Myths and Realities about HIV

Many myths about HIV and AIDS have led to prejudice and stigma about the disease. Here are some of the most common:

**Myth:** AIDS is a death sentence.

**Reality:** In the early 1980s and before, people with HIV/AIDS died almost before the disease could be identified.

Much has changed since then. Antiretroviral therapy has made it possible for people to live for decades with HIV infection. When taken as directed by your physician, antiretroviral medications can improve the quality of your life and health for many, many years.

In the meantime, research is ongoing into the causes of HIV, better ways to treat it and potential cures.

**Myth:** HIV only affects gay men and drug users.

**Reality:** HIV is an equal opportunity virus. It can affect newborn babies, women, seniors, teens and people of any race or nationality. Any behavior such as unsafe sex, multiple sexual partners or intravenous drug use can put you at risk for HIV infection and AIDS. In fact, women are increasingly becoming HIV-infected. This usually happens through sharing HIV-contaminated needles or having sex with an HIV-infected man. The Centers for Disease Control in the United States estimates that nearly one out of three new HIV infections in the United States involved women. Worldwide, about as many women as men are HIV-infected. In areas like sub-Saharan Africa, nearly 60% of adults with HIV are women.

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**Myth:** AIDS can be cured by:
- New drugs available
- Sex with a virgin
- Sex with an animal

**Reality:** There is no cure for HIV infection. Highly active antiretroviral therapy (HAART) helps manage symptoms and the amount of the virus in the body, but it is not a cure. People with HIV who are receiving HAART are living longer. However, if HAART is stopped, the virus becomes stronger and eventually develops into AIDS. Since the 16th century, people have believed that sex with a virgin could get rid of sexually transmitted diseases. This simply isn't true. Sex with a virgin just exposes the virgin to HIV.

No sexual act cures HIV. Sex with an animal is cruel, a criminal offense in many places and carries with it other risks.

**Myth:** HIV/AIDS can be spread by:
- Casual contact with a person who has HIV
- Mosquitoes
- Being tattooed
- Breathing the air around an HIV-infected person
- Toilet seats or doorknobs
- Touching, hugging, holding hands or cheek kissing an HIV-infected person
- Kissing an HIV-infected person
- Sharing silverware or plates with an HIV-infected person
- Sharing exercise equipment or playing sports with an HIV-infected person
**Reality:** HIV is spread only when someone is exposed to blood, semen, vaginal fluid or mother’s milk from someone who is infected with HIV. The virus does not live long in the open environment outside the body. There is virtually no evidence that HIV infection can be spread from tears or sweat. Even saliva has very little viral content. (The risk goes up, however, if either person has blood in their mouth from cuts, open sores or gum disease.)

HIV infection can not be spread by day-to-day contact at work, school or social settings. Shaking someone’s hand, hugging them, using the same toilet, drinking from the same glass, being nearby when someone with HIV coughs or sneezes – none of these activities spreads HIV infection. Even open-mouthed kissing is relatively low risk.

During a mosquito bite, the mosquito injects its own saliva into the person it is biting. It is not injecting blood from the last person the mosquito bit. Mosquito saliva can carry infections such as malaria, dengue fever, yellow fever or West Nile virus. This is how a person can get those infections from a mosquito bite. However, HIV cannot be transmitted in this way.

The chance of getting infected while being tattooed is low because HIV can not survive well in the open air. Tattooing, if precautions are not used, can spread other diseases, including hepatitis. Using disposable needles, proper cleaning and sterilization of equipment eliminates much of the infection risk from tattooing.

While a woman with HIV who is pregnant can spread the virus to her child during childbirth or pregnancy, it does not happen as often as you might expect. A pregnant woman with HIV who receives no treatment at all will give birth to an HIV-infected baby about 25% of the time. With today’s antiretroviral therapy, however, the rate of transmission from mother to child has dropped to about 2%.

**Myth:** HIV cannot be transmitted:
- If you are on antiretroviral therapy
- By oral sex
- If you use birth control methods like diaphragms, cervical caps, sponges, spermicides or the Pill
- If you already have another sexually transmitted disease (STD)
- If you use your own needles when taking drugs and don’t share them

**Reality:** Antiretroviral therapy helps keep the symptoms of HIV infection under control. It helps keep the amount of virus in the body as low as possible. It does not cure HIV. Even when the virus cannot be detected by the tests we have available today, it is still in the body. It can still be spread to others.

Oral sex is less risky than anal or vaginal sex, but not risk-free. HIV can spread (to either partner) when there is contact between semen and mucous membranes in the mouth.

A single instance of oral sex probably has a very low level of risk. But the more oral sex a person has, the higher his or her risk. Risk goes up if there are open sores on the genitals or mouth, or if there is bleeding from gum disease. Any direct contact between semen or saliva or openings in the skin or surface of the mouth raises the risk of HIV infection.

Spermicides, diaphragms, caps, sponges and “The Pill” are all aimed at preventing pregnancy. They do not protect against the spread of sexually transmitted diseases such as HIV. Some birth control products that contain the spermicide nonoxynol-9 may actually increase the risk of HIV infection.

Not only is it possible to have more than one STD at a time, having an STD can make you six to ten times more likely to pass or get HIV during sex. Your chances of getting HIV infection go up 10 to
300 times if a genital ulcer from syphilis or herpes is present.

Sharing contaminated hypodermic needles can spread HIV infection. Sharing the tools used to prepare for an intravenous drug injection can also spread HIV infection.

**Myth:** Antiretroviral drugs are toxic and more dangerous than the HIV itself.

**Reality:** Antiretroviral drugs are powerful. Taken in combinations of two or more drugs at a time, they can keep HIV infection in check for long periods. Antiretroviral drugs have reduced the death rate from HIV/AIDS by 80%. They have made dramatic improvements in the quality of life for people who have HIV infection.

At the same time, antiretroviral drugs have side effects of their own and can cause interactions for other drugs that a person may need to take for opportunistic infections.

Educating yourself about the drugs you are taking, knowing what side effects to look for and working in partnership with a doctor whom you trust can keep the drawbacks of antiretroviral therapy low.

**Myth:** HIV testing is:
- Unreliable
- Pointless
- Unnecessary, because I would know if my partner or I had HIV

**Reality:** You can have – and spread – HIV for up to ten years without having any symptoms of HIV or AIDS. HIV affects each individual differently. It is possible to look and feel healthy for years. The only sure way to know if you have HIV infection is to get tested.

Today, testing for HIV is more reliable than tests for many other diseases. The accuracy in establishing whether a person does – or does not – have HIV infection is quite high and reliable. Usually when a test comes back HIV positive, the test is repeated or other tests are done. The additional tests check for viral genetic material in body fluids and cells as a way of confirming the original test results.

Knowing if you have HIV gives you the power to seek treatment when it will be most effective. It also makes it possible for you to avoid spreading the infection to others.

**Myth:** HIV is a man-made virus created for warfare or to target people of certain races.

**Reality:** In the history of medical research, there are some terrible examples of studies done that showed a reckless disregard for individual or community safety. These studies have left much distrust among many people regarding the public health system.

In addition, a Soviet newspaper in the mid-1980s claimed that AIDS was the result of U.S. germ warfare experiments.

HIV affects members of minority groups heavily because they do not always have access to health care or expensive antiretroviral drugs.

After nearly 30 years of intense study and publicity, there is no evidence that governments have the ability to create such a devastating virus. There is also no evidence of governments spreading the virus for political gain.
**Myth:** HIV/AIDS does not really exist because:

- AIDS is just a new name for old diseases that have existed for a long time in Africa
- There are so many diseases associated with HIV/AIDS infection that one virus cannot cause them all

**Reality:** Many diseases common in Africa have symptoms associated with AIDS such as wasting, diarrhea and tuberculosis. However, these diseases used to only be associated with the elderly or people who did not get enough to eat. With AIDS, the symptoms appear in young and middle-aged people, many of whom are members of the middle class.

Additionally, research has shown that people with the above symptoms who are also HIV-positive are much more likely to die sooner than people with the same symptoms who do not have HIV. HIV infection changes the body’s ability to handle other infections.

AIDS does not cause the other diseases. Instead they are the result of having HIV/AIDS. The way HIV works in the body is to weaken the immune system. Common bacteria and viruses that everyone has on and in their bodies can not be controlled by the weakened immune system. As a result, a person with HIV/AIDS develops diseases such as *Pneumocystis jiroveci* pneumonia (PCP), thrush, Kaposi’s sarcoma, *Mycobacterium avium* complex (MAC) and others. These are called opportunistic infections. The types of infections that a person with HIV develops depend on what he or she is exposed to in the surrounding environment.

**For More Information**

For more information, contact your Registered Nurse Care Manager (RNCM), or call Member Services at (888) 997-0979 to be connected with your RNCM.