

# HEAL

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*HIV-positive individuals need support and acceptance from friends and loved ones.*

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## Living with HIV

HIV-positive individuals are able to lead normal lives, thanks to advanced medical treatment, writes **Meera Murugesan**



*The younger*

**J**UST like Covid-19, there was much we didn't know about HIV and AIDS in the early years of the disease.

This led to fear and isolation, and stigmatisation of HIV-positive individuals and their families.

Patients had to hide their HIV status for fear of being ostracised, not only by society but also family members.

No one spoke of being HIV-positive. The consequences of doing so were just too great.

But visit the Malaysian AIDS Council's website today and you'll see videos of HIV-positive individuals freely sharing their life stories, their experiences; conveying hope and inspiration, and not despair.

As our understanding of HIV grow, so too has our approach to managing those infected.

Being HIV-positive is not a death sentence and many individuals are able to lead healthy, productive lives.

This, of course, doesn't mean that the struggle is over. It remains a challenge for the newly diagnosed and those who still struggle to get support and love from friends and family as they navigate life as an HIV-positive individual.

government clinics across Malaysia.

However, this taxpayer-funded treatment programme does not cover second-line ARV, which is needed for patients with persistent drug resistance.

"The current generation of ARV is not yet able to cure HIV infection or completely remove the virus from the body. The drug works by stopping the virus from multiplying to such a low level that it does not show up on tests and cannot be passed through sex."

Treatment adherence is key, stresses Dr Adeeba. Taking ARV is a life-long commitment and should start immediately after a positive diagnosis. The drug helps to reduce the viral load in the body, stops patients from transmitting the virus to others and helps them stay healthy.

After starting treatment, they need to attend scheduled medical appointments and keep track of any emerging symptoms.

The frequency of these appointments will decrease with time; after the patient achieves an undetectable viral load over a prolonged period.

Dr Adeeba says close monitoring is crucial so that any early signs of opportunistic infections can be addressed immediately by the doctor.

## MAKING PROGRESS

Malaysian AIDS Foundation chairman, Prof Datuk Dr Adeeba Kamarulzaman, says the situation has certainly improved as the younger generation is more knowledgeable and sensitive to HIV and AIDS as a public health issue. However, it is still far from ideal.

What is worrying is that certain discriminatory practices and stigma associated with the disease are somehow "institutionalised", especially in the workplace where HIV status remains a barrier to employment, and refusal by the insurance industry to budge when it comes to removing HIV from coverage exclusion.

Dr Adeeba says in Malaysia, sexual transmission of HIV persists because adequate prevention services and awareness of this issue does not reach the target group; or at least not on a scale that could make a difference.

"Furthermore, the convergence of moral ideology with HIV infection has been dangerously exploited and created conflict at the expense of public health."

Some members of the key affected populations face double-edged stigma and encounter a greater level of discrimination even when accessing basic healthcare and HIV prevention services, she adds.

## WOMEN AND HIV

In absolute numbers, women represent a smaller number of HIV cases in Malaysia, with a male to female ratio of 6:5 in 2020.

Nevertheless, women shoulder a disproportionate burden of HIV and this is related to the greater issue of gender inequality which is more obvious in low-

income households, explains Dr Adeeba. "Women are also expected to provide family care, including care of family members affected by HIV, sometimes at the expense of their own health."

Due to socio-economic vulnerability and stigmatisation by family members, some women living with HIV, who have lost their partners, are pushed deeper into poverty and in some drastic cases, have to seek protection at AIDS shelter homes or forced to sell sexual services to survive.

## WHERE ARE WE NOW?

The newer generation of antiretroviral treatments (ARV) are a combination of two to three types of ARV drugs in fixed doses, explains Dr Adeeba.

The improved therapeutic profile of these drugs has enhanced the quality of care for HIV patients and encouraged better adherence to treatment. They have fewer side effects too.

Nevertheless, certain issues related to the psychological state of patients such as depression or substance abuse are known to affect adherence to drug therapy.

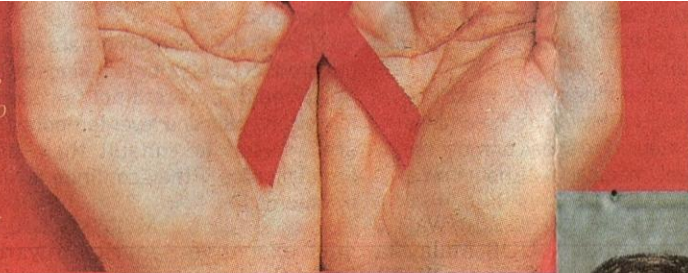
First-line ARV is currently provided free for Malaysian PLHIV (People Living with HIV) at government hospitals and selected



Prof Datuk Dr Adeeba Kamarulzaman

The younger generation is more knowledgeable and sensitive to HIV and AIDS as a public health issue.

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Just like any other person, PLHIV should strive to maintain a healthy lifestyle by doing regular exercise, opting for healthier diets and avoiding tobacco, alcohol and recreational drugs.

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## HIV IN MALAYSIA (2020)

3,146

new infections reported

621

AIDS-related deaths

80,428

number of people living with HIV (1986-2020)

## HIV TRANSMISSION METHODS MALAYSIA (2020)

Sexual transmission

94%

Injection drug use

4%

Others

1%

From mother to child (through pregnancy, childbirth, breastfeeding)

1%

## HIV VERSUS AIDS

- In Malaysia, all government health facilities provide free HIV screening.
- There is no cure for HIV, but continuous antiretroviral treatment enables patients to lead long, healthy lives.
- AIDS is the last stage of HIV, when the infection becomes very advanced. If left untreated, it will lead to death.
- Fewer people with HIV develop AIDS these days because treatment for HIV enables them to stay well.

Source: Malaysian Aids Council (<https://mac.org.my/v4/>)