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June 2007:

**Journal Articles
CAS No. 50**

R/N 6269 - 6299



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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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June 2007 HIV/AIDS Journal Articles Index

CHILDREN

6281

"Childhood sexuality and rights in the context of HIV/AIDS"

Location:

AA VERTICAL FILE - CHILDREN - CHI 27

Publication Type:
JOURNAL ARTICLE

by Bhana, Deevia

CULTURE, HEALTH & SEXUALITY

Volume: 9 Issue: 3 Day: Month: May - June Year: 2007 Page numbers: pp 309-324

Subjects:

1. CHILDREN 2. CHILDREN-EDUCATION 3. SEXUALITY

Abstract:

The primary objective in this study was to explore what HIV and AIDS mean to seven- and eight-year-old children in South Africa and how sexual and gender dynamics are embedded within these meanings. Against representations that associate young children with innocence, the paper argues for a more capacious view of young children as sexual and gendered agents with the ability to exercise their rights. In contrast to research that addresses children as relatively passive desexualised beings, focusing on their dependence on adults, their innocence and their need for protection, this paper examines how HIV and AIDS are constructed and negotiated by young people. It views children not simply in terms of their need for sexual rights but as potentially active participants in the negotiation of their rights. Viewing children's rights as highly contested, the notion that young children have sexual rights opens up possibilities for children (including those from marginalised groups) to talk about their concerns and pleasures, fears and hopes, as well as issues relating to sexual rights and resistances. By working creatively with teachers, it may be possible to broaden young children's knowledge of HIV and AIDS and sexuality within a more supportive environment.

CLINICAL CARE

6294

"Update on HIV from the IDSA 44th annual meeting in Toronto"

Location:

AA VERTICAL FILE - CLINICAL CARE - CL 8

Publication Type:
NEWSLETTER

by Johnson, Kristine

HOPKINS HIV REPORT Johns Hopkins University AIDS Service

Volume: 19 Issue: 1 Day: Month: January Year: 2007 Page numbers: pp 4-6

Subjects:

1. CLINICAL CARE 2. TREATMENTS 3. CONFERENCES

Abstract:

Highlights on acute HIV infection, epidemiology and prevention from the Infection Diseases Society of America annual meeting.

GLOBAL EPIDEMIC

6297

"Indian HIV estimate cut to 2.5 million people"

Location:

AA VERTICAL FILE - GLOBAL EPIDEMIC - GE 27

Publication Type:

ARTICLE (ONLINE)

by Alcorn, Keith

AIDSMAP NAM

Volume: Issue: Day: 6th Month: July Year: 2007 Page numbers: Also available online at <http://www.aidsmap.com/en/news/C216549D-65B8-483D-8C84-D513A22900B6.asp>

Subjects:

1. HIV 2. EPIDEMIC 3. INDIA 4. GLOBAL EPIDEMIC

Abstract:

India, once believed to have the largest HIV-positive population of any country in the world, today announced that new, more accurate surveillance data suggest India has about 2.5 million people living with HIV – about half the number estimated by UNAIDS based on previous surveys of HIV prevalence among pregnant women.

The new HIV prevalence estimate for India is approximately 0.36%, which corresponds to an estimated 2 million to 3.1 million people living with HIV. UNAIDS had previously suggested the range might lie between 3.4 million and 9.4 million.

HEALTH & FINANCIAL ISSUES

6274

"Time perspective and quality of life among HIV-infected patients in the context of HAART"

Location:

AA VERTICAL FILE - HEALTH & FINANCIAL ISSUES - HF 34

Publication Type:

JOURNAL ARTICLE

by Préau, M

AIDS CARE

Volume: 19 Issue: 4 Day: Month: April Year: 2007 Page numbers: pp 449-458

Subjects:

1. HIV POSITIVE PEOPLE 2. HIV POSITIVE PEOPLE-PSYCHOLOGICAL ASPECTS 3. HAART

Abstract:

We explored associations between time perspective (TP) and quality of life (QOL) among HIV-infected patients. With the French validated version of the Zimbardo Time Perspective Inventory, we evaluated the TP of patients. A self-administered questionnaire gathered information about QOL (WHOQOL-HIV), TP, relationship with medical staff and self-reported side effects of HAART. Six scores of QOL - physical, psychological, social relationship, environment, patient independence and spirituality were used as dependent variables in the linear regressions to identify factors associated with QOL. The sample (n=72) for this study was recruited from a hospital department specialising in HIV care and consisted of 48 (67%) HIV-infected women and 24 (33%) HIV-infected men with a mean age of 42 years. Using hierarchical regression analysis adjusted on socio-demographic characteristics, clinical characteristics and co-factors, significant relationships were observed between the several TP orientations and an impaired physical, environmental QOL as well as level-of-independence QOL. Specific dimensions of QOL are influenced by specific orientations of TP, which provides information on self-perception and subjective evaluation of QOL. The TP construct provides keys to managing HIV infection in order to improve QOL.

6275

"Estimating the impact of alcohol consumption on survival for HIV+ individuals"

Location:

AA VERTICAL FILE - HEALTH & FINANCIAL ISSUES - HF 35

Publication Type:

JOURNAL ARTICLE

by Braithwaite, R S

AIDS CARE

Volume: 19 Issue: 4 Day: Month: April Year: 2007 Page numbers: pp 459-466

Subjects:

1. HIV POSITIVE PEOPLE 2. HIV PROGRESSION 3. ALCOHOL

Abstract:

Alcohol consumption is associated with decreased antiretroviral adherence, and decreased adherence results in poorer outcomes. However the magnitude of alcohol's impact on survival is unknown. Our objective was to use a calibrated and validated simulation of HIV disease to estimate the impact of alcohol on survival. We incorporated clinical data describing the temporal and dose-response relationships between alcohol consumption and adherence in a large observational cohort (N=2,702). Individuals were categorized as nondrinkers (no alcohol consumption), hazardous drinkers (consume > or =5 standard drinks on drinking days), and nonhazardous drinkers (consume <5 standard drinks on drinking days). Our results showed that nonhazardous alcohol consumption decreased survival by more than 1 year if the frequency of consumption was once per week or greater, and by 3.3 years (from 21.7 years to 18.4 years) with daily consumption. Hazardous alcohol consumption decreased overall survival by more than 3 years if frequency of consumption was once per week or greater, and by 6.4 years (From 16.1 years to 9.7 years) with daily consumption. Our results suggest that alcohol is an underappreciated yet modifiable risk factor for poor survival among individuals with HIV.

6291

"Health priorities and perceived health determinants among South Australians attending GLBTI festival events"

Location:

AA VERTICAL FILE - HEALTH & FINANCIAL ISSUES - HF 36

Publication Type:

JOURNAL ARTICLE

by Rogers, Gary D

HEALTH PROMOTION JOURNAL OF AUSTRALIA

Volume: 18 Issue: 1 Day: Month: Year: 2007 Page numbers: pp 57-62

Subjects:

1. GAY MEN 2. LESBIANS 3. BISEXUALS 4. TRANSSEXUALS 5. HEALTH CARE(AUST)
6. HEALTH PROMOTION 7. DISCRIMINATION(AUST)

Abstract:

Health differentials related to the social position of people whose sexual attraction or gender identity differs from that of the majority may be the 'forgotten inequity' in contemporary Australian discourses on health inequalities and social inclusion. What sexually- and gender-diverse communities see as health priorities and the social determinants of their health have been little studied in Australia. This survey explored the experience and opinions of a convenience sample of gay, lesbian, bisexual, transgender and intersex (GLBTI) people in South Australia. METHOD: A pencil and paper survey was administered to people attending events associated with the Feast GLBTI festival in Adelaide in 2004 and good participation rates were obtained. Two hundred and fifty-three people completed the survey, of which 122 identified as female, 124 as male and seven as other genders. RESULTS: Depression, HIV,

suicide, family relationship problems and alcohol problems were seen as the most important health issues for these communities, while discrimination under the law and in daily life were rated the most important health determinants. **CONCLUSIONS:** GLBTI South Australians surveyed identified priority health issues for their communities and identified legal and personal discrimination as significant determinants of their health.

HEALTH PROMOTION

6292

"Beyond masculine stereotypes: moving men's health promotion forward in Australia."

Location:

AA VERTICAL FILE - HEALTH PROMOTION - HP 7

Publication Type:

JOURNAL ARTICLE

by Smith, James A

HEALTH PROMOTION JOURNAL OF AUSTRALIA

Volume: 18 Issue: 1 Day: Month: Year: 2007 Page numbers: pp 20-25

Subjects:

1. HEALTH PROMOTION 2. GENDER ROLES 3. GENDER

Abstract:

There has been increased interest in men's health over the past two decades. A major focus has been on men's apparent reluctance to seek health-related help. As such, innovative methods to facilitate health promotion engagement and preventive health practices among men have emerged. Men's health promotion activity in Australia has paid particular attention to settings and social marketing approaches. These, more often than not, have been aligned to hegemonic constructions of masculinity. As such, traditional gender-roles are perpetuated, which may, despite best intentions, reinforce negative health behaviours among men. However, the health promotion community is well positioned to strategically free men from the constraints of hegemonic masculinity. By paying attention to commentary relating to the social construction of gender, an alternative pathway is evident. Of particular interest is discussion relating to multiple masculinities, in contrast to one dominant form. This opens the door to develop a range of health promotion interventions targeted to specific groups of men, including those that are most marginalised and disadvantaged. In doing so, health inequities among men relating to age, class, sexuality, race and ethnicity can be more purposefully addressed. This paper explores the intersection between current health promotion practice and recent commentary relating to gender. I conclude by suggesting that health promotion researchers, practitioners and policy makers need to account for multiple masculinities in the planning, development, implementation and evaluation of health promotion activities aimed at men in order to move men's health promotion forward in Australia.

HEPATITIS

6284

"1 client, 2 needs : improving access to Hep C services"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 18

Publication Type:

JOURNAL ARTICLE

by Topp, Libby

OF SUBSTANCE

Volume: 5 Issue: 2 Day: Month: Year: 2007 Page numbers: pp 14-16

Subjects:

1. HEPATITIS C 2. TREATMENTS

Abstract:

Part 1 of a series of articles reporting on trials to integrate treatment referrals for Hepatitis C in Alcohol & Drug agencies in an effort to improve uptake of treatment.

6285

"What do we know about Hepatitis C (HCV)?"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 19

Publication Type:
JOURNAL ARTICLE
OF SUBSTANCE

Volume: 5 Issue: 2 Day: Month: Year: 2007 Page numbers: pp 16-17

Subjects:

1. HEPATITIS C 2. INJECTING DRUG USE

Abstract:

Provides a brief overview of disease progression, medical management, vaccination, antiviral therapy and treatment of people who inject.

6286

"Cheryl's story : Hep C and childbirth"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 20

Publication Type:
JOURNAL ARTICLE
HEPATITIS C COMMUNITY NEWS

Volume: Issue: Day: Month: March Year: 2007 Page numbers: pp 10-11

Subjects:

1. HEPATITIS C 2. DISCRIMINATION 3. HEALTH CARE 4. HEALTH CARE WORKERS-ATTITUDES(AUST)

Abstract:

Relates the story of a pregnant HCV positive woman's experience of discrimination and mistreatment when receiving health care during her pregnancy and delivery.

6287

"Strategies for preventing liver damage"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 21

Publication Type:
JOURNAL ARTICLE
by McInnes, Linda
HEPATITIS C COMMUNITY NEWS

Volume: Issue: Day: Month: March Year: 2007 Page numbers: pp 12-14

Subjects:

1. HEPATITIS C 2. LIVER ANALYSIS 3. HEALTH CARE

Abstract:

Covers preventative measures such as nutrition and exercise as well as advice on screening

and medical management. Lists medications and complementary therapies to avoid because of their toxicity to the liver.

6288

"Experiences of treatment"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 22

Publication Type:

JOURNAL ARTICLE

by Morrison, James

HEPATITIS C COMMUNITY NEWS

Volume: Issue: Day: Month: June Year: 2007 Page numbers: pp 10-11

Subjects:

1. HEPATITIS C 2. TREATMENTS

Abstract:

An interview with Max Hopwood on his recent research into patients' and health professionals' experiences of Hepatitis C treatment.

6289

"Looking at the risks"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 23

Publication Type:

JOURNAL ARTICLE

by Maher, Lisa

HEPATITIS C COMMUNITY NEWS

Volume: Issue: Day: Month: June Year: 2007 Page numbers: pp 12-13

Subjects:

1. HEPATITIS C 2. TRANSMISSION 3. INJECTING DRUG USE 4. INTRAVENOUS DRUG USERS
5. POLICY

Abstract:

The author discusses her recent research into high Hepatitis C incidence rates amongst injecting drug users in Australia.

6295

"Prolonging hepatitis C therapy by an additional 20 weeks has few benefits"

Location:

AA VERTICAL FILE - HEPATITIS - HEP 24

Publication Type:

ARTICLE (ONLINE)

by Carter, Michael

AIDSMAP NAM

Volume: Issue: Day: 12th Month: June Year: 2007 Page numbers: Available online at
<http://www.aidsmap.com/en/news/59CB868B-66C2-49D7-ABA9-4B6504DDB733.asp>

Subjects:

1. HEPATITIS C 2. TREATMENTS

Abstract:

Prolonging the duration of hepatitis C therapy in HIV-positive patients chronically coinfecting with hepatitis C virus only has a long-term benefit for individuals infected with the easier-to-treat genotypes of hepatitis C, according to data presented to the Third International Workshop on HIV and Hepatitis Coinfection held in Paris last week.

PRISONS

6298

"Thai programme demonstrates HIV services can be successfully delivered in prison"**Location:****AA VERTICAL FILE - PRISONS - PRI 19**

Publication Type:

ARTICLE (ONLINE)

by Alcorn, Keith

AIDSMAP NAM

Volume: Issue: Day: 5th Month: July Year: 2007 Page numbers: Also available online at <http://www.aidsmap.com/en/news/44A7B847-2C9A-415B-A3CB-4876202253EC.asp>

Subjects:

1. PRISONS 2. HIV 3. TREATMENTS

Abstract:

An HIV intervention programme in Thailand shows that satisfactory outcomes can be achieved in under-resourced prison settings and could be implemented by any government providing treatment in the general population, according to a June report from the medical charity Médecins sans Frontières (MSF). It notes that prison services represent an opportunity to reach people from marginalised groups who would not usually seek or be given care.

SAFER SEX & RISK BEHAVIOUR

6276

"Self-monitoring of behaviour as a risk reduction strategy for persons living with HIV"**Location:****AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS**

Publication Type:

JOURNAL ARTICLE

by Lightfoot, M

AIDS CARE

Volume: 19 Issue: 6 Day: Month: July Year: 2007 Page numbers: pp 757-763

Subjects:

1. HIV POSITIVE PEOPLE 2. HIV POSITIVE PEOPLE-RISK BEHAVIOUR

Abstract:

To reduce the HIV-related transmission behaviours of persons living with HIV (PLH), a few efficacious interventions have been designed and evaluated. However, these interventions were delivered at relatively high cost, both in terms of time and resources. Given the challenges for health providers and community agencies in delivering these interventions, alternatives are needed. One possible intervention is allowing PLH to self-monitor their HIV transmission risk behaviour. Previous research suggests that self-monitoring of HIV-risk related behaviours may be a useful risk reduction strategy. This paper examines the impact of repeated risk assessments for behavioural self-monitoring as an intervention strategy for reducing sexual and substance use risk behaviours. A total of 365 PLH, recruited from community clinics, health management organizations, and health departments, completed self-assessments over time. Increased self-monitoring resulted in increases in protected sex

with sexual partners of HIV-negative or unknown serostatus, and changes in attitudes conducive to reducing risk. Self-monitoring is a relatively low cost and easily implementable strategy for reducing the HIV-related transmission risk of PLH.

6290

"Holding onto love... in an age of uncertainty"

Location:

AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS

Publication Type:

NEWSLETTER

by Wotherspoon, Gary

TALKABOUT

Volume: Issue: Day: Month: April-May Year: 2007 Page numbers: pp 8-9

Subjects:

1. GAY MEN WITH HIV 2. RISK BEHAVIOUR 3. SAFER SEX

Abstract:

Discusses the need for safer sex in serodiscordant relationships.

6269

"The impact of HIV treatment on risk behaviour in developing countries: A systematic review."

Location:

AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS 52

Publication Type:

JOURNAL ARTICLE

by Kennedy, C et al

AIDS CARE

Volume: 19 Issue: 6 Day: Month: July Year: 2007 Page numbers: pp 707-720

Subjects:

1. HIV POSITIVE PEOPLE-RISK BEHAVIOUR 2. ANTIRETROVIRAL TREATMENTS
3. DEVELOPING COUNTRIES 4. AFRICA

Abstract:

In developing countries, access to antiretroviral therapy (ART) is improving as HIV treatment becomes a greater priority in the global fight against AIDS. While ART has clearly beneficial clinical effects, increased access to treatment may also affect sexual behaviour. To examine the strength of evidence for the impact of medical treatment for HIV-positive individuals on behavioural outcomes in developing countries, we conducted a comprehensive search of the peer-reviewed literature. Studies were included if they provided clinical treatment to HIV-positive individuals in a developing country, compared behavioural, psychological, social, care, or biological outcomes related to HIV-prevention using a pre/post or multi-arm study design, and were published between January 1990 and January 2006. Only three studies were identified that met the inclusion criteria. All were conducted in Africa, utilized before/after or multi-arm study designs, and relied on self-reported behaviour. In all three studies, a majority of HIV-infected individuals reported being sexually abstinent, and access to ART was not associated with an increase in HIV-related risky sexual behaviours. However, one cross-sectional study found that ART patients were more likely to report STD treatment. The available evidence indicates a significant reduction in risk behaviour associated with ART in developing countries. However, there are few existing studies and the rigor of these studies is weak. More studies are needed to build an evidence base on which to make programmatic and policy decisions.

6273

"Participatory communication and HIV/AIDS prevention in a Chinese marginalized (MSM) population."

Location:

AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS 53

Publication Type:

JOURNAL ARTICLE

by Gao, MY; Wang, S

AIDS CARE

Volume: 19 Issue: 6 Day: Month: July Year: 2007 Page numbers: pp 799-810

Subjects:

1. MEN WHO HAVE SEX WITH MEN 2. RISK BEHAVIOUR 3. CHINA 4. PEER EDUCATION

Abstract:

HIV/AIDS in China has entered a critical stage of rapid and widespread increase. It has been estimated that more than one million people in China have been infected with HIV and the rate of increase tops the world. The number could swell to 10 million by 2010 if more intense and effective preventive measures are not adopted immediately. Sex between men has been a mostly 'hidden' source of the spread of HIV in China. Homosexuality is no longer a criminal act in China, however, traditional 'official-led' so-called peer education programmes among men who have sex with men (MSM) have little effect in adopting and diffusing a key message to their networks. This is because the climate in HIV prevention through community-based advocacy among MSM has not been substantially changed which is due to these men still facing strong opposition and resistance from society, as a quite marginalized population in China. This study carried out in Chengdu is the first to explore how to use a socially and culturally appropriate participatory communication to promote safer sex behaviour with gay men and MSM in Chengdu, China. The study examined effectiveness of peer-led health message diffusion in promoting condom use through a participatory communication approach among these men in the programme. Key findings showed that the peer-based participatory communication strategy was effective for encouraging condom use with casual sexual partners in the intervention group. There was no significant change in the comparison group. It indicates that participatory involvement is the major driving force for HIV-related safer sex behaviour change and can be recommended to promote safer sex practice among gay men and MSM in their broad contexts.

6277

"Are sexual partners met online associated with HIV/STI risk behaviours? Retrospective and daily diary data in conflict."

Location:

AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS 55

Publication Type:

JOURNAL ARTICLE

by Mustanski, B S

AIDS CARE

Volume: 19 Issue: 6 Day: Month: July Year: 2007 Page numbers: pp 822-827

Subjects:

1. MEN WHO HAVE SEX WITH MEN 2. RISK BEHAVIOUR 3. INTERNET

Abstract:

The association between Internet sex-seeking and sexual risk-taking was explored using both retrospective and daily diary methodology. Men who have sex with men (MSM) (N=113) were recruited through a variety of Internet sites. Participants completed retrospective

questionnaires on their history of Internet use to seek sexual partners and their engagement in sexual risk-taking behaviours. Participants also completed daily diaries for up to 30 days, which assessed if partners were met through the Internet and what types of sexual contact occurred. Multilevel modelling was used to analyze the daily diary data. The retrospective and daily diary data produced opposite results. In the retrospective data, a history of online sex-seeking was associated with greater numbers of sexual partners in the last year, one-time sex partners, sex without condoms and failure to discuss partners' sexual histories. In the daily diary data, unprotected anal intercourse (UAI) was less likely to occur with partners met online than with partners met by other means. These data suggest that men who engage in high-risk sex with other men use the Internet as a tool for meeting sexual partners, not that meeting partners online causes high-risk sex.

6279

"Don't bother to wrap it: online Giftgiver and Bugchaser newsgroups, the social impact of gift exchanges and the 'carnavalesque'."

Location:

AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS 56

Publication Type:

JOURNAL ARTICLE

by Graydon, Michael

CULTURE, HEALTH & SEXUALITY

Volume: 9 Issue: 3 Day: Month: May-June Year: 2007 Page numbers: pp 277-292

Subjects:

1. RISK BEHAVIOUR 2. INTERNET 3. TRANSMISSION

Abstract:

At online internet newsgroups, members who self-identify as Giftgivers and Bugchasers post messages describing exchanging HIV as a gift, as the Gift. Using the literature on the social function of gift exchanges, this paper considers how Giftgiver and Bugchaser messages mobilize the language of gifts. In doing so, newsgroup members generate an ontological narrative wherein HIV, as the Gift, promotes social bonds, the creation and maintenance of self identity and social roles, and the meeting of particular goals. Thus the Gift appears to fulfill (at least discursively) many of the social functions of gift exchanges as described in the literature. Online newsgroups function as fora for the expression of a contrarian, transgressive HIV/AIDS narrative and act as 'carnavalesque' spaces in which normative social roles and meaning are inverted in the establishment of a realm whereby HIV becomes a gift.

6283

"It's not just what you say: Relationships of HIV disclosure and risk reduction among MSM in the post-HAART era"

Location:

AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS 57

Publication Type:

JOURNAL ARTICLE

by Klitzman, R et al

AIDS CARE

Volume: 19 Issue: 6 Day: Month: July Year: 2007 Page numbers: pp 749-756

Subjects:

1. GAY MEN WITH HIV 2. GAY MEN WITH HIV-RISK BEHAVIOUR 3. DISCLOSURE OF HIV POSITIVE STATUS

Abstract:

In the post-HAART era, critical questions arise as to what factors affect disclosure decisions and how these decisions are associated with factors such as high-risk behaviors and partner variables. We interviewed 1,828 HIV-positive men who have sex with men (MSM), of whom 46% disclosed to all partners. Among men with casual partners, 41.8% disclosed to all of these partners and 21.5% to none. Disclosure was associated with relationship type, perceived partner HIV status and sexual behaviors. Overall, 36.5% of respondents had unprotected anal sex (UAS) with partners of negative/unknown HIV status. Of those with only casual partners, 80.4% had >1 act of UAS and 58% of these did not disclose to all partners. This 58% were more likely to self-identify as gay (versus bisexual), be aware of their status for <5 years and have more partners. Being on HAART, viral load and number of symptoms were not associated with disclosure. This study - the largest conducted to date of disclosure among MSM and one of the few conducted post-HAART - indicates that almost 1/5th reported UAS with casual partners without disclosure, highlighting a public health challenge. Disclosure needs to be addressed in the context of relationship type, partner status and broader risk-reduction strategies.

6296

"California study contests belief that saunas facilitate HIV transmission"

Location:

AA VERTICAL FILE - SAFER SEX & RISK BEHAVIOUR - SS 59

Publication Type:

ARTICLE (ONLINE)

by Bernard, Edwin J

AIDSMAP NAM

Volume: Issue: Day: 19th Month: June Year: 2007 Page numbers: Available on line at <http://www.aidsmap.com/en/news/767DBC2E-EACD-4B71-ADAA-F3A6A8A46CCE.asp>

Subjects:

1. SEX ON PREMISES VENUES 2. HIV 3. TRANSMISSION 4. RISK BEHAVIOUR 5. SAFER SEX

Abstract:

Most gay and bisexual men do not engage in high-risk HIV transmission behaviour in saunas or bathhouses according to a study from the University of California, San Francisco published in the June 1st edition of the Journal of Acquired Immune Deficiency Syndromes. The study's results – which found that some men who reported recent high-risk behaviour in other settings actually had safer sex at the sauna – contest the long-held belief that saunas facilitate HIV transmission on a large scale.

TRANSSEXUALS

6280

"'It's really a hard life': love, gender and HIV risk among male-to-female transgender persons."

Location:

AA VERTICAL FILE - TRANSSEXUALS - TRA 22

Publication Type:

JOURNAL ARTICLE

by Melendez, Rita M ; Pinto, Rogerio

CULTURE, HEALTH & SEXUALITY

Volume: 9 Issue: 3 Day: Month: May-June Year: 2007 Page numbers: pp 233-245

Subjects:

1. TRANSSEXUALS 2. RISK BEHAVIOUR 3. GENDER

Abstract:

Scientific studies demonstrate high rates of HIV infection among male-to-female (MTF)

transgender individuals and that stigma and discrimination place MTFs at increased risk for infection. However, there is little research examining how gender roles contribute to HIV risk. This paper reports on in-depth interviews with 20 MTFs attending a community clinic. Data reveal that stigma and discrimination create a heightened need for MTFs to feel safe and loved by a male companion and that in turn places them at a higher risk for acquiring HIV. Male-to-female transgender individuals appear to turn to men to feel loved and affirmed as women; their main HIV risk stems from their willingness to engage with sexual partners who provide a sense of love and acceptance but who also may also request unsafe sexual behaviours. A model illustrating how HIV risk is generated from stigma and discrimination is presented.

TREATMENTS

6270

"Differential improvement in survival among patients with AIDS after the introduction of HAART."

Location:

AA VERTICAL FILE - TREATMENTS - TRE 108

Publication Type:

JOURNAL ARTICLE

by Couzigou, C et al

AIDS CARE

Volume: 19 Issue: 4 Day: Month: April Year: 2007 Page numbers: pp 523-531

Subjects:

1. TREATMENTS 2. HAART 3. HIV PROGRESSION

Abstract:

We explored changes in the survival of patients with AIDS (PWA) according to the availability of antiretroviral drugs (1994-2002). We tested whether changes in the hazard ratio of progression to death (HR) have been homogeneous among various groups of PWA. We included 4158 PWA diagnosed in Paris, notified to the French National Surveillance Institute by 2002. Four calendar periods were defined: monotherapy (1994-95), bitherapy-HAART transition (1996), early HAART (1997-99), late HAART (2000-October 2002). HR were calculated with Cox models, including the calendar period, modelled as a time dependent covariate. Models were stratified by age, transmission category, CD4 cell count, and AIDS-defining illnesses (ADI) group. Cumulative survival at 60 months increased from 44.0% (before July 1996) to 75.6% (after July 1996) and median survival increased from 31.9 months to >76 months. Adjusted HR reached a minimum in the late HAART period (HR 0.22, 95% CI: 0.19-0.26). No difference in the decrease of the HR has been found by age. HR decreased and was marked during the late HAART period across all HIV transmission categories, including intravenous drug use. HR decreased significantly for all ADIs groups, including tumours. Among PWA diagnosed with tuberculosis, the HR decreased significantly only in the late HAART period. HR decrease was stronger for PWA with a CD4 cell count < or =200/mm³. Substantial improvements in survival after the introduction of HAART were found for all PWA but varied by specific ADIs and the degree of immunosuppression.

6271

"UCLA School of Public Health, Epidemiology, Los Angeles, USA."

Location:

AA VERTICAL FILE - TREATMENTS - TRE 109

Publication Type:

JOURNAL ARTICLE

by Vaughn, G; Detels, R

AIDS CARE

Volume: 19 Issue: 4 Day: Month: April Year: 2007 Page numbers: pp 492-499

Subjects:

1. TREATMENTS 2. TREATMENTS-SIDE EFFECTS 3. CARDIOVASCULAR DISORDERS

Abstract:

Since protease inhibitors (PIs) were first introduced in 1995, research has shown that use of PIs greatly improves rates of survival, while slowing HIV disease progression. However, there are concerns that use of PIs may be associated with an increased risk of cardiovascular disease (CVD). To examine the relationship between PI use and CVD among HIV-infected patients, a large retrospective/prospective observational study was conducted. The study population was a clinic-based population seeking HIV treatment services between 1990 and 2000 at several sites in Los Angeles County. CVD was defined as ischemic heart disease/coronary artery disease (ICD-9 codes 410-414, 428, and 429.7) and cerebrovascular disease/stroke (ICD-9 codes 430-438). Multiple imputation was performed on missing data, and survival analysis was performed on the imputed datasets using an extended Cox Proportional Hazards Model. The 5,667 HIV-infected individuals contributed 15,550 person-years of follow-up. Eighty incident cases of CVD were identified. Use of PIs (hazard ratio (HR)=6.22 [95% CI: 3.13-12.39], p-value <0.001) and time-dependent non-PI use (HR 3.18 [1.99-5.09], p<0.001) were associated with CVD. Clinicians should monitor treatment of HIV-infected patients for adverse CVD events, and consider alternate forms of drug therapy and CVD-preventing drugs, particularly for those with a personal or family history of CVD.

6272

"Community perspectives on care options for HIV prevention trial participants."

Location:

AA VERTICAL FILE - TREATMENTS - TRE 110

Publication Type:

JOURNAL ARTICLE

by MacQueen, K et al

AIDS CARE

Volume: 19 Issue: 4 Day: Month: April Year: 2007 Page numbers: pp 554-560

Subjects:

1. TREATMENTS 2. CLINICAL TRIALS 3. DEVELOPING COUNTRIES 4. ETHICS

Abstract:

There is on-going global debate and policy-setting concerning researchers' obligations to meet the health needs of people participating in HIV prevention trials in resource-poor settings. The perspectives of local community stakeholders on this issue are poorly understood as most of what is presented on behalf of communities where research takes place is anecdotal commentary. Using qualitative methods (130 in-depth interviews and 20 focus groups) we assessed perceived fairness of different strategies to meet the health needs of women who become HIV-infected during a hypothetical vaginal microbicide trial. Respondents included HIV prevention research participants, community stakeholders and health-care service providers in ten sites in seven countries (South Africa, Malawi, Tanzania, Zimbabwe, Zambia, India, US). Many respondents perceived referrals to be a potentially fair way to address care and treatment needs but concerns were also voiced about the adequacy

of local health-care options and the ability of trial participants to access options. Most respondents viewed the provision of antiretroviral treatment by researchers to HIV-infected trial participants as unfair if treatment was not sustained beyond the end of the trial. The results underscore the importance of effectively linking trial participants to sustainable, community-based treatment and care.

6282

"What is a missed dose? Implications for construct validity and patient adherence"

Location:

AA VERTICAL FILE - TREATMENTS - TRE 111

Publication Type:

JOURNAL ARTICLE

by Sankar, A P

AIDS CARE

Volume: 19 Issue: 6 Day: Month: July Year: 2007 Page numbers: pp 775-780

Subjects:

1. ANTIRETROVIRAL TREATMENTS 2. HAART 3. COMPLIANCE

Abstract:

The construct 'missed dose' is central to many assessments of medication adherence. However, few studies have investigated how patients or clinicians conceptualize missed doses or the extent of the concordance or discordance between clinicians and patients. To address this gap we conducted semi-structured interviews with 45 sero-positive African American adults taking HAART and 17 of their clinicians. Results reveal large variability in missed dose conceptions among both patients and physicians and significant differences between the two groups. Overall, patients reported a stricter definition of missed dose than did clinicians. Fifty-five percent of patients thought that a pill-taking delay of six hours beyond the prescribed dosing time constituted a missed dose, by comparison, only one physician agreed with this assessment. More than one-third of patients thought that the proper response to a missed dose would be to skip it altogether, but only about 12% of clinicians agreed. These findings have implications for the construct validity of self-report measures of adherence, for patient adherence behaviours based on missed dose conceptions and for patient-physician relationships and communication within the clinical environment.

6293

"Antiretroviral update from the 46th ICAAC"

Location:

AA VERTICAL FILE - TREATMENTS - TRE 112

Publication Type:

NEWSLETTER

by Gallant, Joel

HOPKINS HIV REPORT Johns Hopkins University AIDS Service

Volume: 19 Issue: 1 Day: Month: January Year: 2007 Page numbers: pp 1-3

Subjects:

1. ANTIRETROVIRAL TREATMENTS 2. RESEARCH 3. CONFERENCES

Abstract:

Discusses a number of studies presented at the 46th Interscience Conference on Antimicrobial Agents and Chemotherapy, held in San Francisco in September 2006.

VACCINES

6278

"AIDS vaccine trials : '06 year in review"

Location:

AA VERTICAL FILE - VACCINES - VAC 18

Publication Type:

JOURNAL ARTICLE

VAX : AIDS VACCINE BULLETIN

Volume: 5 Issue: 1 Day: Month: Year: 2007 Page numbers: pp 1-6

Subjects:

1. VACCINES 2. CLINICAL TRIALS

Abstract:

This special issue of VAX provides a review of AIDS vaccine clinical trials activity in 2006 and a comprehensive listing of all ongoing trials as of January 2007. Includes a world map of trials launched in 2006.

WOMEN

6299

"Making partners use condoms: a struggle for HIV-positive women"

Location:

AA VERTICAL FILE - WOMEN - WOM 62

Publication Type:

ARTICLE (ONLINE)

by Thaczuk, Derel

AIDSMAP NAM

Volume: Issue: Day: 2nd Month: July Year: 2007 Page numbers: Also available online at <http://www.aidsmap.com/en/news/2607797E-46FD-49D9-828A-7074483B5E5C.asp>

Subjects:

1. WOMEN WITH HIV 2. WOMEN-RISK BEHAVIOUR 3. SAFER SEX 4. CONDOMS

Abstract:

A small, qualitative study of HIV-positive women in the United States has found that most were sexually abstinent or practiced safe sex exclusively, while nearly all of the women who regularly had unprotected sex did so within monogamous relationships in which the women's ongoing struggles to use condoms were overridden by their male partners. As a consequence, the women lived with constant fear of infecting their partners, and guilt and distress at their inability to control the sexual choices. The study was published in the June edition of the American Journal of Public Health.

