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**Journal Articles
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ACSA Information Services Current Awareness Service

GUIDE TO USE

This list contains references to articles held in journals in the ACSA Library. Articles are listed under subject headings to make them easy to find. Please refer to the table of contents for the subjects included in this issue. You can request copies of these articles by following the instructions below.

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HIV/AIDS Journal Articles Index

CONDOMS

6479

"Condom embarrassment: coping and consequences for condom use in three countries"

Location:

AA VERTICAL FILE - CONDOMS - CON 27

Publication Type:

JOURNAL ARTICLE

by Moore, Sarah et al

AIDS CARE

Volume: 20 Issue: 5 Day: Month: May Year: 2008 Page numbers: pp 553-559

Subjects:

1. CONDOMS 2. PUBLIC ATTITUDES

Abstract:

This study investigates embarrassment related to condom purchase, carrying, storage, use, and disposal in three countries. We identify the consequences of purchase embarrassment for condom use and explore strategies that individuals use to cope with purchase-related embarrassment. Surveys were distributed in Shanghai, China and Seoul, Republic of Korea based on a survey developed and previously distributed in Vancouver, Canada. Despite different levels of development and differences in attitudes and policies toward sexuality in these countries, we find remarkably similar results. In all three countries, condom-related embarrassment extends beyond condom use to pre- and post-use situations. The embarrassment associated with purchasing condoms exceeds that of using condoms, and purchase-related condom embarrassment significantly and negatively impacts the frequency of condom use. Individuals use multiple coping strategies to combat purchase-related embarrassment until this embarrassment decreases with age and experience, and coping strategies are no longer needed to enable condom purchase. In short, embarrassment associated with condoms goes beyond embarrassment about condom use. Purchase-related embarrassment and the strategies individuals use to cope with this embarrassment must be considered in order to promote consistent condom use and improve sexual and reproductive health worldwide.

GAY MEN

6468

"Killer Gay Sex!"

Location:

AA VERTICAL FILE - GAY MEN - GM 37

Publication Type:

ARTICLE (ONLINE)

by Valenzuela

POZ & AIDSMEDS

Volume: Issue: Day: 7th Month: May Year: 2008 Page numbers:

Subjects:

1. GAY MEN 2. HIV 3. STIGMATIZATION 4. HOMOPHOBIA

Abstract:

The clueless tabloid and public health hysteria over man-on-man sex may be hindering HIV prevention efforts. From an imaginary "super strain" of HIV to the

sci-fi MRSA superbug: What is it about gay sex that makes U.S. health officials want to play Chicken Little with AIDS prevention and public safety?

6474

"Sex, love, friendship, belonging and place: Is there a role for 'Gay Community' in HIV prevention today?"

Location:

AA VERTICAL FILE -GAY MEN - GM 39

Publication Type:

JOURNAL ARTICLE

by Rowe, Matthew S ; Dowsett, Gary W

CULTURE, HEALTH & SEXUALITY

Volume: 10 Issue: 4 Day: Month: May Year: 2008 Page numbers: pp 329-344

Subjects:

1. GAY MEN(AUST)
2. GAY MEN WITH HIV
3. GAY MEN-EDUCATION(AUST)
4. COMMUNITY DEVELOPMENT
5. HEALTH PROMOTION

Abstract:

The decade since highly active anti-retroviral therapy (HAART) arrived has been a time of change for gay men in the West. HIV incidence rates have been levelling off—and in some cities, increasing markedly—for the first time since the early years of the pandemic. New sexual subcultures have found expression, including Internet chat rooms, 'poz-only' sex parties, 'barebacking' and crystal methamphetamine use. These circumstances force a re-evaluation of HIV prevention targeting gay communities. We examine the antecedents of current HIV-prevention dilemmas in findings from a qualitative study of gay men who were personally and professionally engaged in HIV/AIDS in Sydney, Australia, in 1997-1998, immediately after the 'protease moment'. The men's lives were characterized by constant and difficult negotiation of gay subjectivities. They did not find a place of uniform belonging in the gay community; rather, ambivalence—toward the gay community and HIV prevention—and fragmentation emerged as themes. Our findings suggest that by the late 1990s, the ethos of safe sex developed in the early HIV/AIDS period was no longer a unifying cultural value. We explore the conditions that led to this shift and the implications for HIV prevention in the 21st century.

6482

"Morality, responsibility and risk: Negative gay men's perceived proximity to HIV"

Location:

AA VERTICAL FILE - GAY MEN - GM 40

Publication Type:

JOURNAL ARTICLE

by Keogh, Peter

AIDS CARE

Volume: 20 Issue: 5 Day: Month: May Year: 2008 Page numbers: pp 576-581

Subjects:

1. GAY MEN
2. RISK ASSESSMENT
3. DISCLOSURE OF HIV POSITIVE STATUS

Abstract:

In order to examine the ways in which men's perceptions of their social surroundings influence how they experience and negotiate sexual risk, we

conducted a qualitative study with 36 men who lived in London or Birmingham, had five or more male partners in the previous year and believed themselves to be HIV negative. Men were recruited into two sub-samples (18 men each). The high proximity group personally knew someone with HIV and had a positive sexual partner in the year prior to interview. The low proximity group had never personally known anyone with HIV and had never had a sexual partner who they knew or believed to be HIV positive. Data was collected via semi-structured interviews. Men in the low proximity groups used moral discourses to articulate beliefs and social norms around the disclosure of HIV which may act as a deterrent to sexual partners disclosing. Although most expected positive sexual partners to disclose, they had difficulty in articulating how they would respond to disclosure and how they would manage any consequent sexual risk. For the men in the high proximity group, living around HIV constituted a part of everyday life. Disclosure and discussion of HIV did not violate their social norms. The majority did not expect positive sexual partners to disclose to them and knew how they would respond to such disclosure if it occurred. Men in this group did not use moral discourses but talked practically about better and worse ways of managing disclosure. Proximity to HIV is mediated by strong social norms and self-perpetuating moral discourses which effectively creates a social divide between men who perceive themselves to be in low proximity to HIV and their HIV positive contacts and sexual partners. Men with perceived low proximity to HIV are appropriate as a target group for HIV prevention.

6484

"Are gay communities dying or just in transition? Results from an international consultation examining possible structural change in gay communities"

Location:

AA VERTICAL FILE - GAY MEN - GM 41

Publication Type:

JOURNAL ARTICLE

by Simon Rosser, B R; West, William; Weinmeyer, Richard

AIDS CARE

Volume: 20 Issue: 5 Day: Month: Mat Year: 2008 Page numbers: pp 588-595

Subjects:

1. GAY MEN 2. GAY MEN-EDUCATION 3. GAY MEN-RISK BEHAVIOUR 4. SOCIAL ASPECTS 5. PREVENTION AND CONTROL

Abstract:

This study sought to identify how urban gay communities are undergoing structural change, reasons for that change, and implications for HIV prevention planning. Key informants (N=29) at the AIDS Impact Conference from 17 cities in 14 countries completed surveys and participated in a facilitated structured dialog about if gay communities are changing, and if so, how they are changing. In all cities, the virtual gay community was identified as currently larger than the offline physical community. Most cities identified that while the gay population in their cities appeared stable or growing, the gay community appeared in decline. Measures included greater integration of heterosexuals into historically gay-identified neighborhoods and movement of gay persons into suburbs, decreased number of gay bars/clubs, less attendance at gay events, less volunteerism in gay or HIV/AIDS organizations, and the overall declining visibility of gay communities. Participants attributed structural change to multiple factors including gay neighborhood gentrification, achievement of civil rights, less discrimination, a vibrant virtual community, and changes in drug use. Consistent

with social assimilation, gay infrastructure, visibility, and community identification appears to be decreasing across cities. HIV prevention planning, interventions, treatment services, and policies need to be re-conceptualized for MSM in the future. Four recommendations for future HIV prevention and research are detailed.

GLOBAL EPIDEMIC

6463

"Circumcision and partner reduction should be priorities for HIV prevention, say US researchers"

Location:

AA VERTICAL FILE - GLOBAL EPIDEMIC - GE 30

Publication Type:

ARTICLE (ONLINE)

by Carter, Michael

AIDSMAP

Volume: Issue: Day: 10th Month: May Year: 2008 Page numbers:

Subjects:

1. GLOBAL EPIDEMIC
2. AFRICA
3. CIRCUMCISION
4. ECONOMIC ISSUES
5. UNAIDS

Abstract:

Investigators in the US are calling for male circumcision and partner reduction to become the focus of prevention efforts in countries with generalised HIV epidemics. In a paper published in the May 9th edition of Science, they argue that although condom use, testing, and treatment of sexually transmitted infections are of value, resource constraints mean that attention should be shifted to the promotion of initiatives known to work: male circumcision and partner reduction. A separate article in the British Medical Journal argues that a gay "rights agenda" set the scene for HIV exceptionalism, maintaining that only 10% of the current annual budget is needed for HIV programmes and that UNAIDS should be abolished.

HEALTH & FINANCIAL ISSUES

6478

"Gender differences in patterns of HIV service use in a national sample of HIV-positive Australians"

Location:

AA VERTICAL FILE - HEALTH & FINANCIAL ISSUES - HF 45

Publication Type:

JOURNAL ARTICLE

by Thrope, Rachel ; Grierson, Jeffrey ; Pitts, Marian

AIDS CARE

Volume: 20 Issue: 5 Day: Month: Year: 2008 Page numbers: pp 547-552

Subjects:

1. HIV POSITIVE PEOPLE-HEALTH CARE NEEDS
2. WOMEN WITH HIV(AUST)
3. DISCRIMINATION(AUST)
4. DISCLOSURE OF HIV POSITIVE STATUS
5. HEALTH CARE WORKERS-ATTITUDES(AUST)

Abstract:

There have been clear gender differences in the experience of living with HIV in Australia since the start of the epidemic. This paper examines the patterns of health service use and experiences at those services over a period of six years.

The results reported here are drawn from the HIV Futures surveys, four consecutive national, cross-sectional Australian surveys of the lives of PLWHA. Women were found to use different medical services to men both for non HIV-related and HIV-related treatment, being more likely to use generalist services and hospital-based HIV specialists. Women also reported higher rates of discrimination at health services, however reports of new incidences of discrimination were found to decrease from 2001 onwards. Although women reported higher levels of unwanted disclosure of HIV status than men, particularly by health care workers, new reports of unwanted disclosure decreased between 2003 and 2005. These data indicate that there are long-term gender differences in medical service use by PLWHA in Australia, and that this has been associated with higher rates of discrimination and loss of confidentiality for women. However the decrease in new reports of discrimination over time indicates that improved education of health service providers has been successful.

6481

"Positive futures? The impact of HIV infection on achieving health, wealth and future planning"

Location:

AA VERTICAL FILE - HEALTH & FINANCIAL ISSUES - HF 46

Publication Type:

JOURNAL ARTICLE

by Harding, Richard; Molloy, Tim

AIDS CARE

Volume: 20 Issue: 5 Day: Month: May Year: 2008 Page numbers: pp 565-570

Subjects:

1. LIVING WITH HIV/AIDS 2. HAART 3. GAY MEN WITH HIV-PSYCHOSOCIAL ASPECTS 4. GREAT BRITAIN

Abstract:

Although HIV is now cast as a chronic condition with favourable clinical outcomes under new treatments, it is unclear how living with HIV affects expectations and planning for the future. This mixed-methods study aimed to investigate UK gay men's expectations of their own future when living with HIV, and to identify the health and social interventions required to enhance roles, participation and personal fulfilment. A preliminary focus group identified relevant domains of enquiry for a subsequent online cross-sectional survey. A total of 347 gay men living in the UK with HIV participated in the survey, and 56.6% were currently on treatment. However, high 7-day prevalence of psychological and physical symptoms was identified (42.6% in pain, 80.2% worrying); 57.8% perceived reduced career options due to their infection and 71.8% reduced life expectancy. Being on treatment was not significantly associated with perceived life expectancy. Coded open-ended survey data identified eight principle themes related to goal planning and attainment. The integrated open and closed data items offer an understanding of barriers and challenges that focus on poor mental health due to clinical inattention, discrimination and stigma, poor career and job opportunities due to benefit and workplace inflexibility and lack of understanding, a lack of personal goals and associated skills deficit related to confidence and self esteem. Gay men living with HIV require an integrated holistic approach to wellbeing that incorporates clinical, social and individual intervention in order to lead productive lives with maximum benefit from treatment gains.

HEPATITIS

6464

"HIV reduces body's ability to control hepatitis C replication"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 32

Publication Type:

ARTICLE (ONLINE)

by Legge, Adam

AIDSMAP

Volume: Issue: Day: 9th Month: May Year: 2008 Page numbers:

Subjects:

1. HEPATITIS C 2. HIV

Abstract:

HIV infection significantly impairs the body's ability to keep the replication of the hepatitis C virus (HCV) under control when coinfection occurs, says an international group of researchers in an article published in the June 1st edition of the Journal of Infectious Diseases.

6473

"Higher LDL cholesterol levels mean better response to anti-HCV treatment in HIV/HCV coinfecting patients"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 36

Publication Type:

ARTICLE (ONLINE)

by Thaczuk, Derek

AIDSMAP

Volume: Issue: Day: 16th Month: May Year: 2008 Page numbers:

Subjects:

1. HEPATITIS C 2. HIV POSITIVE PEOPLE 3. TREATMENTS

Abstract:

HIV/HCV co-infected individuals with higher "bad" LDL cholesterol levels are more likely to respond successfully to anti-hepatitis C treatment than those with lower levels of LDL. While several previous studies had shown higher LDL to predict better treatment response in hepatitis C-monoinfected individuals, this retrospective study – reported in the May 11 issue of AIDS – is the first to show a similar effect in co-infected individuals.

HIV RELATED CONDITIONS

6471

"HIV increases risk of nine non-AIDS-defining cancers, largest-ever observational study finds"

Location:

AA VERTICAL FILE - HIV RELATED CONDITIONS - HRC 51

Publication Type:

ARTICLE (ONLINE)

by Bernard, Edwin J

AIDSMAP

Volume: Issue: Day: 22nd Month: May Year: 2008 Page numbers:

Subjects:

1. HIV POSITIVE PEOPLE 2. CANCER

Abstract:

Nine non-AIDS-defining cancers are more likely to be seen in HIV-positive individuals compared with the general population, according to the largest analysis ever undertaken of cancer incidence trends among HIV-positive individuals in the United States.

Notably, the study, published this week in the Annals of Internal Medicine (available online here) found that anal cancer is almost 60 times more common in HIV-positive individuals compared with the general population, and, say the investigators "incidence rates are expected to increase as HIV-infected persons live longer."

LEGAL ISSUES

6476

"Homosexually active men's views on criminal prosecutions for HIV transmission are related to HIV prevention need"

Location:

AA VERTICAL FILE - LEGAL ISSUES - LI 25

Publication Type:

by Dodds, Catherine

AIDS CARE

Volume: 20 Issue: 5 Day: Month: May Year: 2008 Page numbers: pp 509-514

Subjects:

1. HIV TRANSMISSION 2. LEGAL ASPECTS(GREAT BRITAIN) 3. PREVENTION AND CONTROL 4. GAY MEN

Abstract:

There has been much debate and discussion about the potential public health impact of the emergence of criminal prosecutions for the sexual transmission of HIV in the United Kingdom. This paper offers a unique opportunity to examine data that connects views on criminal prosecutions with evidence of HIV prevention need among an opportunistic sample of men in the UK who are homosexually active. Quantitative and qualitative data on criminal prosecutions were collected as a part of the Gay Men's Sex Survey 2006, and this paper represents an initial analysis of those responses. The data demonstrate how dominant views on criminal prosecutions come into direct conflict with health promotion aims, thereby exacerbating pre-existing HIV prevention need in a population at increased risk of participating in HIV transmission. This conflict is most clearly apparent in the close relationship between men's support of criminal prosecutions, and their expectation that a partner with diagnosed HIV will disclose his status before engaging in sex. Changing such unrealistic and universalised expectations has long been an aim of HIV prevention planning that targets Gay and Bisexual men, yet it would appear that the popularity of criminal prosecutions helps to resist attitudinal change, thereby exacerbating HIV prevention need.

POST-EXPOSURE PROPHYLAXIS

6477

"Physicians' and patients' adherence to antiretroviral prophylaxis after sexual exposure to HIV: results from South-Eastern France"

Location:

AA VERTICAL FILE - POST-EXPOSURE PROPHYLAXIS - PEP 26

Publication Type:

JOURNAL ARTICLE

by Rey, Dominique et al

AIDS CARE

Volume: 20 Issue: 5 Day: Month: May Year: 2008 Page numbers: pp 537-541

Subjects:

1. POST EXPOSURE PROPHYLAXIS 2. COMPLIANCE

Abstract:

French national guidelines for the management of HIV non-occupational post-exposure (nPEP) were issued in 1998 and updated in 2003. NPEP is available and free of charge in all emergency or AIDS care units of French hospitals. A regional survey was carried out to study physicians' adherence to national guidelines, and determinants of adherence to nPEP follow-up in individuals sexually exposed to HIV. The survey was based on retrospective data collection of all consultations for nPEP made in the three AIDS information centers in South-Eastern France (January 2001-December 2002). Information included personal data, type of exposure, and treatment at the first visit after exposure and during follow-up. Exposures were classified into high risk (treatment highly recommended), moderate risk (treatment possibly recommended) and negligible risk (treatment never recommended) categories, according to the level of HIV risk of sexual transmission as indicated by the French national nPEP guidelines. Among the 910 sexual exposures, 56%, 37%, and 4% were classified as cases with high, moderate, and no risk respectively. NPEP was prescribed to 85% of cases. HIV risk of sexual exposure was significantly associated with nPEP receipt though more than half of the cases with negligible risk received nPEP. Independent characteristics associated with non-adherence to nPEP follow-up were younger age, being referred to hospital by a physician, sexual exposure with a casual partner or sexual assault, and "moderate risk" exposure. Better information should be provided to physicians prescribing nPEP to limit over-prescription while new strategies should be implemented to improve follow-up of individuals receiving nPEP, especially those who are younger or survivors of sexual assault.

PREGNANCY

6467

"Appropriate Treatment Methods Can Prevent Nearly All Risk of Mother-To-Child HIV Transmission, Study Says"

Location:

AA VERTICAL FILE - PREGNANCY - PRE 32

Publication Type:

ARTICLE (ONLINE)

KAISER DAILY HIV/AIDS REPORT

Volume: Issue: Day: 7th Month: May Year: 2008 Page numbers:

Subjects:

1. VERTICAL TRANSMISSION 2. PREGNANCY 3. ANTIRETROVIRAL TREATMENTS

Abstract:

Providing appropriate treatment methods to HIV-positive women during pregnancy can prevent nearly all risk of mother-to-child transmission of the virus, according to a study published online Wednesday in the journal AIDS, the PA/Google.com reports (Kirby, PA/Google.com, 5/6).

PREVENTION

6488

"What Worked?": The Evidence Challenges in Determining the Causes of HIV Prevalence Decline"

Location:

AA VERTICAL FILE - PREVENTION - PV 50

Publication Type:

JOURNAL ARTICLE

by Parkhurst, Justin O

AIDS EDUCATION & PREVENTION

Volume: 20 Issue: 3 Day: Month: June Year: 2008 Page numbers: pp 275-283

Subjects:

1. GLOBAL EPIDEMIC 2. PREVENTION AND CONTROL 3. EVALUATION

Abstract:

Abstract It seems natural to ask what worked when looking at nations achieving HIV prevalence declines. Yet this seemingly benign question is fraught with complexity and often poorly understood. This article presents a framework to comprehend the areas in which evidence is needed to assess the policy causes of HIV success. To truly explain what national policies worked, in addition to HIV prevalence data, evidence or estimates are needed on HIV incidence trends, associated behavior changes, implemented interventions promoting those changes, and policies driving those interventions. Rarely, however, are there conclusive data for these components, as illustrated by the continuing debates around what worked in Uganda's HIV success. Unfortunately, within such debates, the understanding of the nature of the evidence requirements is often lost. Only by understanding the nature of the evidence, and how pieces of evidence fit together, can we truly reach evidence-based agreement and draw appropriate lessons of what worked in any case of HIV/AIDS prevention.

SAFER SEX & RISK BEHAVIOUR

6466

"Cognitive therapy can reduce risky sex amongst gay men with compulsive sexual behaviour"

Location:

AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS 68

Publication Type:

ARTICLE (ONLINE)

by Carter, Michael

AIDSMAP

Volume: Issue: Day: 2nd Month: May Year: 2008 Page numbers:

Subjects:

1. MEN WHO HAVE SEX WITH MEN 2. RISK BEHAVIOUR 3. ANAL SEX
4. COUNSELLING

Abstract:

A single session of focused cognitive counselling may be able to reduce rates of unprotected sex amongst gay men with compulsive sexual behaviour, according to a study published in the May 1st edition of the Journal of Acquired Immune Deficiency Syndromes. In a study involving 336 individuals, investigators in San Francisco recently demonstrated that a single session of cognitive therapy can produce a swift and sustained reduction in HIV risk behaviour amongst gay men who have multiple HIV tests. They wished to see if this therapy helped rates of unprotected sex with casual partners that potentially involved a risk of HIV transmission amongst men with compulsive sexual behaviour.

6486

"Integrating Professional and Folk Models of HIV Risk: YMSM's Perceptions of High-Risk Sex"

Location:

AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS 71

Publication Type:

JOURNAL ARTICLE

by Kubicek, Katrina et al

AIDS EDUCATION AND PREVENTION

Volume: 20 Issue: 3 Day: Month: June Year: 2008 Page numbers: pp220-238

Subjects:

1. MEN WHO HAVE SEX WITH MEN 2. GAY YOUTH-RISK BEHAVIOUR

Abstract:

Risks associated with HIV are well documented in research literature. Although a great deal has been written about high-risk sex, little research has been conducted to examine how young men who have sex with men (YMSM) perceive and define high-risk sexual behavior. In this study, we compare the "professional" and "folk" models of HIV risk based on YMSM's understanding of high-risk sex and where and how they gathered their understanding of HIV risk behaviors. The findings reported here emerged from the quantitative and qualitative interviews from the Healthy Young Men's Study, a longitudinal study examining risk and protective factors for substance use and sexual risk among an ethnically diverse sample of YMSM. Findings are discussed in relation to framing how service providers and others can increase YMSM's knowledge of sexual behavior and help them build solid foundations of sexual health education to protect them from sexually transmitted infections and HIV.

6487

"Sexual Need Fulfillment in the Relationships of Straight and Bisexual Men with HIV"

Location:

AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS 72

Publication Type:

JOURNAL ARTICLE

by Craft, Shonda M ; Serovich, Julianne M

AIDS EDUCATION AND PREVENTION

Volume: 20 Issue: 3 Day: Month: June Year: 2008 Page numbers: pp 239-248

Subjects:

1. MEN 2. HIV POSITIVE PEOPLE-RISK BEHAVIOUR 3. HETEROSEXUALS-RISK BEHAVIOUR 4. BISEXUAL MEN-RISK BEHAVIOUR

Abstract:

This article explores the associations among sexual need fulfillment, partner selection, and risky sexual behavior, using a functional/motivational perspective. It was hypothesized that sexual needs influence partner selection (e.g., steady vs. nonsteady and male vs. female), and engaging in unprotected sexual activity is influenced by both sexual needs and partner selection. A sample of self-identified straight and bisexual men with HIV completed measures of sexual frequency, sexual risk-taking behaviors, and sexual need fulfillment. Results indicated that sexual needs were predictive of partner selection but not unprotected sexual activity.

TESTING

6480

"When good news is bad news: psychological impact of false positive diagnosis of HIV"**Location:****AA VERTICAL FILE - TESTING - TES 26**

Publication Type:

JOURNAL ARTICLE

by Bhattacharya, Rahul; Barton, Simon; Catalan, Jose

AIDS CARE

Volume: 20 Issue: 5 Day: Month: May Year: 2008 Page numbers: pp 560-564**Subjects:**

1. HIV TESTING 2. HIV TESTING-PSYCHOSOCIAL ASPECTS

Abstract:

HIV testing is known to be stressful, however the impact of false positive HIV results on individuals is not well documented. This is a series of four case who developed psychological difficulties and psychiatric morbidities after being informed they had been misdiagnosed with HIV-positive status. We look into documented cases of misdiagnosis and potential risks of misdiagnosis. The case series highlights the implications a false diagnosis HIV positive status can have, even when the diagnosis is rectified. Impact of misdiagnosis of HIV can lead to psychosocial difficulties and psychiatric morbidity, have public health and epidemiological implications and can lead to medico-legal conflict. This further reiterates the importance of HIV testing carried out ethically and sensitively, and in line with guidelines, respecting confidentiality and consent, and offering counselling pre-test and post-test, being mindful of the reality of erroneous and false positive HIV test results. The implications of misdiagnosis are for the individual, their partners and social contacts, as well as for the community.

TREATMENTS

6465

"Nearly all patients with NNRTI resistance could benefit from etravirine, UK analysis shows"**Location:****AA VERTICAL FILE - TREATMENTS - TRE 132**

Publication Type:

ARTICLE (ONLINE)

AIDSMAP

Volume: Issue: Day: 9th Month: May Year: 2008 Page numbers:**Subjects:**

1. HAART 2. RESISTANCE

Abstract:

The majority of patients with resistance to existing NNRTIs will benefit from treatment with etravirine (Intelence), a new, powerful NNRTI with a high barrier to resistance, according to a UK study published in the May 11th edition of AIDS. The investigators believe that the "next generation of NNRTIs, including etravirine, will play an important future role in sequencing HIV-infected patients who have acquired NNRTI resistant virus."

6469**"A New Way to Fight HIV: CCR5 Inhibitors"****Location:****AA VERTICAL FILE - TREATMENTS - TRE 133**

Publication Type:

ARTICLE (ONLINE)

by Goldman, Bonnie

THE BODY

Volume: Issue: Day: 30th Month: April Year: 2008 Page numbers:**Subjects:**

1. TREATMENTS 2. RESEARCH

Abstract:

An interview with Dr David Hardy, one of the key researchers looking at Selzentry (maraviroc, Celsentri), the first CCR5 inhibitor to be approved in the United States, in which he explains the basics of how CCR5 inhibitors work.

6470**"Suppression of Human Protein Reduces HIV's Ability to Enter T Cells, Replicate, Study Finds"****Location:****AA VERTICAL FILE - TREATMENTS - TRE 134**

Publication Type:

ARTICLE (ONLINE)

THE BODY

Volume: Issue: Day: 30th Month: April Year: 2008 Page numbers:**Subjects:**

1. HIV RESEARCH 2. TREATMENTS

Abstract:

Researchers have found that suppressing the human protein ITK in CD4+ T cells reduces HIV's ability to enter the cells and replicate, according to an NIH study published Monday in the Proceedings of the National Academy of Sciences.

6472**"Most viral load blips are short-lasting and of no significance"****Location:****AA VERTICAL FILE - TREATMENTS - TRE 137**

Publication Type:

ARTICLE (ONLINE)

by Carter, Michael
AIDSMAP

Volume: Issue: Day: 19th Month: May Year: 2008 Page numbers:

Subjects:

1. ANTIRETROVIRAL TREATMENTS 2. VIRAL LOAD 3. HIV POSITIVE PEOPLE-
HEALTH CARE NEEDS

Abstract:

Approximately a quarter of patients taking anti-HIV treatment have occasional "blips" in their viral load, according to a Dutch study published in the May 1st edition of the Journal of Acquired Immune Deficiency Syndromes. But, provided that viral load quickly returns to undetectable and these blips involve only small increases in viral load, they are not associated with an increased risk of HIV-related illness, a fall in CD4 cell count, or a change in anti-HIV treatment. However, larger and more sustained increases in viral load are often associated with either drug resistance, illness or a change in anti-HIV treatment. The investigators suggest that leaving treatment unaltered is a perfectly acceptable response to short-lived and low-level viral load blips.

6483

"Prediction of adherence to antiretroviral therapy: can patients' gender play some role? An Italian pilot study"

Location:

AA VERTICAL FILE - TREATMENTS - TRE 138

Publication Type:

JOURNAL ARTICLE

by Ubbiali, A et al

AIDS CARE

Volume: 20 Issue: 5 Day: Month: May Year: 2008 Page numbers: pp 571-575

Subjects:

1. TREATMENTS 2. COMPLIANCE 3. GENDER

Abstract:

Recent literature has shown that adherence to HAART is a multi-faceted phenomenon, which involves both behavioural and psychological features. Therefore, the results obtained so far, though promising, have not yet unambiguously identified the factors that could predict non-adherence. Since any support for strengthening the adherence should take into account the HIV+ patients' perception of both their state of health and their relational style, this study tried to identify some psychological characteristics involved in the adherence phenomenon. A self-administered battery of tests including the Attachment Style Questionnaire (ASQ) and the Multidimensional Health Locus of Control Form-C (MHLC-C) was administered to an Italian sample. Results showed significant gender differences between non-adherent and adherent subjects. Specifically, the psychological profile of non-adherent males seemed focused less on relational aspects and perceived relevance of physicians and of 'significant other people', whilst that of non-adherent females seemed more 'relationship-oriented'. This study means to encourage clinicians to plan specific, gender-focused support for enhancing adherence.

6485

"Women in the Time of AIDS: Barriers, Bargains, and Benefits"**Location:****AA VERTICAL FILE - WOMEN - WOM 75**

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Abstract:

We comment here on the implications of new HIV prevention technologies (physical and chemical barriers) for women's health and women's rights. Four relevant themes are selected that have emerged in the social and behavioral science literature: structural factors (global and national) limiting the availability of female condoms, control and empowerment with female-initiated HIV prevention technologies, covert use of female-initiated HIV prevention technologies, and male partners as part of the bargain for barriers. There is now a rich and diverse literature on all of these issues, relevant and informative (much is addressed in this issue), which we draw together in this commentary. Discussion of these themes suggests guidelines for policy, research, and action. First, the misconceptions, biases, and prejudices of global and national leaders, including donors, necessitate that we persevere in presenting data to them and engaging them in discussion. Second, we need to support women within their local social contexts to negotiate for their rights, balancing pragmatic approaches to their partners in their initiation of protection, and applying according to each situation as appropriate, a continuum from discretion and clandestine use to deception. Third, men have to be brought in as active participants, and their positive and negative experiences and interests inserted into practices and policies.

