



MEMBER GUIDE 25

HIV MANAGEMENT

**Supporting you every
step of the way**

DISCOVER THE
BRILLIANCE
OF **GEMS**

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What you need to know about HIV

What is HIV and can it be cured?

The Human Immunodeficiency Virus (HIV) diminishes the body's immune system. The immune system is the human body's natural defense against infections and diseases. Any defect in the immune system decrease a person's ability to fight off infections. Reduced immunity is not only caused by HIV but can also be caused by other conditions such as cancer and its treatment, chronic conditions like diabetes mellitus, and medications given during organ transplantation. Compared to a healthy person, an immunocompromised individual is more likely to get infections and heal more slowly or not heal at all.

After being infected by the virus the immune system begins to progressively fail. In the few weeks following infection a person may test HIV negative, because there isn't enough virus in their system to be picked up and the virus is not yet detectable by an HIV test. This is known as the window period. During this time a person can still infect others with HIV.

Life-threatening opportunistic infections (such as cryptococcal meningitis), inflammatory conditions (such as immune reconstitution inflammatory syndrome), tumours (such as Kaposi sarcoma) and cancers (such as cervix cancer) may develop over time as

the immune system becomes severely weakened. Opportunistic infections are given that term because they tend to occur when the opportunity of a very low immune status occurs. People living with HIV who are not on treatment or who stop taking their treatment may develop AIDS (acquired immune-deficiency syndrome), leading to poor health and death due to opportunistic infections and other medical conditions associated with depleted immune system.

The strength of your immune system is measured by looking at your CD4 count, which is of the amount of a specific type of immune cell that fights off infection. The HIV viral load is the amount of virus circulating in your blood stream. The higher your CD4 count and the lower your viral load is the healthier you are likely to be.

The treatment currently available can dramatically improve the health of people living with HIV and delay disease progression from HIV infection to AIDS. Until a cure is found, antiretroviral treatment needs to be taken daily for the rest of a person's life. Antiretroviral treatment increases the life expectancy of people living with HIV by stopping the virus from multiplying and allowing the immune system to recover.



How is HIV transmitted?

HIV is mainly transmitted through exposure to body fluids from an infected person. HIV can be transmitted through:

- Unprotected sexual intercourse with an HIV-infected person
- From mothers to their babies during pregnancy and breastfeeding. Sexual transmission accounts for most infections, but the following can also result in infection:
 - Contact with sharp instruments, for example, sharing needles during drug use, using a razor blade belonging to an
 - infected person, or having skin-piercing procedures (for example, tattooing) with unsterilised equipment.
 - Blood transfusions. This was initially one of the more common ways to contract HIV, but with enhancements in the screening for HIV and other infections in donated blood, transmission is rare.

Please remember that it is impossible to transmit the virus through casual kissing, shaking hands, hugging, sneezing, sharing the same seat or bed, using the same shower or toilets, or sharing eating utensils.

What would put me at greater risk of getting infected?

- Having sex with a partner whose HIV status you do not know.
- Unprotected (no condom) vaginal, oral, or anal sex.
- Multiple and simultaneous sexual partnerships.
- Untreated sexually transmitted infections.
- Men who are not circumcised.
- Injecting drugs with contaminated needles and syringes.
- Accidental needle-stick and splash injuries, particularly among healthcare workers.
- A baby of an HIV-positive mother who is not on effective treatment will also be at particular risk of infection.



How does HIV affect the body?

The role of the immune system is to defend the body against infections, inflammation and cancer. CD4 cells, a type of white blood cell, are like soldiers that protect the body from harm and help with overcoming most infections. In a healthy person the normal CD4 cell count is between 500 and 1500 cells in each cubic millilitre of blood.

When a CD4 cell is infected with HIV, it is transformed into a virus factory. The infected CD4 cell produces new HIV viruses. All new viruses are then released

into the bloodstream where they look for other CD4 cells to infect.

When HIV-infected CD4 cells have been circulating in the body for a while, they are destroyed. Over time, the immune system gradually loses large amounts of CD4 cells and is unable to fight off infections effectively. A person is considered to have AIDS when the CD4 count drops below 200. At this point, opportunistic infections, cancers and death become more likely if treatment is not started.



What is the relationship between HIV and other diseases?

Tuberculosis (TB)

Tuberculosis is one of the most common opportunistic infections associated with HIV. TB is mainly spread from one person to another when contaminated droplets in the air from someone's cough or sneeze are inhaled.

TB usually affects the lungs but can also be found in other parts of the body, such as the brain, the intestines, glands and bones. It is important to start TB treatment as soon as possible. Without treatment, TB can spread, making the infected person sicker over time and increasing their chances of dying.

Common symptoms of TB

- Coughing, sometimes with mucus or blood
- Fatigue
- Fever and chills
- Unintentional weight loss
- Loss of appetite
- Night sweats
- Cognitive decline, e.g. confusion or forgetfulness
- Reduced vision
- Joint pain

If you have any of the above symptoms, please consult your doctor.

AIDS

When the body's immune system is depleted by HIV infection, the person becomes more prone to serious infections and diseases. This means they have progressed to 'acquired immunodeficiency syndrome,' commonly known as AIDS.

Early signs and symptoms of AIDS

- Swollen lymph nodes ("glands") in the neck, behind the ears, under the arms or in the groin
- Thrush in the mouth or genital area
- Painful skin rashes
- Sores on the lips or in the mouth that do not heal

Starting treatment early can help to prevent developing AIDS, HIV, but treatment still works very well in those who already have AIDS.

Meningitis

Meningitis is an infection of the membranes covering the brain caused by bacteria, viruses, and fungi. The most common forms of meningitis in people with HIV/AIDS are bacterial, TB and cryptococcal meningitis.

Symptoms of meningitis include:

- Confusion
- Neck stiffness
- Extreme drowsiness or reduced consciousness
- Fever
- Convulsions or epileptic fits
- Weakness or paralysis

Meningitis is an emergency that should be attended to in a hospital as quickly as possible.

Cancer

Some cancers are most commonly seen in people living with HIV/AIDS and are known as AIDS-defining cancers.

These are:

- Kaposi's sarcoma
- Non-Hodgkins Lymphoma
- Conjunctival cancer (affects the eye)
- Cervix cancer
- HPV (human papilloma virus) – related cancers (e.g. penis or vulva)



Depression

Many people living with HIV experience depression and other mental health challenges, for various reasons.

Firstly, the shock of the unexpected diagnosis and coming to terms with what it means can lead to feelings of fear, guilt, shame, and hopelessness. Over time, adjusting to lifestyle changes, lifelong treatment, stigma, and changes in relationship dynamics can take their toll. Fear of telling loved ones that you have HIV, poor support and emotional stress can all contribute to the development of depression.

Someone with depression can have:

- Low/depressed mood, or be irritable and angry

- A loss of interest in activities and hobbies that they used to enjoy
- Disturbances in sleep patterns by either being unable to sleep or sleeping too much
- Changes in appetite by either not eating much or starting to eat too much
- Difficulty concentrating, increased forgetfulness
- Difficulties in their relationships at home or challenges at work

Someone experiencing these symptoms can be screened for depression by their healthcare provider. There are various treatment options available, which may include counselling and medication.

HIV and Chronic Diseases

When HIV first emerged, it significantly reduced the life expectancy of those who contracted it. Fortunately, advances in medication and care mean that people with HIV have a similar lifespan to those who are HIV negative. This means that a person with HIV is now at risk of developing chronic non-communicable diseases like high blood pressure, diabetes mellitus, high cholesterol, obesity and cancers not related to HIV infection.

Having HIV as well as one or more of these conditions usually means having more medication to take, but the dietary and lifestyle adjustments recommended for HIV are just as beneficial for other medical conditions as well. Further information on how these conditions are managed can be found in the Chronic Medicine Member Guide on www.gems.gov.za.

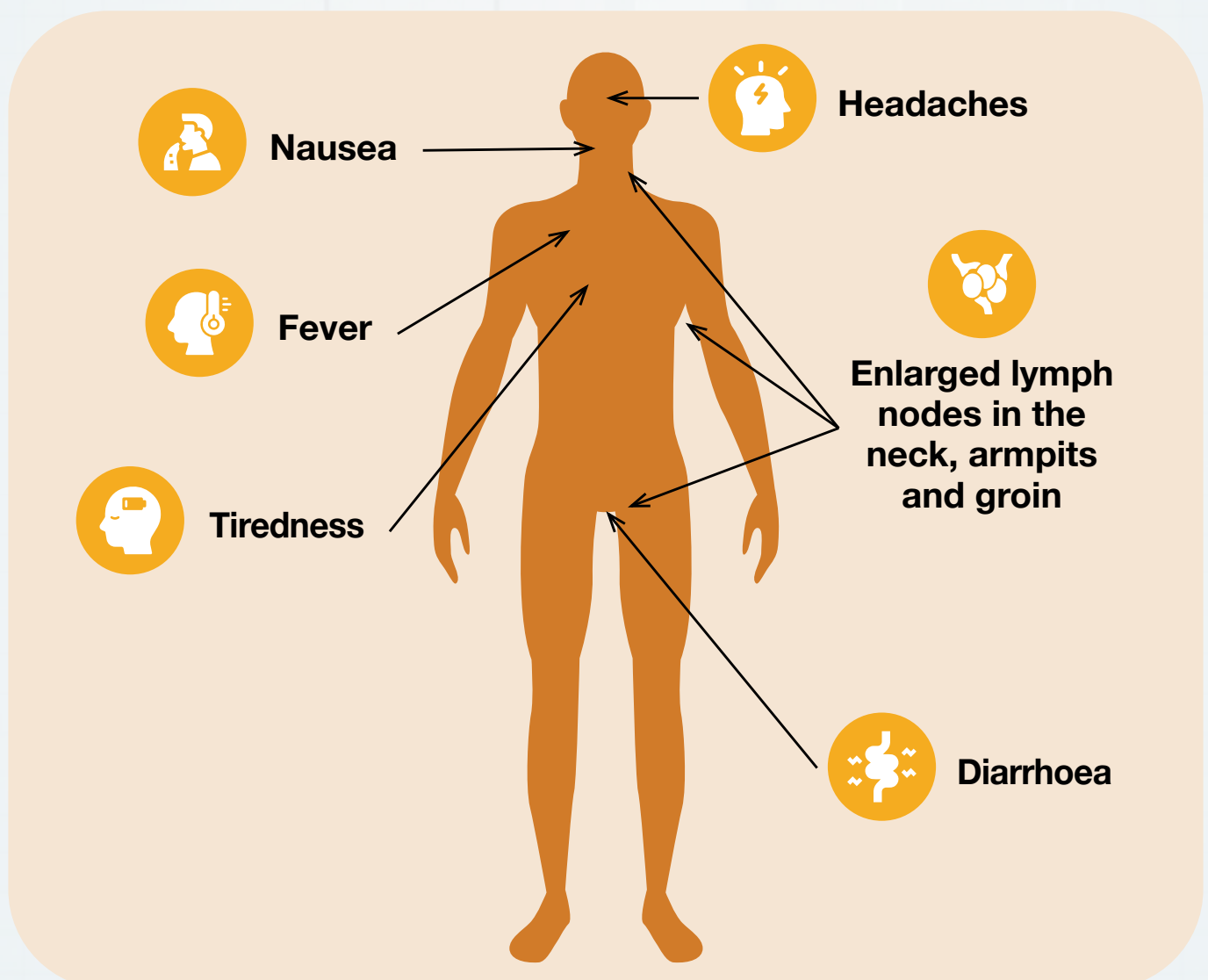


Knowing your HIV status

How do I test for HIV?

In the early stages of infection, HIV often causes no symptoms, and the infection can only be diagnosed through screening tests.

Although many people do not develop any symptoms when they first become infected with HIV, some will get a flu-like illness within three to six weeks after exposure to the virus. This illness may include:



Who should test for HIV, how often, and why?

Ideally, everyone should know their HIV status. However, some people are at more risk of infection than others. Testing is recommended if –

- You think you may have been exposed to HIV.
- You are sexually active.
- You have contracted a sexually transmitted disease.
- You have engaged in unprotected sexual activities with one or more partners.
- You are a healthcare worker with direct exposure to blood.
- You are pregnant or want to fall pregnant and want to avoid potentially transmitting the virus to your baby.

How often should I be tested?

- Yearly.
- Within 72 hours (3 days) after possible HIV exposure and three months thereafter.
- If you engage in risky sexual behaviour, you should continue to have yourself tested on a regular basis (for example, every six months to a year).
- Before or during pregnancy.



Benefits of HIV testing

- Prevention of transmission of the infection to others.
- Access to treatment early enough to avoid developing AIDS.
- The ability to live a healthy life.
- The ability to make informed choices.

What type of counselling must take place before and after an HIV test?

There is still considerable stigma and discrimination attached to HIV/AIDS, and you should be aware of the emotional trauma and the possible consequences a positive test could bring about. For these reasons, HIV testing cannot be done without counselling.

Counselling is the process of giving professional assistance and guidance before (pre-counselling) and after (post-counselling) the HIV test. During counselling, you can address your concerns, fears or any questions related to HIV.

Pre-test counselling

The counsellor should provide you with the following information before the HIV test:

- The benefits of testing.
- The potential risks, such as discrimination and abandonment.
- How the test is performed.
- A guarantee of confidentiality.
- The assurance that testing is voluntary.

The counsellor should also:

- Ask you why you want to be tested. It might be that you just want to know your HIV status, or that something happened to place you at risk of being infected with HIV.
- Ask if you have been tested for HIV before.
- Explain to you how HIV is transmitted.
- Ask how you will handle the outcome of the test, regardless of the result.

Pre-test information for women who are or may want to become pregnant includes:

- Risks of transmitting HIV to the baby.
- Measures that can be taken to prevent mother-to-child transmission of HIV.
- Benefits of early diagnosis and treatment of HIV to the baby and mother.



Post-test counselling

All individuals undergoing HIV testing must be offered counselling when their test results are given, whether positive or negative. The result must be given in person to the individual by a trained counsellor or healthcare professional.

The purpose of the post-test counselling session is:

- To make sure that the test result is understood by the person tested.
- To inform that person of the next steps they need to stay healthy and help prevent the spread of the virus.

If you have tested negative, the counsellor will:

- Explain the test result to you, including information about the window period*.
- Recommend that you test again in three months' time if you have recently been exposed to HIV.
- Give you basic advice on ways to prevent HIV transmission.
- Provide you with male or female condoms and guidance on their use.

If you have tested positive, the counsellor will:

- Provide you with psychosocial support to cope with the emotional impact of the test result.
- Help you to identify support structures, whether it is through a partner, a family member, or a support group.
- Help you to find treatment, care, and prevention services.
- Discuss whether you want to disclose your result to your loved ones, and if you do, when and how to do so.
- Provide information on other relevant preventative health measures such as good nutrition and the use of medicines to prevent infections.
- Arrange a specific date and time for follow-up visits or referrals for treatment, care, counselling, support, and other services that are appropriate.
- Refer you for additional tests to assess the stage of your infection. Among these tests are the CD4 count and viral load.

The counsellor will also:

- Provide you with information on how to prevent the transmission and spread of HIV.
- Provide you with male or female condoms and guidance on their use.





Can I be forced to have an HIV test?

HIV tests should always be voluntary; no one is allowed to force you to have an HIV test done, and you must give consent for an HIV test before it is done.

It is important that you read and understand what is written on the consent form. It usually states that:

- You have had a pre-test counselling session.
- The HIV test has been explained to you.

In some cases, it can also require your authorisation for the counsellor to:

- Contact you after the testing and counselling session.
- Give your contact details to GEMS.

You do not have to agree to have an HIV test done if you feel you need more time to think about it, or if you have any unanswered questions.

How will the HIV test be done?

There are several ways in which HIV testing can be done:

- Finger-prick rapid blood test
- Laboratory blood testing
- Saliva testing
- Urine specimen testing

These all test for antibodies against HIV.

How do antibody tests work?

- When a person is infected with HIV, the body responds by producing special proteins that fight the virus, called antibodies.
- An HIV test is used to detect the presence of these antibodies in blood, saliva and urine.
- If antibodies to HIV are detected, it usually means the person has been infected with HIV. Most people develop detectable HIV antibodies within three months of being infected.



Finger-prick rapid blood test

Rapid HIV antibody tests are used for the daily diagnosis of HIV. They are called 'rapid tests' as the results are available within 10-20 minutes. These tests usually have a 90-day (3-month) window period to detect HIV in 99% of samples.

Simple finger pricking is used to obtain a drop of blood, and the blood is tested using a special testing device. If the HIV test is positive, a second (confirmatory) test of a different type must be done. If this test is also positive, it will confirm that the HIV result is positive, and there will be no need to do another test. If the second/confirmatory test is negative, the results are called 'discordant.' Another blood test (HIV ELISA) must then be performed at a laboratory.



Laboratory blood testing

A blood sample is collected and sent to the laboratory for HIV testing. In newborns and children younger than 18-months old, a special test called an HIV PCR is done. In older children and adults, an HIV ELISA test is performed. The results of these tests are usually ready the following day. Tests done after the 3-month window period are 99.97% accurate.



Saliva testing

Instead of testing for HIV using a blood sample, a swab of the mouth is done, and the saliva is tested for HIV. These tests are generally less accurate than blood tests. These tests usually have a 90-day (3 months) window period to detect HIV in 99% of samples.



Urine specimen testing

A urine sample is tested for HIV antibodies. These tests are not available over the counter in South Africa and urine testing is the least accurate of all the tests.

How confidential will my test results be?

Counsellors all sign confidentiality clauses and are not allowed to disclose any information about your HIV status to anyone (for example, your employer,

partner, or family) without your consent. This means that you do not have to tell anyone your HIV status unless you choose to do so.

Can I relax if my test results are negative?

Even if your HIV test results are negative, you need to be aware of the following:

- HIV tests should be done regularly, especially if you are at any risk of infection.
- Certain behaviours can minimise your risk of infection. Refer to section 3 for ways you can protect yourself from HIV Infection.
- Having a negative HIV test does not mean that your partner is also negative. Encourage your partner to also get tested.
- If you were exposed to HIV in the six to 12 weeks before your test, you may be in the window period where you are infected, but your test shows a negative result. The window period lasts between 3 and 12-weeks so it is important to repeat the HIV test after 12-weeks to confirm the negative result.



Preventing HIV Infection

There are four ways to prevent acquiring HIV if you are at risk of contracting it.

1. U = U (Undetectable = untransmissible)

If your partner is HIV positive, it is important that they are on ART consistently to ensure that their HIV viral load is undetectable. A person whose viral load is undetectable cannot transmit the virus to another.

2. PEP (Post-Exposure Prophylaxis)

This is a 30-day course of antiretroviral medication that must be started as soon as possible (within 72 hours) after exposure to possible or confirmed HIV.

Situations where PEP would be beneficial include:

- Needlestick and splash injuries in healthcare workers or caregivers

- After sexual assault
- In the event of a condom tear during a sexual encounter with someone who is known to be HIV positive with a detectable viral load, or someone whose HIV status is unknown

In these instances, exposure to HIV does not occur regularly

3. PrEP (Pre-Exposure Prophylaxis)

PrEP is for HIV negative people who come in frequent contact with possible or known HIV exposure. It is antiretroviral (ARV) treatment that is used proactively to protect people for as long as it is needed, for example:

- HIV negative partners of those living with HIV.
- Sex workers.
- People with multiple sexual partner.

PrEP is usually taken in the form of ARV tablets which are a fixed-dose combination of 2 medications.

In select cases, PrEP also comes as a vaginal ring containing Dapivirine. The plastic, flexible ring is inserted into the vagina by the woman herself and is changed every 4 weeks. It does not need to be removed during menstruation.

In the pipeline is the introduction of long-acting cabotegravir injections (CAB-LA), which can be administered every 4 to 8-weeks to prevent HIV infection but availability and cost of these injections is still unknown.

4. VTP (Vertical Transmission Prevention)

VTP, also known as PMTCT (prevention of mother-to-child transmission), is used to reduce the number of babies born with HIV.

This is done by:

- Ensuring that HIV-positive women are on effective ART as soon as possible so that the HIV viral load is undetectable for as long as possible during pregnancy.
- Practicing safe delivery techniques to minimise transmission during labour and birth.
- HIV PCR testing of all newborns exposed to HIV during pregnancy.
- Providing prophylactic/preventative Nevirapine syrup to all HIV-exposed newborn babies.
- Exclusive breastfeeding, HIV-negative breastmilk donation or formula feeding options.

Through VTP, the risk of transmission is minimised, and fewer children are born HIV negative.



Living well with HIV

Can a positive test result be wrong?

If your first HIV test was positive, a second (confirmatory) test would have been done to confirm the result as HIV- positive. Only if you have had two positive results,

will you be diagnosed as being HIV-positive, and no further tests will be needed to confirm the diagnosis.

What does a confirmed positive test result mean?

Two positive HIV tests mean that you are infected with HIV. However, it does not mean that you have AIDS, nor is it a death sentence.

Most people living with HIV find it easy to treat and manage themselves. ARVs can give you a normal life expectancy and an excellent quality of life. If you take

your medicine, your quality of life will improve and you will live a longer, healthier, and more productive life.

However, because a person living with HIV is infected for life, you must remember that you can pass the virus to others if your viral load is detectable.

If you are diagnosed with HIV



Get help from your partner, friend or relative.



Learn about the disease.



Take care of your health.



Disclose your status to your sexual partner(s) so they can also be tested.





What treatment will I typically receive?

Although there is no cure or vaccine for HIV infection yet, ARVs are highly effective in combatting the effects of HIV. They prevent the virus from multiplying, which allows the body to restore and strengthen its immune system. When taken properly, these medicines can improve general health and quality of life and increase life expectancy.

In general, individuals are given a fixed-dose combination (FDC) tablet of three different antiretroviral medicines. These are combined into one pill to make it easier for a member to stick to treatment. In some instances, taking fixed-dose combinations is not possible, and people may have to take two or more ART tablets to get the infection under control.

ART is adapted to suit the needs of each individual and is prescribed by a family doctor (FP) or general practitioner (GP). HIV treatment is permanent and lifelong. It is effective if the person is committed and consistent in taking the medicine on time, and every day. Your doctor will monitor the efficacy of your treatment by assessing you every six months, or more frequently if necessary.

Like most medicines, ARVs can cause side effects.

These unwanted effects are often mild but can sometimes be more serious and impact the health or quality of life of the individual. These side effects vary from person to person, and it is impossible to predict how everyone will be affected.

The side- effects include:

- Diarrhoea.
- Nausea and/or vomiting.
- Rash.
- Changes in weight and/or fat distribution.

It is essential to report any side effects during your appointment with your doctor. Do not stop your ARVs without first consulting your doctor. Most side effects are transient, and your doctor can give advice and provide medication to manage the side effects until they improve.

Some opportunistic infections are preventable through drug therapy. This is known as prophylactic treatment. Prophylactic treatment can be given against TB, pneumonia, and meningitis. Your doctor will determine the need for prophylactic treatment.

What are the key things I should do if I am HIV-positive?



Find a support system

Find friends, family members and/or counsellors who will be supportive, to help you adjust and learn to live with HIV.



Learn more about HIV

The more you know about HIV, the better you can use that information to help you stay healthy and strong.



Go for regular check-ups

- Regular check-ups can identify illnesses that can be treated, so do not wait until you become ill to go for a check-up. It is preferable that you see your doctor at least twice a year.
- Get your CD4 cell count, and viral load (VL) tested regularly, as prescribed by your doctor.
- Get weighed regularly to monitor and manage any changes in weight.

What lifestyle habits can help me manage my condition?

Rest and relax

- The body needs extra rest. Aim to sleep for eight hours every night.
- Rest whenever you are tired.
- Find healthy ways to cope with stress as it can harm your immune system. Counselling is a great support if you are constantly worried or have problems.
- Relax with people you love, your family, children, and friends.
- Do things you enjoy, such as listening to music or reading a newspaper or book.





Exercise

Exercise regularly (at least three times a week) to help:

- Keep your mind healthy.
- Keep your body strong.
- You sleep better.
- Improve your appetite.
- Relieve stress.

Eat well

The food you eat is particularly important in determining the strength of your immune system and whether you stay healthy or not. 'Eating well' means eating a range of different foods every day that will help keep your body healthy.

A healthy diet should provide enough:

- Vitamins (found in fruit and vegetables).
- Minerals (found in foods such as pumpkin seeds, fish, nuts, spinach, fruit, and vegetables).
- Carbohydrates (found in grain and cereals).
- Proteins (found in meat, fish, dairy, beans and legumes and other foods).



Avoid unhealthy habits

Alcohol, recreational drugs, and smoking can weaken your body by breaking down immune cells.

- Minimise alcohol intake, as it can make ARVs less effective, reduce your appetite and lead to risky behaviour.
- Avoid smoking because it increases the risk of illnesses such as pneumonia and certain cancers.
- Avoid using recreational drugs as they may weaken the immune system.

How can I make the best of my ARVs?



Start ART as soon as possible after diagnosis

Research has shown that the sooner ART is started, the better the prognosis for anyone living with HIV, regardless of their CD4 count at diagnosis. Starting ART immediately or soon after diagnosis has been associated with a healthier and longer life, and limits transmission of the virus to others.



Be compliant to treatment

Compliance is the key element for treatment success. This means adhering to your treatment plan, not missing doctors' appointments, doing laboratory tests as required (usually twice a year), and taking all the prescribed medicine consistently and as instructed by your doctor or pharmacist. It also means being committed to a healthy lifestyle.

The social stigma associated with HIV can result in non-compliance with treatment, as some HIV-positive individuals are afraid to be rejected by their partners, family, colleagues, or friends if they find out about their HIV- positive diagnosis. They will not go to the clinic or fetch their medicine at the pharmacy because they fear that someone could disclose their status to other people they know. Defaulting, or not taking your medication, can result in an increase in HIV viral load and a reduced CD4 count, leading to a compromised immune system which can no longer properly fight off infections such as TB and thrush, and other medical conditions such as cancer.



Take your ARVs exactly as prescribed

If you do not take your ARVs as prescribed, the virus can eventually develop resistance to the medication. This means that the medication is less effective at fighting the virus and will thus need to be changed. There are a limited number of ARVs that can be used to treat HIV infection, so it is best to avoid developing a resistance to your medication. This will mean that your doctor could have other treatment options available at a later stage, if needed.

Taking your ARVs every day at the right time and in the right way keeps optimal levels of the medication in your bloodstream, which will prevent the virus from becoming resistant to your medication. Use your watch or cellphone alarms to help you to remember to take your medicine.



Use cost-effective generic alternatives to avoid unnecessary co-payments.

Generic medication has the same molecule, dose and strength as the original, but is manufactured by different companies. Generic medications are generally less costly than the original branded medication. If you have any questions regarding cost- effective generic medication, your pharmacist will be able to assist.



Take ARV pills with food and liquids

- Food can reduce the nausea caused by some pills.
- Some pills are better absorbed when taken with food.
- Do some gentle exercise (such as stretching or going for a short walk) before eating, to increase your appetite.



Notify your doctor if you missed taking your medicine, or if you have side effects

Missing your medicine can result in HIV becoming resistant to ARVs. If you miss an ARV dose on a rare occasion, it will usually not result in failure of the treatment. However, if you frequently miss or skip doses of your ARVs, the virus may develop resistance to the treatment and will become ineffective.

In some instances, it may be necessary to make changes to your ARV medication, such as if you experience significant side effects to certain medications. Because most side effects disappear within a few weeks after starting treatment, your doctor may first encourage you to continue with the original treatment for some time. Your doctor may also opt to change your treatment if the side effects are severe, or don't improve with time.

How can I protect others from HIV?

If your partner is HIV-negative

- Consistently practice safe sex, e.g. using condoms.
- Always take your medicine on time to help lower the viral load (measurement of the amount of virus in blood) in your body fluids and decrease the chance of transmitting HIV to your partner.
- The recommendations for serodiscordant couples (where one partner is HIV-positive and the other one is HIV-negative) include offering antiretroviral treatment to the HIV-positive partner as early as possible (discuss this with your treating doctor, especially if you want to plan a pregnancy).

Things you should do

- Be responsible when having sex. Use condoms correctly and consistently. This is the safest way to avoid the transmission of STIs and will help you to avoid contracting a different strain of HIV.
- If you are pregnant, use condoms every time you have sex, even if you and your partner are already living with HIV. This will prevent you from being re-infected.
- Before and during pregnancy, talk to your doctor about taking ARVs to reduce the risk of transmission of HIV to your baby. Also discuss feeding options. Inform the GEMS HIV Disease Management Programme and register on the vertical transmission prevention programme (VTP).
- Tell your partner(s) that you are living with HIV as this provides them with the opportunity to support you and protect themselves. It can be difficult to tell your sexual partner(s), but they need to know so they can also get tested and seek the support they may need.
- Tell your potential sexual partner your HIV status so that you can agree on practicing safe sex.

- If you are a man living with HIV and had sex with a woman who became pregnant, you need to tell the woman so that she can get early medical care for her and her baby's health, even if you are not sure if you are the father.
- To discuss with your treating doctor for any information and requirements for blood, plasma, or organ donations.
- To reduce alcohol intake as alcohol will affect the effectiveness of the ARVs and your general well-being leading to complications and opportunistic infections.

Things you should NOT do if you are HIV- positive

- Do not share razors or toothbrushes. HIV can be spread through fresh blood on such items.
- Do not share needles for injecting drugs. Seek help if you inject drugs, as you can better fight HIV if you refrain from using substances or practice harm reduction techniques such as using clean needles and syringes.



How GEMS covers HIV testing, prevention and treatment

What HIV benefits are offered by GEMS?

GEMS offers comprehensive preventative care and screening benefits to all members. A full list is available on the GEMS website >>> (For Individuals) >>> (Preventative Screening). The following benefits are included in the HIV benefit:

PREVENTATIVE/SCREENING BENEFITS	HIV BENEFITS
SCREENING TESTS*: - HIV counselling and testing. - TB screening. - Pap smear. - Mental health assessment. VACCINES: - Hepatitis B vaccine (1 per lifetime). - Flu vaccine (annually). - Pneumococcal vaccines (every 5 years for at-risk beneficiaries). - Human Papilloma Virus (HPV) vaccine. HIV Prevention: - Pre-Exposure Prophylaxis (PrEP). - Post-Exposure Prophylaxis (PEP). - Vertical Transmission Prophylaxis (VTP) to prevent mother-to-child admission.	- FP consultations, including HIV counselling and testing. - Blood tests (CD4, viral load, liver function, kidney function). - Antiretroviral treatment (authorisation required). - Registration on the GEMS HIV Disease Management Programme (DMP). - Specialist Consultations**.

* Screening tests can be done by your doctor, at occupational health (wellness) clinics in your workplace, and during GEMS wellness days.

** Members on the Tanzanite One and Emerald Value options require a referral from a network FP for Specialist consultations.

Testing and counselling are covered on all benefit options even if you are not registered on the HIV Management Programme. Should you or one of your registered beneficiaries wish to access the full range of benefits for people living with HIV, you will need to register on the HIV Management Programme. See how to enroll in the next section.

How can the GEMS HIV Disease Management Programme help?

If you or one of your registered beneficiaries enroll on the programme, you will receive the support you need to lead a healthy and productive life, with access to the following benefits:



Medicine to treat HIV (ARVs).



Medicines to treat and prevent opportunistic infections, including multivitamins where appropriate. (Note that a doctor's script and pre-authorisation is required for all medicines, including multivitamins.)



Pathology tests (all blood tests related to monitoring and diagnosing your condition as per your care plan).



Regular monitoring of your condition to ensure that you start treatment at the right time, that your treatment is effective and that you are compliant.



Clinical support and guidelines for your treating doctor.



Access to a specially trained medical team who will review your details and consult with your doctor to ensure that you receive the most appropriate treatment for your condition.



Reminders to go for regular check-ups and tests to monitor the state of your health and update your treatment where necessary.



Treatment to prevent the transmission of the virus from mother to child (including treatment for the baby).



Advice for an HIV-negative partner planning to have a baby with an HIV-positive partner.



Treatment to prevent the transmission of the virus if you should accidentally expose any of your HIV-negative dependents or if you are HIV-negative and you are exposed to infected bodily fluids.

How can I enroll on the GEMS HIV Disease Management Programme?

Enrolling is simple, and the sooner you (or any of your registered beneficiaries) do so after a positive diagnosis, the better. Your information is kept strictly confidential since the programme is managed by a team of health professionals and is run separately from other GEMS programmes and your employer.

You can use any of the channels below for more information on the programme, to ask for an application form to enroll, or for contact details of treating doctors in your area:



Call 0860 436 736, from Monday to Friday between 8:00 and 17:00 and Saturday from 8:00 to 12:00.



Send a 'please call me' or an SMS with your name and contact number to 083 843 6764 and a treatment counsellor will contact you within 24 hours.



Email hiv@gems.gov.za

Next steps

Visit your treating doctor, who will examine you and complete your application form to join the GEMS HIV programme. You will need to sign the application form, and your doctor should submit it to GEMS by email to hiv@gems.gov.za, or by fax to the confidential toll-free fax number 0800 436 732.

As soon as your application has been received and approved, you will be notified via your preferred method of communication (SMS, post, or email). You will then be able to access the relevant HIV medical care benefits.



Notes

Get in touch

General Enquiries



EMAIL
enquiries@gems.gov.za



FAX
0861 00 4367



POSTAL ADDRESS
GEMS, Private Bag X782
Cape Town, 8000



WEB
www.gems.gov.za



GEMS CONTACT CENTRE
0800 00 4367



GEMS FRAUD HOTLINE
0800 212 202
gems@theline.co.za



GEMS EMERGENCY SERVICES
0860 44 4367

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