



CHOICES

THE NEWSLETTER OF HAWAII ISLAND HIV/AIDS

JUNE 2005

HIV stops with me"

Charles Kaiser

I wrote those words 13 years ago in the very first article about the resurgence of unsafe sex among gay men. At the end of the '80s, infection rates had plummeted, after most people realized that they could protect themselves simply by wearing a condom every time they had anal intercourse.

But as a new generation that had never witnessed the deaths of dozens of their friends came of age, and part of an older generation grew tired of worrying about when they might be infected, a small but persistent minority emerged that stubbornly resisted the new rules of engagement. And that small minority is still with us.

When the New York City Health Department announced this year that it might have identified a new and particularly virulent strain of HIV, which progresses rapidly to full-blown AIDS and doesn't respond to many of the usual treatments, the media responded for a week or two with wall-to-wall coverage.

I told The New York Times, "Gay men do not have the right to spread a debilitating and often fatal disease. A person who is HIV-positive has no more right to unprotected intercourse than he has the right to put a bullet through another person's head." (My immediate inspiration was a close friend who was HIV-positive and who had become a meth addict a couple of years ago. He had told me that he had "the right" to fuck others without a condom, and that had made me apoplectic.)

Because my quote was above the fold on the front page of the Times, it led to a spate of media appearances and interviews with other outlets. The next day, Aaron Brown had me on CNN.

Brown asked if there weren't some in our community who would prefer to keep this dirty linen unwashed in public. "Oh no," I said. "I think we're way beyond that."

Nothing could have been further from the truth.

It turns out there's a whole class of gay activists who are opposed to any criticism of anyone who is gay -- no matter how badly he may be behaving. A spokesman for a gay organization in New York accused the health department of "stigmatizing gay men as crazed drug addicts carelessly or wantonly spreading a killer bug." I responded, "The fact is that a small minority of gay men *are* crazed drug addicts, and

that is exactly what they are doing. It does not serve any useful purpose to pretend that this group of people doesn't exist."

There's another popular idea that I think is outrageous -- the notion that the only way to have intimate sex is to engage in condomless

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CHOICES

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Hawaii Island HIV/AIDS Foundation
75-240 Nani-Kailua Dr. Suite 5
Kailua-Kona, HI. 96740
Phone: 331.8177
Fax: 331.0762
E-mail: hihaf@hihaf.org

16-204 Melekahiwa Pl.
Kea'au, HI. 96749
Phone: 982.8800
FAX: 982.8802

Georgie Kennedy/Executive Director

Staff Hilo

Kaiulani Carvalho/Office Manager
Kate Nawahine/Benefits Specialist
Cindy Medeiros/Shelter coordinator-Medicaid
Jeff Seyfried/Prevention Services to PLWH
Cyd Hoffeld/Prevention for Women & Teens
Daron Scarborough/Outreach
Mark Meurs/Treatment Advocate
Wailana Simcock/Prevention, MSM

Staff Kona

Wing Takakuwa/Treatment Advocate
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Dennis Walsh/Administration Assistant
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Hawai'i Island HIV/AIDS Foundation

Mission Statement

The Hawaii Island HIV/AIDS Foundation is a non-profit organization dedicated to assisting those affected by HIV/AIDS to maximize their quality of life, and to ending the spread of HIV. We also utilize the lessons learned in the HIV epidemic to care and advocate for others in the fight against related diseases.

Vision

To build a healthier, stronger, and more sustainable community that supports all its members with a focus on HIV issues.

Core Values

Responsiveness: To people with HIV/AIDS and their families and to the prevention education needs of the community.

Accountability: To our consumers, funding sources, and the community at large.

Integrity: To provide services to the entire community in a humane, loving, non-judgmental manner.

Diversity: To embrace the philosophy of "inclusiveness".

Collaboration: To establish and maintain partnerships within the community that maximizes resources and decreases duplication of services.

Leadership: To set the highest standards for responsibility to our mission, vision and values, and be recognized as a positive, inspirational role model in our community.

Advocacy: A collective public voice to speak on behalf of those affected by HIV/AIDS.

I'm too shy to
express my sexual
needs except over
the phone to peo-
ple I don't know.

Garry Shandling

US comedian & television actor (1949 -)

New HIV test could cut rates

Researchers in North Carolina, USA have found a cost-effective way of screening large populations with a test that can pick up the presence of HIV within days of infection, rather than the three months it can take for standard tests to detect antibodies.

The importance of this has been underscored by an African study, which has found that people are 12 times as infectious during those first three months of infection than they are later.

North Carolina is the only US state to use the nucleic acid amplification test (NAAT). Its use enabled researchers to pick up on a wildfire outbreak of HIV that was spreading among local college students last year.

The NAAT test costs about \$60 a time as opposed to \$10 (£5.50) for the regular antibody test.

However Christopher Pilcher, associate professor of medicine at the University of North Carolina, brought the cost of the test down to \$13.63 by the technique of 'pooling'.

He tested blood samples collected together from large numbers of different people. If a positive result showed up, he 'zoomed in' on the infection by repeatedly testing different combinations of samples till one was left.

This enabled him to test nearly 110,000 people.

He found an HIV infection rate of 0.53% - about the US average.

Of these infections, over a sixth were recent infections (newer than six months) detectable by ordinary antibody tests.

But a further 23 were only picked up by the NAT test – and these included a cluster of infections in colleges that enabled him to detect a new outbreak among students.

Pilcher comments: "We believe that nucleic acid amplification testing should be a standard tool for the prevention and surveillance of HIV infection."

The importance of detecting early infection is underlined by a study from Rakai, Uganda of heterosexual couples where one of the partners had HIV.

It found an annual infection rate (despite safe-sex counselling and condom provision) of eight per cent in couples where one partner had an established HIV infection.

But in couples where one partner was newly infected, approaching half (43.4%) of the negative partners acquired HIV within about three months of the other partner.

This enabled the researchers to calculate that the chances of passing on HIV in any one act of heterosexual sex was only one in 1,400. But it was nearly 12 times higher in the first three months of infection, at one chance in 120.

The figures for gay men and heterosexuals who have anal sex would be correspondingly higher, since it is estimated that HIV is passed on five to eight times

as easily in anal as in vaginal sex.

But the fact that people in early infection have much higher viral loads (in the Ugandan study, 12 times higher) would still mean that a large proportion of HIV is being passed on by gay men who've just caught it, and are unlikely to know it.

From front page

intercourse. In the age of AIDS, sex with a condom can actually be *more* intimate -- first, because it shows that you genuinely care about your partner, and second, because it makes the experience almost completely stress-free.

Finally, there are those who argue that it is solely the responsibility of people who are HIV-negative to remain negative. But why should that be so? If a positive person picks up a negative person, and the negative person says, "I don't care if you fuck me with a condom or not" -- it then becomes the responsibility of the positive person to prevent the continuation of this epidemic. "Look," he should say, "the last thing I want to do is give this disease to someone else."

A new ad campaign in the New York City subway gets it exactly right. It features HIV-positive men of all ages and colors, who proudly proclaim "HIV stops with me." That must be our goal. If the idea of a gay "community" is ever going to mean anything, it must mean that we care about each other enough to do everything in our power to end this scourge.

Charles Kaiser, whose last PlanetOut article chronicled the movie "Walk on Water," is the author of "The Gay Metropolis."



PEP on the Down Low *CDC OKS "MORNINGS-AFTER" PILLS FOR RISKY SEX--SO WHY WON'T THE MED ESTABLISHMENT WAKE UP?*

by Rebecca Minnich

In January, the feds cranked out new guidelines for offering post-exposure prophylaxis (PEP)—the emergency anti-HIV regimen for folks likely exposed to the virus within the previous 72 hours. The new recommendations expand its long-approved use (a triple combo for 28 days—hence, mornings after) for so-called occupational accidents, such as hospital needlesticks to include the far larger number of slipups by civilians—needle sharing and, especially, high-risk sex. While well-informed doctors and bold city health departments, such as San Francisco's, have offered PEP for unsafe sex since the late '90s, the CDC's move is an official stamp of approval, directing medical providers to inform at-risk patients of its availability.

"We sent a press release [announcing the guidelines] through all major medical media," says Ronald Valdiserri, MD, CDC deputy director. But POZ's random sampling of top HIV facilities nationwide indicates that the CDC needs to step up its PEP PR because Valdiserri's memo has largely gone unread, and many providers do not know a PEP pill from a pep cheer.

Beacon Clinic in Boulder, Colorado, and El Rio Community Health Center in Tucson, Arizona, offered no PEP at all. In Charleston, South Carolina, neither the top ASO nor the health department knew where to get PEP. A St. Louis HIV clinic provided PEP, but only to people who knew their partner was HIV positive. AID Atlanta, Georgia's biggest ASO, just minutes from CDC headquarters, helpfully redirected POZ to two local hospitals, but both offered PEP only to its hospital employees. A local health department staffer had never even heard of PEP.

On the other hand, in New York City, a St. Vincent's Hospital rep told POZ that all walk-ins can readily get PEP. A Cleveland clinic even said it offers PEP up to a week after exposure. "I wish all we had to do was issue guidelines," Valdiserri says, "but it takes ongoing education. Providers need to take some responsibility, too."

JULY 25 from page 7

Scott Hitt (above left), founder of the American Academy of HIV Medicine, forfeits his MD license and admits to fondling patients. The group quickly moves from LA to DC, tapping community favorite Big Apple HIV doc **Howard Grossman** for the top post in September.

AUGUST 2

In a year of long-overdue progressive initiatives to limit its exploding AIDS epidemic (not including arrests of activists in HIV hot spot Henan province, that is), **China** announces it will provide free condoms to its estimated 850,000 HIVers. Not all, however, will be plastic-wrapped in the flag.

AUGUST 3

HIVers with lipoatrophy rejoice when cheek filler **Sculptra** (formerly New-Fill) gets an FDA OK—a first for domestic lipo. But gratitude turns to groans when maker Dermik prices it at \$480 a bottle, nearly four times the EU cost.

AUGUST 26–SEPTEMBER 2

At the **Republican National Convention** in New York City, **ACT UP** grabs world attention with a naked, traffic-jamming "Stop AIDS" demo—and a short, explosive protest at an infiltrated GOP-youth rally.

SEPTEMBER 19

HBO's AIDS flashback *Angels in America* scores 11 Emmy awards, a record for a miniseries. Taking their bows, winners **Meryl Streep**, **Al Pacino** and director **Mike Nichols** (who says, "AIDS isn't over yet, and we must do what we can for Africa") offer a healthy dose of HIV for millions of TV viewers.

OCTOBER 5

During the vice-presidential debates, moderator **Gwenn Ifill** asks each candidate what he'd do about black American women's high risk of AIDS. **John Edwards** skirts the question completely, while **Dick Cheney** frankly admits that he's "not aware" of the stats, provoking partisan outrage.

OCTOBER 12

Defending his request for a public state registry of HIVers, Maryland comptroller **William Schaefer** calls PWAs "a danger," adding, "They bring [HIV] on themselves." Fielding furious demands that he step down, Schaefer backtracks a bit, saying that he meant a list of "known givers of HIV."

OCTOBER 24

HIV writer/activist **Larry Kramer** is saluted at a New York City gala, capping a banner year that includes not only a triumphant revival of his 1985 AIDS drama *The Normal Heart* but the 69-year-old liver transplantee's stirring postelection speech to a packed crowd of Gotham gays seeking action.

OCTOBER 29

PLO head **Yasir Arafat** is flown to a Paris hospital with a "secret blood disease." With the cause still secret at his Nov. 11 death, the media widely reports not gay press and Internet rumors he was bisexual and had HIV but Palestinian rumors Israel poisoned him.

NOVEMBER 2

President George W. Bush is elected to a second term in office, defeating John Kerry with 51 percent of the popular vote. Many 49 percenters suddenly see the future as a choice between fleeing to Canada or being marched to the gas chambers. For once, we at *POZ* advise keeping a cool head and a sense of humor. HIVers are made of stronger stuff than that.

Study: One in 12 patients 'undetectable without drugs'

Gus Cairns

www.guscairns.com

19 May, 2005



A significant proportion of people with HIV have undetectable amounts of HIV in their blood at least some of the time without drug treatment, a French study has shown.

The study by Dr Yoann Madec researched the HIV viral load in 426 patients whose date of infection was known and who had had viral load tests every six months between 1988 and 1995, before HIV drugs became available.

To his surprise he found that 36 patients – one in 12 – had at some time during this period been undetectable, as measured by the viral load tests used at the time.

The average length of viral undetectability was a year, and varied between five months to over five years.

This doesn't mean that the patients had no HIV in their system. At the time viral load tests could at best only pick up more than 400 copies of HIV, whereas the test generally used today can detect counts down to 50.

The proportion with undetectable virus increased over time, from 3.5% a year after infection to 5.5% two years after and 6.7% five years after. What subsequently happened to these patients was not known.

Unsurprisingly people who had low viral loads and high CD4 counts when first infected were more likely to become undetectable. Interestingly however women – who tend to have lower viral loads, though they develop AIDS as fast as men – were 2.5 times more likely to become undetectable.

The researchers commented that some scientists have advocated that people should receive drug treatment in early infection because a proportion of those treated achieve undetectable HIV later.

The study suggests that some people are more capable of controlling HIV than had been thought, and that more studies are needed to find out if early drug treatment can help them do this.

The finding also suggests that people who achieve claim that complementary therapies helped them control their HIV might simply be lucky – or might be helping their body do something previously thought impossible in all but a small number of so-called non-progressors.

The researchers end by urging more studies to look at the 'life history' of HIV infection, and how it breaks free from the body's immune controls to create disease.

New HIV drug could halt AIDS

Gus Cairns

www.guscairns.com

19 May, 2005



Early trials in mice have found that a drug from the new class called CCR5 inhibitors could, if administered immediately after infection, stop HIV from infecting the body's CD4 cells to such an extent that AIDS might never develop.

The drug, GW873140, is made by GlaxoSmithKline and is one of three CCR5 inhibitors currently undergoing trials.

Although the trials have excited some controversy, in principle these drugs could have many novel uses in prevention and treatment. They work in a completely new way, by stopping the kind of HIV that usually gets transmitted from attaching itself to cells.

The Japanese study was inspired by findings that HIV in early infection infects and destroys a far larger number of CD4 cells than had previously been thought.

Scientists theorise that this initial damage creates a hyperactive immune response that tries to repair the damage but which eventually leads to AIDS because the immune system becomes exhausted.

These cells are exactly the ones that have the CCR5 molecule on their surface, and the Japanese scientists figured that if they flooded the body immediately after infection with CCR5 inhibitors, HIV would be able to gain much less of a foothold.

The scientists used mice that had been genetically engineered to develop HIV infection and injected them first with HIV and then, a day later, with GW873140 or with saline for comparison.

While the CD4 cell count in mice given saline fell by 90% within days of infection, the count in mice given the drug only fell by 8%.

And because there were fewer infected cells making new copies of HIV, the amount of virus in the mice given the drug was 1,000-fold lower.

"These data suggest that [GW873140] should be further developed as a further therapeutic against HIV infection," the authors say.

The problem, of course, would be finding people within days of HIV infection, and it will be years before these early animal studies turn into anything you can get at the clinic.

But they are the first sign that the CCR5 inhibitors could be used in novel ways not only to treat, but to prevent, AIDS.

The Antioxidant Buffet

A USDA study listed 20 foods that pack, per serving, the most antioxidants—compounds that help defend your body from stress and disease. Ronald Prior, PhD, who led the study, says foods carry antioxidants in different chemical components, so eat a variety to get the most bang for your bowl. HIVers need extra antioxidants, and though diet alone can't provide them all (see "Those Other Pills," Page 7), these chow choices from the top 20—and a recipe serving up a slew of 'em—are a good start.

- ▶ **BERRIES** (blue-, cran-, black-, rasp- and straw-) ranked berry high. Pick any for good health.
- ▶ **VEGETABLES** Artichoke hearts and russet potatoes steamed their way into the top 20.
- ▶ **APPLES** Red Delicious, Granny Smiths and Galas shone. How d'ya like them apples?
- ▶ **NUTS** Pecans made the list; walnuts, hazelnuts and pistachios finished just out of the winner's circle.
- ▶ **BEANS** be the best! Small red beans ranked No.1.; kidney, pinto and black beans followed. Choose dried beans, not canned.

Three-Bean Potato Salad

Dish up an antioxidant-laden treat to help your health. Sonia Grant, nutritionist at God's Love We Deliver (www.glwd.org), offers this recipe using some top 20 foods:

Ingredients

2 cups each (cooked):

red kidney, garbanzo and green beans

3 cups russet potatoes (cooked and quartered)

1 cup whole cranberries

1 /4 cup each (chopped) green, red and yellow bell peppers

1 /4 cup sun-dried tomatoes (chopped)

Dressing

1 /2 cup olive oil

2/3 cup apple cider vinegar

1 tsp oregano

1 /4 tsp each: sage (dried, chopped) and black pepper

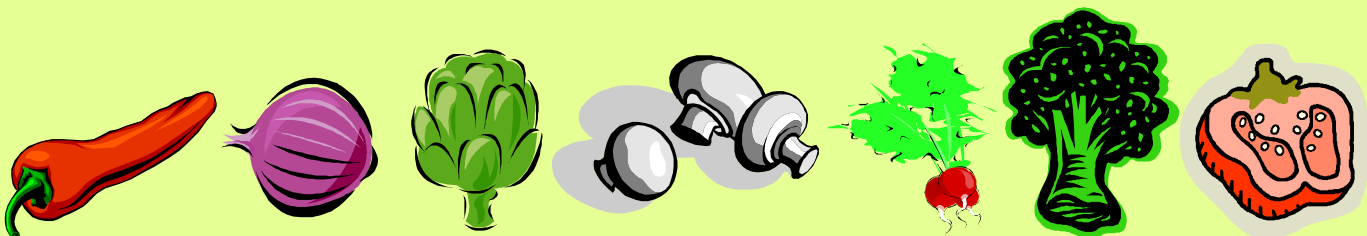
1 clove roasted garlic (crushed)

Preparation

Combine all ingredients in a bowl. Add dressing.

Chill for one hour before serving.

Makes 6 to 8 servings.



Strange Days Indeed

by Staff

POZ presents the 24 times in 2004 when an HIVer had to stop and ask, “What’s in this cocktail, anyway?”

JANUARY 20

AIDS Quilt dad **Cleve Jones** sues its overseers, claiming they unjustly fired him for planning to display all 40,000 panels of the big blanket—a first since 1996. His aim? To get AIDS into the election.

FEBRUARY 07

Ongoing reports of multidrug-resistant **staph infections** (MRSA) causing nasty skin infections in HIVers prompt the CDC to hold a conference call with gay-health honchos in seven cities. (Ah, we didn’t know they cared.)

FEBRUARY 16

In a public statement, 60 top researchers from all fields—including **20 Nobel laureates**—demand that Bush and buds stop distorting science for political ends (like dissing condoms). Shrub only shrugs.

MARCH 13

Eighty HIVers pose naked on a freezing morning for the cover of *POZ*’s 10th anniversary May issue. The intimacy, intensity and immediate international coverage of the event—created by artist **Spencer Tunick**—turn the chills to thrills.

APRIL 11

It’s coitus interruptus across the condom-snubbing straight **porn industry** when one busy male performer—and four women (not pictured)—test positive. Despite bad press, fines and threats by pols to force condom use, the industry is soon back to bangin’ as usual—and resumes its “safe” policy of mandatory testing every three months.

APRIL 16

Oprah shocks black America when her show explores black men doing each other “on the down low”—and putting their ladies at risk for HIV. A month later, La Winfrey sits down with **Diane Sawyer** on prime-time TV to share her efforts in aiding thousands of South African AIDS orphans.

MAY 6

A court in “reformed” Libya sentences **five Bulgarian nurses** and one Palestinian doc to death by firing squad for supposedly infecting 400 local kids with HIV—likely a coverup of its own tainted-blood scandal. No shots have been fired.

MAY 16

Pressured to buy generic HIV meds with U.S. global-AIDS funds, Bushies announce a new (widely viewed as redundant) **FDA fast-track review** for such meds. Foreign generics makers refuse to apply.

MAY 20

As NAPWA and others howl, the CDC throws \$49 million at groups to do its mandated “**prevention for positives**”—testing, not condoms. Two-thirds of orgs focused on neggies lose their funding.

MAY 26

As part of a settlement over barbaric HIV care at **Limestone Correctional Facility**, sick inmates are no longer made to line up at 3 a.m. for meds, or to take them without food, among other long-due upgrades.

JUNE 16

Robert Mugabe, repressive, homophobic head of AIDS-ravaged Zimbabwe, confirms repeated rumors that yes, he, too, has lost relatives to AIDS. The admission follows similar ones from Malawi prez **Bakili Muluzi** and South African pol **Mangosuthu Buthelezi**.

JUNE 23

In a campaign speech at a black Philly church, abstinence-only ayatollah **George W. Bush** throws a first-ever crumb to condom use, prompting front-page *New York Times* coverage and gaga press releases from groveling gay groups. The C-word is not repeated.

JULY 12

A week after launching a celebrity-driven condom campaign in India, actor **Richard Gere** criticizes the Bush administration's lack of “sanity” about rubbers at the 15th world AIDS confab in Bangkok. Three months later, Gere takes his condom crusade to Russia.

JULY 24

A Florida paper reveals that some Sunshine State counties are charging **positive prostitutes**—snared in sting operations—with criminal transmission, despite little evidence of unsafe sex. Maximum sentence? Five years.



Leave a Legacy

When you evaluate your estate planning, please consider remembering the Hawaii Island HIV/AIDS Foundation in your will.

Your gift will help support our Services to our clients.

CALL FOR PARTICIPANTS

A 3-week pilot study offering free wellness energy work to qualified applicants. 5 people will be selected for this research project which is aimed at lowering viral load and increasing immunity. All viral-load testing is free.

GENERAL QUALIFICATIONS:

1. People not taking anti-retroviral pharmaceuticals.
2. Those on Structured Treatment Interruption programs who have not taken the anti-virals for 1 month prior to the first viral-load testing.

For more information please call Carol Hannum, D.D.,

Community Advisory Board Update

If you are lacking health insurance or just in a bind about what to do with medications, perhaps a clinical trial might be right for you. All expenses are covered and the staff at the AIDS Clinical Trial unit are fantastic and very willing to accommodate you. You can contact them at 1.800.806.8208 directly.

Wing in Kona or Mark in Kea'au can also help you.

As always, we have purified water available. Bring your own containers to fill

The Hawai'i Island HIV/AIDS Foundation offices will be closed Friday June 10 King Kamehameha Day & Monday July 4 Independence Day



June 2005

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4 Anuenue Potluck
5	6	7	8	9	10 Office Closed	11
12	13	14	15	16	17	18
19	20	21 Support group HILO 6:00 pm	22	23	24	25
26	27	28	29	30		

July 2005

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2 Anuenue Potluck
3	4 Office Closed	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19 Support group HILO 6:00 pm	20	21	22	23
24	25	26	27	28	29	30
31						