health care provider experienced with treating HIV infection. Many people with HIV, including those who feel healthy, can benefit greatly from current medications used to treat HIV infection. These medications can limit or slow down the destruction of the immune system, improve the health of people living with HIV, and may reduce their ability to transmit HIV. Untreated early HIV infection is also associated with many diseases including cardiovascular disease, kidney disease, liver disease, cancer. Support services are also available to many people with HIV. These services can help people cope with their diagnosis, reduce risk behavior, and find needed services.

AIDS is the late stage of HIV infection, when a person's immune system is severely damaged and has difficulty fighting diseases and certain cancers. Before the development of certain medications, people with HIV could progress to AIDS in just a few years. Currently, people can live much longer- even decades – with HIV before they develop AIDS. This is because of "highly active" combinations of medications that were introduced in the mid 1990's.

No one should become complacent about HIV and AIDS. While current medications can dramatically improve the health of people living with HIV and slow progression from HIV infection to AIDS, existing treatments need to be taken daily for the rest of a person's life, need to be carefully monitored, and come with costs and potential side effects. At this time, there is no cure for HIV infection. Despite major advances in diagnosing and treating HIV infection, in 2007, 35,962 cases of AIDS were diagnosed and 14,110 deaths among people living with HIV were reported in the United States.

HIV is spread primarily by:

- Not using a condom when having sex with a person who has HIV. All unprotected sex with someone who has HIV contains some risk.
 - Unprotected anal sex is riskier than unprotected vaginal sex.
 - Among men who have sex with other men, unprotected receptive anal sex is riskier than unprotected insertive anal sex.
- Having multiple sex partners or the presence of other sexually transmitted diseases (STDs) can increase the risk of
 infection during sex. Unprotected oral sex can also be a risk for HIV transmission, but it is a much lower risk than
 anal or vaginal sex.
- Sharing needles, syringes, rinse water, or other equipment used to prepare illicit drugs for injection.
- Being born to an infected mother HIV can be passed from mother to child during pregnancy, birth, or breastfeeding.

Less common modes of transmission include:

- Being "stuck" with an HIV-contaminated needle or other sharp object. This risk pertains mainly to healthcare workers.
- Receiving blood transfusions, blood products, or organ/tissue transplants that are contaminated with HIV. This risk is extremely remote due to the rigorous testing of the U.S. blood supply and donated organs/tissue.
- HIV may also be transmitted through unsafe or unsanitary injections or other medical or dental practices. However, the risk is also remote with current safety standards in the U.S.
- Eating food that has been pre-chewed by an HIV-infected person. The contamination occurs when infected blood from a caregiver's mouth mixes with food while chewing. This appears to be a rare occurrence and has only been documented among infants whose caregiver gave them pre-chewed food.
- Being bitten by a person with HIV. Each of the very small number of cases has included severe trauma with extensive tissue damage and the presence of blood. There is no risk of transmission if the skin is not broken.
- Contact between broken skin, wounds, or mucous membranes and HIV-infected blood or blood-contaminated body fluids. These reports also been extremely rare.
- There is an extremely remote chance that HIV could be transmitted during "French" or deep, open-mouth kissing with an HIV-infected person if the HIV-infected person's mouth or gums are bleeding.
- Tattooing or body piercing present a potential risk of HIV transmission, but no cases of HIV transmission from these activities have been documented. Only sterile equipment should be used for tattooing or body piercing.
- There have been a few documented cases in Europe and North Africa where infants have been infected by unsafe injections and then transmitted HIV to their mothers through breastfeeding. There have been no documented cases of this mode of transmission in the U.S.

HIV cannot reproduce outside the human body. It is not spread by:

- Air or water.
- Insects, including mosquitoes. Studies conducted by CDC researchers and other have shown no evidence of HIV transmission from insects.
- Saliva, tears, or sweat. There is no documented case of HIV being transmitted by spitting.
- Casual contact like shaking hands or sharing dishes.
- Closed-mouth or "social" kissing.

All reported cases suggesting new or potentially unknown routes of transmission are thoroughly investigated by state and local health departments with assistance, guidance, and laboratory support from CDC.

If you would like more information or have personal concerns, call CDC-INFO 8A-8P (EST) M-F. Closed weekends and major federal holidays at 1-800-CDC-INFO (232-4636), 1-888-232-6348 (TTY), in English, en Español

Would you consent to being tested for HIV? Yes_____ No_____

(Revised 08/03/2023)