

State University of New York College at Buffalo - Buffalo State University

Digital Commons at Buffalo State

HIV/AIDS Educational Material

HIV/AIDS Collections

9-1987

100 Questions and Answers

New York State Department of Health

Follow this and additional works at: <https://digitalcommons.buffalostate.edu/hivaidsedu>



Part of the [Feminist, Gender, and Sexuality Studies Commons](#), [History Commons](#), and the [Museum Studies Commons](#)

Recommended Citation

New York State Department of Health, "100 Questions and Answers" (1987). *HIV/AIDS Educational Material*. 8.

<https://digitalcommons.buffalostate.edu/hivaidsedu/8>

This Book is brought to you for free and open access by the HIV/AIDS Collections at Digital Commons at Buffalo State. It has been accepted for inclusion in HIV/AIDS Educational Material by an authorized administrator of Digital Commons at Buffalo State. For more information, please contact digitalcommons@buffalostate.edu.

Acquired
Immune
Deficiency
Syndrome

100
Questions
and Answers

AIDS



WNY AIDS PROGRAM
220 Delaware Ave.
Suite 512
Buffalo, NY 14202
Hotline: 847-AIDS

New York State
Mario M. Cuomo, Governor
Department of Health
David Axelrod, M.D., Commissioner
September 1987

QUESTIONS AND ANSWERS ABOUT AIDS

1. What is AIDS?

Acquired immune deficiency syndrome (AIDS) is a disease complex characterized by a collapse of the body's natural immunity against disease. Because of this failure of the immune system, patients with AIDS are vulnerable to unusual infections or cancers that usually pose no threat to a person whose immune system is working normally.

2. What causes AIDS?

Investigators have discovered a virus that is linked with AIDS. An international committee of scientists recently designated the virus as human immunodeficiency virus (HIV); it previously had been called human T-lymphotropic virus, type III (HTLV-III), lymphadenopathy associated virus (LAV) or AIDS-related virus (ARV). Infection with this virus does not always lead to AIDS, and researchers are investigating whether other co-factors may be necessary to trigger the disease. Most HIV infected persons have no symptoms; others develop illness varying in severity from mild to extremely serious.

AIDS RISK GROUPS

3. Who is at risk for AIDS?

Approximately 95 percent of AIDS cases in New York State have occurred among the following groups of people:

58 percent — homosexual or bisexual men, 5 percent of whom have used intravenous (IV) drugs;

31 percent — male and female IV drug users;

2 percent — heterosexual partners of persons with AIDS or at risk for AIDS;

2 percent — children who acquired AIDS at birth from infected mothers.

1 percent — persons with hemophilia or others who received transfusions of infected blood or blood products (testing of blood supplies for HIV antibodies was initiated in mid-1985 to reduce this risk).

Less than 5 percent of AIDS cases cannot be assigned to these risk groups, but researchers believe that transmission occurred in similar ways. Some patients die before complete histories can be taken; others refuse to be interviewed.

WNY AIDS PROGRAM
250 Delaware Ave.
Suite 812
Buffalo, NY 14202
Hotline: 847-AIDS

4. Why have Haitians been removed from the AIDS risk groups?

Haitians were removed as a distinct risk group for AIDS when it became apparent that cases among Haitians were linked with the same risk behaviors as other cases — sexual contact, sharing needles and transfusion of contaminated blood.

AIDS TRANSMISSION

5. How contagious is AIDS?

Unlike most transmissible diseases — colds, flu, measles, etc. — the AIDS virus is not transmitted through sneezing, coughing, eating or drinking from common utensils, or merely being around an infected person. After years of experience it is evident that casual contact with HIV infected persons does not place others at risk. No cases have been found where AIDS has been transmitted through casual (nonsexual) contact with a household member, relative, co-worker or friend.

6. How is AIDS transmitted?

AIDS is not an easily transmissible disease. All evidence indicates that the AIDS virus (HIV) is spread by exposure to blood or semen. There is no evidence that the virus can be transmitted through air, water, food or casual body contact.

7. Why are homosexual and bisexual males at high risk for AIDS?

Cases of AIDS among homosexual and bisexual males are associated with sexual contact, specifically anal intercourse and other sexual practices which may result in semen-to-blood or blood-to-blood contact. Anyone who engages in such practices is at increased risk for AIDS, whether the person is homosexual or heterosexual.

8. Why are IV drug abusers at increased risk for AIDS?

IV drug abusers often share needles and other equipment for drug injection which can result in small amounts of blood from an infected person being injected into the bloodstream of the next user.

9. Why are hemophiliacs at increased risk for AIDS?

Hemophiliacs receive frequent transfusions of blood plasma concentrates which must be prepared from several hundred to thousands of donations. Cases of AIDS among hemophiliacs have been linked with receipt of blood products from HIV infected donors prior to blood donor screening.

10. How do women get AIDS?

The majority of women with AIDS have a history of IV drug abuse, and presumably contracted the virus through sharing unclean needles or other drug paraphernalia. A growing percentage of women with AIDS have become infected through sexual contact with men who have AIDS or are infected with the AIDS virus.

11. Is AIDS passed by kissing?

HIV has been found in the saliva of some AIDS patients, but there are no cases of AIDS that are known or suspected of being transmitted by kissing. If HIV were transmitted by kissing many family members of persons with AIDS could be expected to have HIV infection. This has not occurred.

12. Why is anal intercourse linked with the transmission of AIDS?

The lining of the rectum is thin and easily torn. Anal intercourse can therefore result in direct semen-to-blood exchange.

13. Can AIDS be transmitted through oral/genital sex?

It has not yet been established whether oral/genital sex transmits the disease, but any activity that may result in semen-to-blood exposure presumably can transmit HIV infection.

14. Can AIDS be transmitted through vaginal intercourse?

A growing number of AIDS cases have been transmitted from infected males to females through vaginal intercourse. There are only a few documented cases of AIDS transmitted sexually from women to men, although the HIV virus has been found in vaginal fluid.

15. Does promiscuous sexual contact increase the risk of AIDS?

Sexual contact with many partners increases the risk of coming into contact with someone who is infected with HIV, as well as other sexually transmitted diseases, including syphilis, gonorrhea and herpes. All men and women are advised to know the sexual history and health status of sexual partners and to avoid anonymous, promiscuous sexual contact.

16. Can female prostitutes spread AIDS?

Prostitutes are likely carriers of HIV virus since they are often IV drug abusers. So far, there are very few cases of female-to-male transmission of the virus, but anyone who engages in sex with an anonymous partner is increasing the risk of contracting AIDS and other sexually transmissible diseases.

17. Can use of a condom during sex reduce the risk of AIDS?

Use of a condom during sex can reduce the risk of AIDS since it minimizes direct contact with semen, a body fluid known to carry the HIV virus in infected persons. Since condoms are not failsafe, people should not rely on them as their only defense against AIDS. All sexually active people are advised to refrain from sexual contact with persons whose history and health status are unknown.

18. Can use of spermicides reduce the risk of AIDS?

Laboratory studies show evidence that the active ingredient in spermicides (nonoxynol-9) inactivates the HIV virus as well as a variety of sexually transmitted diseases. Use of spermicides with condoms may further reduce the risk of disease.

19. Can a person with no symptoms transmit the AIDS virus through sexual contact?

Yes. Most HIV infected people have no symptoms and are not even aware they are infected. Any infected person may transmit the virus to another person through direct blood-to-blood or semen-to-blood contact.

20. How can people reduce their risk of getting AIDS through sexual contact?

All sexually active people — males and females, homosexuals and heterosexuals — are advised to limit the number of sexual partners and to avoid sexual contact with anyone whose past history and health status are unknown. Avoiding anal intercourse or other sexual practices which can result in blood-to-blood or semen-to-blood contact, and the use of condoms with spermicides should also help to decrease the risk.

21. What is the risk of getting AIDS from a blood transfusion?

The risk of contracting AIDS through a blood transfusion has been significantly reduced through screening of all blood donations since early 1985 for antibodies to HIV and removal of blood found antibody positive from the transfusion pool.

22. Is there a danger of contracting AIDS from donating blood?

No. Blood banks and other blood collection centers use sterile equipment and disposable needles. The need for blood is always acute, and people who are not at increased risk for AIDS are urged to continue to donate blood as they have in the past.

23. Can you get AIDS by drinking from the same glass or eating from the same dishes as a person with AIDS?

Years of experience indicate that AIDS is not transmitted in households where people may drink or eat from common dishes or utensils. The AIDS virus does not survive well outside of the body and would be killed by normal washing of dishes and other eating utensils.

24. Can you get AIDS from public toilets, drinking fountains, restaurants, telephones or public transportation?

The AIDS virus is not transmitted through the air, food or water, or by touching any object handled, touched or breathed on by an infected person.

25. Can you get AIDS by touching someone who has it?

After years of experience there is no indication that AIDS is spread through any form of casual contact, including handshakes, bumping together in crowds, contact sports or even casual kissing.

26. Can AIDS be spread by swimming pools?

There are no cases of AIDS suspected of having been transmitted through swimming pools. The virus associated with AIDS would be killed by the chlorine used to disinfect swimming pools.

27. Can you get AIDS from trying on clothes in a department store or handling money?

AIDS is not transmitted through the air or by touching any object used or touched by a person with AIDS.

28. Can you get AIDS from using someone's razor or toothbrush?

There are to date no cases of AIDS linked with sharing razors or toothbrushes. Since direct infusion of infected blood into your bloodstream transmits the HIV virus, it would be prudent to avoid sharing personal instruments that may come into contact with blood through nicks or cuts.

29. Can you get AIDS from dental instruments?

There are no cases of AIDS that have been linked with dental instruments, and the normal sterilization process would kill the HIV virus. Dentists are being advised to take special precautions to guard against cuts which could result in direct blood-to-blood exchange with a patient and potentially increase the risk of AIDS, hepatitis B and other blood transmissible diseases.

30. Can you get AIDS by being in the same house with an AIDS patient?

Multiple studies have shown that casual transmission of the AIDS virus does not occur, even among family members living in the same house.

31. Can you get AIDS from a friend or co-worker?

No. AIDS is not transmitted through casual contact. No cases of AIDS have developed among casual friends or co-workers of AIDS patients. There is no evidence that being around someone with AIDS, even for an extended period of time, puts you at risk for AIDS.

32. What is the risk of living in a neighborhood that has a hospital or home for AIDS patients?

None, since AIDS is not transmitted through the air or through casual contact.

33. Can mosquitos transmit AIDS?

A virus similar to HIV has been found in Africa in some insects, including mosquitos. There is no evidence, however, that mosquitos, other insects or rodents play any role in the transmission of AIDS to humans.

34. Are people at increased risk for AIDS because they live in certain geographic areas (such as San Francisco or New York City)?

People are only at risk for AIDS if they engage in high risk activities — sexual contact involving blood-to-blood or semen-to-blood exchange, or sharing drug injection equipment.

35. Is AIDS spreading in prisons?

A number of prisoners have developed AIDS, but there is no apparent spread of the disease within the prison system. Nearly all prisoners with AIDS had engaged in risk behavior, usually IV drug abuse, prior to entering prison.

36. Are health care workers or other occupational groups at special risk for AIDS?

Safety protocols have been developed for health care workers and other occupational groups that may come into contact with body fluids of AIDS patients in their work. The federal Centers for Disease Control is following over 1,000 health care workers who have experienced blood-to-blood or blood-to-mucous membrane exposure to the body fluids of AIDS patients; many of these workers have had needlestick injuries while treating AIDS patients. Only two workers experiencing punctures have been found to be infected; three others with non-needlestick exposures to blood have become infected. These cases demonstrate the need for health care workers to strictly follow safety guidelines to prevent direct exposure to body fluids in the care of patients.

AIDS INCIDENCE**37. How many cases of AIDS have occurred so far?**

In the U.S., there have been more than 36,000 cases of AIDS reported to the Centers for Disease Control over a six year period, with a steady increase each year since the identification of the disease in 1981. For an update of reported AIDS cases nationally, contact the Centers for Disease Control at (404) 329-3472.

38. What is the geographic distribution of reported AIDS cases?

Thirty percent of the cases in the U.S. are reported from New York State and about 22 percent from California. AIDS cases have been reported from 50 states, the District of Columbia, Puerto Rico and more than 35 other countries.

39. How many New York residents have developed AIDS?

More than 11,000 New Yorkers had been diagnosed with AIDS as of June 8, 1987; 87 percent of these cases have been reported from New York City. For up-to-date information on AIDS cases in New York, call the New York State AIDS Hotline at 1-800-541-AIDS.

40. How many men have developed AIDS?

As of June 8, 1987, a total of 33,500 men have been diagnosed with AIDS in the U.S. Of that number, 30 percent are residents of New York State.

41. How many women have developed AIDS?

As of June 8, 1987, a total of 2,500 women in the U.S. have developed AIDS, 47 percent of whom are residents of New York State.

42. How many children have developed AIDS?

As of June 8, 1987, 511 children have developed AIDS; about 41 percent of these children live in New York.

43. What is the ethnic breakdown of people with AIDS?

Nationally, 61 percent of persons diagnosed with AIDS are white, 24 percent are black, and 14 percent are Hispanic. In New York State, 43.5 percent are white, 31.5 percent are black and 24.1 percent are Hispanic. The over-representation of blacks and Hispanics is primarily due to IV drug abuse.

44. Is the incidence of AIDS increasing in New York State?

The number of AIDS cases is increasing each year in New York. In 1983, an average of 93 cases per month was reported in New York State. In 1984, the monthly average was 164, and rose to 247 in 1985, and 315 in 1986.

45. How many AIDS patients have died?

Nationally, 20,828 adults and 327 children have died from AIDS as of June 8, 1987; about 6,662 New Yorkers have died from the disease.

46. Is the incidence of AIDS increasing among IV drug abusers?

New York State and nearby New Jersey have the highest number of AIDS cases among IV drug abusers in the nation. Approximately 38 percent of all New York State AIDS patients reported IV drug use; some of these persons also reported homosexual or bisexual activity. There has been an increase in the proportion of IV drug related AIDS cases in the last few years, with a gradual decline in the percentage of new cases among homosexual males.

47. Is AIDS occurring only in our country?

AIDS is a worldwide phenomenon. In addition to the United States and Canada, AIDS has been reported in most European countries, African countries, the Caribbean, South America, Australia and several other places including the Middle East and Asia.

48. Do AIDS cases in other countries show the same risk factors as here?

In general, the same risk factors—blood-to-blood or semen-to-blood contact—are associated with AIDS everywhere. The specific groups of people affected by AIDS vary to some extent from country to country. For example, there are fewer drug abusers identified as AIDS victims in Europe, and more females have developed AIDS in Africa. Studies are underway to gain a better understanding of the similarities and differences of AIDS distribution in the U.S. and other countries.

DIAGNOSIS AND TREATMENT

49. Is there a test for AIDS?

There is no test to determine if a person has AIDS or will develop AIDS in the future. A blood test has been developed that can detect antibodies (substances produced in the blood to fight disease organisms) to the virus linked with AIDS. Presence of HIV antibodies in the bloodstream means that a person has been exposed to the virus and presumably is infected. A positive test does not mean the person will develop symptoms.

50. How many people have been infected with the HIV virus linked with AIDS?

Based on initial testing it is estimated that about one in every 3,500 persons may have been exposed to the HIV virus. Among high risk groups (sexually active homosexual and bisexual males and IV drug abusers) the rate of HIV infection may be as high as one in three. This does not mean that all of these people will eventually develop AIDS.

51. What are the symptoms of HIV infection?

Some people infected with the HIV virus have no symptoms at all, and may be unaware they carry the virus and can transmit it to others through sexual contact. Other people may develop mild, temporary symptoms which disappear after a few days or weeks following exposure. Some patients have persistent swollen lymph nodes without any other symptoms. Only about 20 percent of those infected by the virus have so far developed the severe and fatal form of disease which is called AIDS. Symptoms of HIV infection may include:

- extreme tiredness, sometimes combined with headache, dizziness or lightheadedness;
- swollen glands in the neck, armpits or groin;
- continued fever or night sweats;
- weight loss of more than 10 pounds which is not due to dieting or increased physical activity;
- purple or discolored growths on the skin or the mucous membranes (inside the mouth, anus or nasal passages);
- heavy, continual dry cough that is not from smoking or that has lasted too long to be a cold or flu;
- continuing bouts of diarrhea;
- thrush, a thick whitish coating on the tongue or in the throat which may be accompanied by sore throat;
- unexplained bleeding from any body opening or from growths on the skin or mucous membranes;
- bruising more easily than usual;
- progressive shortness of breath;
- forgetfulness, confusion, disorientation and other signs of mental deterioration.

52. What is ARC?

AIDS-Related Complex (ARC) is a name some doctors and scientists use to describe symptoms associated with HIV infection which do not fit the Centers for Disease Control definition for AIDS. Some individuals with ARC may die of their infection without ever developing full-blown AIDS. It is projected that, among HIV infected people, ARC is three to five times more common than AIDS.

53. What is the incubation period for AIDS?

The onset of symptoms following infection with the HIV virus appears to range from a few weeks to many years. Antibodies to the virus are usually present, and detectable in the bloodstream, within a few weeks of exposure.

54. What are some of the diseases affecting AIDS patients?

About 85 percent of the AIDS patients studied have had one or both of two rare diseases: pneumocystis carinii pneumonia (PCP), a parasitic infection of the lungs which has symptoms similar to other forms of pneumonia; and/or a rare type of cancer known as Kaposi's sarcoma (KS) which usually occurs anywhere on the surface of the skin or in the mouth. In early stages, it may look like a bruise or blue-violet or brownish spot. About 30 percent of AIDS patients show symptoms of brain disease or severe damage to the spinal cord. AIDS patients also may develop unusually severe infections with yeast, cytomegalovirus, herpes virus and parasites such as toxoplasma or cryptosporidia; milder infections with these organisms do not suggest immune deficiency.

55. How is AIDS treated?

A variety of anti-viral drugs are being tried that show some promise of killing or inhibiting the activity of HIV inside the body. No drugs are yet available to cure AIDS. Most treatment is directed at the specific infections or cancers that attack HIV infected patients. Financial assistance is available to help medically eligible persons obtain federally approved drugs for the treatment of AIDS. For information about the AIDS Drug Assistance Program (ADAP), call 1-800-542-AIDS.

56. What percent of people have died from AIDS?

Approximately 58 percent of all persons diagnosed with AIDS have died. The death rate increases to more than 70 percent two years after diagnosis.

57. Does anybody ever survive AIDS?

Some people with AIDS are still alive six to seven years after diagnosis. Since there is no current treatment to reverse the damage to the immune system, we don't know how long AIDS patients can live.

58. Is there a vaccine to prevent AIDS?

There is currently no vaccine to protect a person from the HIV virus or AIDS. Researchers in the U.S. and other countries are working diligently to develop a vaccine. Scientists report that this may be difficult because the virus can alter its form in the human body.

59. What is the government doing to find a cure or treatment for AIDS?

New York State was the first state to appropriate tax dollars for AIDS research. So far, nearly \$15 million in State funds have been provided to support AIDS research in New York State. The federal Department of Health and Human Services has provided nearly \$440 million to fund research projects to find preventative and/or treatment methods for AIDS and/or the opportunistic infections associated with the disease.

AIDS IN CHILDREN

60. How many children have AIDS?

Approximately 500 U.S. children have been reported as having AIDS as of June 8, 1987. Most of these children have mothers involved in IV drug abuse.

61. How do children get AIDS?

The majority of infected children acquired the AIDS virus from their infected mothers, presumably through blood exchange in the uterus or during birth. A few children became infected from blood transfusions prior to screening of the blood supplies.

62. How can children be protected from AIDS?

All high risk women of childbearing age should learn if they have been exposed to the HIV virus, and should consider postponing pregnancy if they are positive. Women are considered high risk if they have ever engaged in IV drug abuse or if they have ever had sexual contact with an IV drug abuser, bisexual man or hemophiliac.

63. What is the risk of an infected mother passing the HIV virus to her baby?

Limited studies indicate that as many as 50 percent of infected mothers pass the virus to their babies. An infected mother can transmit the virus even if she herself has no symptoms of AIDS or ARC.

64. Can children develop AIDS from mother's milk?

HIV antibodies have been detected in breast milk. There is one case of AIDS in Australia which may have been transmitted to an infant through mother's milk. So far, there are no cases of AIDS in the U.S. specifically linked with breastfeeding, but any woman who is positive for HIV antibodies is advised to refrain from nursing as a precautionary measure.

65. If a child has AIDS, can he/she pass it on to another child?

None of the identified cases of AIDS in the United States is known or suspected to have been transmitted from one child to another in the home, school, day care or foster care setting. Even baby twins, one infected and one not, sharing nipples, toys, food, bed and playpen have not passed the virus between them.

66. What risk does mixing with other children pose to a child with AIDS?

A child whose immune system is damaged by HIV is highly susceptible to infections from other children in a school or day care setting. Assessment of risk from attending school to an immunosuppressed child is best made by the child's physician who is aware of the child's immune status.

67. What precautions or guidelines should be introduced in schools to prevent exposure to blood or other bodily fluids from a child with AIDS?

All schools and day care centers, regardless of whether children with AIDS are attending, should adopt routine safety procedures for handling blood or body fluids. Soiled surfaces should be promptly cleaned with a disinfectant, such as household bleach (diluted one part bleach to 10 parts water). Disposable towels or tissues should be used whenever possible, and mops should be rinsed in the disinfectant. Those who are cleaning should avoid exposure of open skin lesions or mucous membranes to blood or body fluids.

68. Is there a danger in having teachers, cooks or other school personnel infected with AIDS?

No. AIDS is not spread through air, food, water or any form of casual contact. There are no cases of AIDS reported anywhere that are known or suspected of being transmitted through food preparation, use of common toilets or drinking fountains or merely having long term casual contact with a person with AIDS. Therefore, teachers, cooks or other school personnel with AIDS or HIV infection would not represent a risk to students or other school personnel.

69. Should there be HIV antibody testing for school children or school personnel?

Screening of school children or teachers for HIV antibodies will not provide useful information upon which to base a public health policy, since those who are positive do not pose a risk to others in a school setting.

70. If a child is bitten by another child with AIDS, what is the possibility of transmission?

While HIV has been identified in saliva, there are no cases of AIDS known or suspected of having been transmitted through a bite. Transmission of the virus appears to require direct blood-to-blood or semen-to-blood contact.

71. Suppose my child became a regular playmate of a child with AIDS?

Casual contact, even over a long period of time, is not regarded as dangerous. In household studies, no child in the family of an AIDS victim has been known to contract the disease through day-to-day activities or contact.

72. What if my child is in a classroom with an AIDS patient who vomited or had diarrhea?

Care should be taken to minimize direct exposure to bodily secretions or excretions from any ill person. Persons cleaning up such secretions are advised to wear gloves and to use a solution of household bleach and water (diluted one part bleach to 10 parts water) as a disinfectant. While these precautions are recommended, it should be noted that no cases of AIDS have ever been linked with exposure to urine, saliva, vomit or feces. The secretions linked with AIDS transmission are blood and semen, which must enter the bloodstream of another person to transmit infection.

73. Since AIDS is transmitted through blood contact, could a child get AIDS through a schoolyard fight or during a contact sport like football?

The external contact with blood that might occur in a sports injury is very different from direct injection of blood into the bloodstream which occurs in a blood transfusion or in drug abuse needle sharing.

74. What is the State's recommendation on children with AIDS attending schools?

New York State has issued a recommendation to school districts that each case be evaluated on an individual basis. Decisions regarding the type of educational setting for children with AIDS or ARC should be based on the behavior, neurologic development and physical condition of the child. These evaluations should be made on an anonymous basis to protect the child against potential discrimination. The appropriate decision makers would include the child's parent or guardian, physician, public health personnel and school officials.

PREVENTING THE SPREAD OF AIDS

75. What is being done to prevent the spread of AIDS?

a. Education: Since there is still no cure or vaccine for AIDS, education is the most effective prevention. Educational campaigns are directed to the general public and those in risk groups for AIDS, encouraging them to discontinue any practices that have been linked with the possible spread of AIDS.

All sexually active males and females are advised to refrain from anonymous sexual contact with persons whose past history and current status is unknown, and to avoid anal intercourse or other sexual practices which can result in blood-to-blood or semen-to-blood exchange. Use of condoms can reduce direct exposure to body fluids, and reduce the risk of HIV infection and other sexually transmitted diseases.

Male homosexuals and bisexuals who have had sexual contact with a number of partners are being advised to assume they have been exposed to the HIV virus and to refrain from sexual contact involving the exchange of body fluids. Use of condoms is strongly recommended to prevent contact with body fluids during any form of sexual contact.

Drug abusers are being urged not to share needles or other drug injection equipment and to enter drug treatment programs to become drug free. IV drug abusers also should assume they are infected and use condoms to prevent spreading the virus to others through sexual contact.

High-risk women who are engaging in IV drug abuse or who are sexual partners of IV drug abusers are being advised that if they are infected and become pregnant they can pass the virus to their children. The State Health Department has recommended that all high risk women of child bearing age obtain voluntary, confidential HIV antibody testing to determine their health status prior to becoming pregnant.

b. Safety protocols: Occupational groups that may come into contact with AIDS patients are being instructed in safety precautions to prevent direct contact with blood and body fluids. Safety guidelines have been developed for health care workers, dentists, laboratory personnel, ambulance personnel, funeral directors, prison personnel and others.

c. Screening of blood: All blood collected in the U.S. is now being tested for antibodies to HIV. Blood that tests positive is eliminated from the transfusion pool. Persons in high risk groups are being advised to refrain from donating blood. Sperm banks and organ banks have been advised by the Centers for Disease Control to test potential donors for HIV antibody and to not accept sperm or organ donations from individuals who are antibody positive.

d. Anonymous, free HIV antibody testing is provided by New York State for persons who wish to determine if they have been exposed to the virus linked with AIDS. Such testing is recommended for individuals in high risk groups so that they may learn if they have been exposed to the AIDS virus, and be counselled in behavior modifications to reduce further personal exposure and potential transmission to others.

76. How successful have educational efforts been in encouraging high risk persons to alter behaviors which can spread AIDS?

There has been a change in sexual practices among many male homosexuals, which is verified through a significant reduction in the incidence of rectal gonorrhea. Surveys of 500 homosexual and bisexual men conducted in San Francisco show that 81 percent of those polled were now in monogamous relationships or were remaining celibate. Moreover, only 36 percent of those surveyed reported that they had had recent sexual contact with more than one partner. We have had less success in encouraging IV drug abusers to stop sharing needles, although surveys indicate that a significant proportion of drug abusers is aware of the risk of AIDS. Efforts are continuing to develop educational materials and outreach programs targeted toward this group.

77. What safety protocols have been developed for occupational groups?

All occupational groups that may come into direct contact with blood or semen in the course of their work are advised to take special precautions to guard against AIDS, hepatitis B and other infectious agents. These include:

- wash hands following any contact with patient secretions;
- take special care in handling and disposing of used needles;
- guard against needle sticks, cuts and other injuries;
- notify supervisors of any direct exposure to blood, semen or other body fluids;
- wear protective clothing (gloves, gowns and/or goggles) if direct exposure to blood or body fluids is likely.

78. How is the risk of spreading AIDS through blood transfusions being minimized?

All blood donated in the U.S. has been tested for antibodies to the HIV virus since May 15, 1985. Blood that tests positive is removed from the transfusion pool. The process involves use of an ELISA (enzyme-linked immunosorbent assay) screening test, with confirmation of positive results through a more specific antibody test known as the Western Blot.

79. How effective is the new blood screening test?

All studies indicate that the HIV antibody test is highly effective in eliminating blood from the donor pool that may be infected with HIV. In fact, the test errs on the side of "false-positive" readings, since only about 10 percent of blood that tests positive on the initial ELISA test is confirmed positive through a more specific Western Blot test. All blood that tests positive by the initial screening test is removed from the transfusion pool.

80. Are sperm banks and organ banks screening for AIDS?

The Centers for Disease Control has recommended that sperm and organ banks screen all donations for antibodies to HIV virus.

81. Is New York State offering HIV antibody testing?

Yes. A number of regional HIV antibody test sites have been established by the State Health Department to provide testing and counseling for persons who wish to know if they have been exposed to the virus. Testing is free of charge at these sites, and anonymity is maintained through use of a code system. Persons seeking the HIV antibody test need not give a name, address or any other potentially identifying information. Private physicians also can arrange for their patients to obtain testing. For information on HIV testing call the statewide toll-free hotline (1-800-541-AIDS) or the closest HIV test site listed on the back cover of this booklet.

82. Why doesn't New York State mandate testing of all persons for antibodies to HIV?

The State does not support mandated HIV antibody testing of any groups or individuals since the information is not useful in developing public health policies, but could be used to discriminate against individuals or groups.

83. Why doesn't New York State isolate or quarantine persons with AIDS to prevent the spread of the disease?

Persons with AIDS or those with positive antibodies to HIV do not pose a risk to the public through casual contact. New York State takes the strong position that the civil rights of any individual or group should not be abridged by society without sufficient scientific evidence that it is necessary. All information accumulated during the past six years indicates that AIDS is spread only through direct blood-to-blood or semen-to-blood exchange, and not through the air, food or casual contact with persons who have AIDS or articles they have handled or used.

84. What is New York State doing to halt the spread of AIDS among IV drug users?

New York State has expanded drug addiction treatment services, and also is conducting AIDS prevention counseling through a variety of clinic sites serving individuals who may be at high risk for AIDS as a result of drug use. Ex-addict counselors in mobile vans go daily into high drug use neighborhoods in New York City to conduct education activities and refer drug abusers for voluntary HIV antibody testing.

85. Why doesn't New York State legalize the sale of hypodermic needles or dispense clean needles to drug addicts to prevent spread through that route?

The State is currently studying this issue to assess whether legalizing the sale of needles or dispensing clean needles will in fact reduce the risk of AIDS without increasing drug abuse. A current survey by the State Division of Substance Abuse Services indicates that 93 percent of IV drug abusers are aware of the dangers from IV use and is initiating efforts to obtain clean needles within the illegal trade. The most difficult problem continues to be the multiple use or sharing of needles in group settings.

86. What is New York State doing to get accurate information to the public about AIDS?

The State Health Department's AIDS Institute maintains a toll-free hotline (1-800-541-AIDS) that provides up-to-date information about AIDS. The State also funds AIDS hotlines and educational activities conducted by eight regional AIDS task forces. TV and radio public service announcements encourage New Yorkers to call for accurate information. Pamphlets and brochures directed to the general public and to various risk groups have been developed and are being distributed through regional task forces, county health departments and various State agencies. Educational forums are provided for occupational and community groups that have concerns related to AIDS.

CARE FOR AIDS PATIENTS

87. What services are available to persons with AIDS or at risk for the disease?

The New York State Health Department's AIDS Institute has allocated nearly \$25 million in State and federal grants to provide direct services related to AIDS and to fund regional task forces and other community service organizations that provide educational and outreach services associated with AIDS. Services include:

- informational hotlines;
- educational materials and forums;
- free HIV testing and counseling;
- counseling for AIDS patients, their families and those at risk for AIDS;
- assistance in locating medical, dental and other health services;
- transportation to medical care;
- assistance with insurance coverage, housing, civil rights issues.

88. Where can persons concerned about AIDS get HIV antibody testing?

Anonymous antibody testing is provided through the Department of Health's regional offices and some county health clinics for persons who wish to know if they have been exposed to the virus. The test is free and no names or addresses are exchanged. Persons receive counseling about what the test results mean and preventive actions they should take to minimize further exposure to the virus or potential transmission to others. For information on the test, call 1-800-541-AIDS or the nearest HIV hotline listed on the back cover of this booklet.

89. Where can AIDS patients get diagnosis and care?

Persons who are concerned about AIDS may contact the State-supported regional AIDS hotlines (see telephone numbers on back cover) for the names of doctors who are familiar with the diagnosis and management of AIDS. Referrals are also provided for AIDS patients seeking dental care, psychiatric counseling, transportation to medical facilities and social services.

90. Where are AIDS patients treated?

AIDS patients are treated in hospitals, physician's offices, clinics or other health care settings, just like any other patients. AIDS patients do not pose a risk to other patients or to health care workers who follow recommended safety precautions.

91. What is New York State doing to ensure that AIDS patients receive nondiscriminatory, humane care?

The State Health Department has developed safety protocols for health care workers, and also assists hospitals and other medical facilities in developing in-service training programs for staff. The Health Department promptly investigates any complaints related to patient care at health care facilities, and will take enforcement action against any institution that discriminates against AIDS patients or does not provide appropriate, humane care.

92. Why doesn't New York State designate special hospitals and nursing homes to care for AIDS patients to ensure they receive appropriate care?

The State has taken a major new initiative to ensure that AIDS patients receive the necessary medical, social and psychological support services. The State Health Department has designated a number of AIDS Care Centers which are responsible for managing the total care package for a person with AIDS. Services include inpatient and outpatient care, nursing home care, home health care, dentistry, psychological and social counseling and if need be, housing.

93. Who pays for treatment of AIDS patients?

Care for AIDS patients is paid for by the same means as all medical care: the government (Medicaid and Medicare), insurance companies and individuals. Most insurance policies cover AIDS medical treatment, although most have maximum allowances. The cost of care for an AIDS patient can range from \$50,000 to \$100,000.

HUMAN RIGHTS ISSUES

94. What rights do AIDS patients have?

They have the same rights as those accorded to any other ill member of our society. Unfortunately, discriminatory action has been taken against some AIDS patients by employers, landlords, neighbors, co-workers and others who are apparently acting out of unwarranted fears based on misinformation.

95. Is it right to keep an AIDS patient's identity a secret?

Since AIDS does not pose a risk to the general public there is no need for neighbors, shopkeepers, co-workers or others who may have casual contact with a person with AIDS to know. Discriminatory action has been taken against persons with AIDS by those who are misinformed about the disease.

96. Can you be fired because you have AIDS?

Some employers are reportedly discriminating against AIDS patients in spite of continued advice from public health officials that there is no reason to exclude AIDS patients from employment as long as they feel well enough to work. Persons who believe they are being discriminated against by employers may file complaints with the State Division for Human Rights at (212) 870-8400.

97. Can insurance companies deny coverage to persons who test positive for antibodies to HIV?

New York State regulations prohibit use of the HIV antibody test for underwriting of hospital/medical insurance. Insurance companies are not prohibited from requiring the test for persons seeking life insurance policies.

98. Should people who have AIDS be banned from working in banks, restaurants, barber shops and other people-contact jobs?

There have been no cases of AIDS that are suspected of having been transmitted through casual contact or through the air, food or water. If a person with AIDS is well enough to work, he/she should be allowed to do so.

99. Can a hospital worker or ambulance personnel refuse to care for an AIDS patient?

Health care workers who refuse to care for AIDS patients may be subject to firing and possible disciplinary action by the State. Hospitals and ambulance services have a responsibility to care for the sick, and to assemble a staff capable of carrying out that mission. There is a need for greater educational efforts to ensure that all health care workers understand the potential routes for transmission of AIDS and follow recommended safety precautions.

100. Can funeral directors refuse to embalm victims of AIDS?

A court has held that funeral homes are public accommodations under New York City Human Rights Law and, therefore, may not discriminate against persons based on a disability, including AIDS and HIV infection.

HOW TO REDUCE THE RISK OF AIDS

Experience with AIDS indicates that the disease is not transmitted from one person to another through any form of casual, nonintimate contact. There is very strong evidence that AIDS is transmitted through direct blood-to-blood or semen-to-blood exchange. Direct contact with other body fluids of an infected person also may increase the risk of AIDS, although no cases so far have been directly linked with other body secretions or excretions.

Based on this information, there are precautions that can be taken by the general public and by persons in special risk groups to eliminate or reduce the risk of contracting or spreading AIDS:

- **Don't have sexual contact with any person whose past history and current health status is not known.**
- **Don't have sexual contact with multiple partners or with persons who have had multiple partners.**
- **Don't have sexual contact with persons known or suspected of having AIDS.**
- **Don't abuse intravenous (IV) drugs.**
- **Don't share needles, syringes or works.**
- **Clean drug injection needles and works by boiling in water for at least 15 minutes, or by soaking in rubbing alcohol for at least 10 minutes. Rinse in running water.**
- **Don't have sexual contact with persons who abuse IV drugs.**
- **Use of a condom during sexual intercourse may decrease the risk of AIDS.**
- **Don't share toothbrushes, razors or other personal implements that could become contaminated with blood.**
- **Health workers, laboratory personnel, funeral directors and others whose work may involve contact with body fluids should strictly follow recommended safety procedures to minimize exposure to AIDS, hepatitis B and other diseases.**
- **Persons who are at increased risk for AIDS or who have positive HIV antibody test results should not donate blood, plasma, body organs, sperm or other tissue.**
- **Persons with positive HIV antibody test results should have regular medical checkups, and take special precautions against exchanging body fluids during sexual activity.**
- **Women who have positive HIV antibody test results should recognize that if they become pregnant their children are at increased risk for AIDS.**

Where to get help:

For general information: **1-800-541-AIDS** TOLL FREE

For counseling and assistance:

Children and Youth AIDS Hotline

(212) 430-3333

NYC AIDS Hotline

(718) 485-8111

AIDS Council of Northeastern N.Y.

(518) 445-AIDS

Western N.Y. AIDS Program, Inc.

(716) 847-AIDS

Long Island Association for

AIDS Care, Inc.

(516) 385-AIDS

Mid-Hudson Valley AIDS

Task Force

(914) 993-0607

AIDS Center of Queens County

(718) 575-8855

Bronx AIDS Community

Service Project

(212) 665-4906

Brooklyn AIDS Community

Service Program

(718) 834-5360

AIDS Rochester, Inc.

(716) 232-4430

Central N.Y. AIDS Task Force

(315) 475-AIDS

Southern Tier AIDS Program

(607) 723-6520

Gay Men's Health Crisis

(212) 807-6655

Hemophilia Foundation

(212) 682-5510

HIV counseling and testing programs:

Albany

(518) 457-7152

Buffalo

(716) 847-4520

Nassau

(516) 535-2004

New Rochelle

(914) 632-4133

Rochester

(716) 423-8081

Suffolk

(516) 348-2999

Syracuse

(315) 428-4736

Bronx

(212) 716-3350

Brooklyn

(718) 797-9110

Queens

(718) 262-9100

Harlem

(212) 694-0884

Evenings and weekends

1-800-872-2777