

SENSITISATION ON HIV/AIDS

ORGANISED BY

AASHAA BORA FOUNDATION



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On 7th August, 2015 a programme, Sensitisation on HIV/AIDS was organised in Aashaa Bora Foundation Office, Khanapara. The object of this programme was to create awareness among the people regarding HIV/AIDS.

Aashaa Bora Foundation was established in 1991-1992 and registered under the Societies Registration Act, XXI of 1860. Aashaa Bora Foundation is a non-profitable, non-governmental and non-political entity based in Guwahati, Assam (India). Aashaa Bora Foundation was founded by a women entrepreneur and social worker Dr.Aashaa Bora, working in the areas of skill development, livelihood generation, health care, children's rights and women's empowerment. The aim of the foundation is to generate awareness among various communities through a system of dissemination, wherein organizations and individuals are given access to information of new technological initiatives and production enterprise.

In this programme Mr. Rajib Sarma, Assistant Director of Assam State Aids Control Society (ASICS) was invited as a resource person and also invited some persons from North East Development Society and SSB (Sashastra Seema Bal). Dr. Aashaa Bora welcome the gathering and high lightening on HIV/AIDS. The speech was delivered by Aashaa Bora about HIV/AIDS. Mr. Rajib Sarma gave presentation on HIV/AIDS.



He also gave some brief description about its causes, symptoms, prevention, history and how it originated and also about its treatment.

The main causes of HIV/AIDS are:

1. Sexual transmission: - It can be happen when there is contact with infected sexual secretions (rectal, genital or oral mucous membranes).This can happen while having

unprotected sex, including vaginal, oral and anal sex or sharing sex toys with someone infected with HIV.

2. Perinatal transmission: - The mother can pass the infection on to her child during childbirth, pregnancy, and also through breastfeeding.

3. Blood transmission: - The risk of transmitting HIV is through blood transfusion.



Symptoms of an HIV infected person are:

1. Fever
2. Chills
3. Joint pain
4. Muscle ache
5. Sore throat
6. Sweats(particularly at night)
7. Enlarged glands
8. A red rash
9. Tiredness
10. Weakness
11. Weight loss

Asymptomatic HIV infection



experience no symptoms, feel well and appear healthy.

In many cases, after the initial symptoms disappear, there will not be any further symptoms for many years. During this time, the virus carries on developing and damages the immune system. This process can take up to 10 years. The infected person will

Late-stage HIV infection

If left untreated, HIV weakens the ability to fight infection. The person becomes vulnerable to serious illnesses. This stage of infection is known as AIDS.

Signs and symptoms of late-stage HIV infection may include:

- blurred vision
- diarrhea, which is usually persistent or chronic
- dry cough
- fever of above 37C (100F) lasting for weeks
- night sweats
- permanent tiredness
- shortness of breath
- swollen glands lasting for weeks
- weight loss
- white spots on the tongue or mouth

Prevention of HIV methods are:

- 1) Preventing the sexual transmission of HIV
 - Condom use (including female condoms)
 - Safer sex education
 - Treating sexually transmitted infections
 - Male circumcision
- 2) Preventing HIV transmission through blood
 - Screening blood products
 - Reducing needle sharing
 - Stopping needlestick accidents
- 3) Preventing mother –to- child transmission
 - Testing the mother for HIV at their first antenatal appointment, during their third trimester and after delivery of their baby.

- Treatment should be offered if the mother tests positive.
- The baby should be tested when it is born and also offered treatment if positive.

Origin and History of HIV/AIDS:



Scientists identified a type of chimpanzee in West Africa as the source of HIV infection in humans. They believe that the chimpanzee version of the immunodeficiency virus (called simian immunodeficiency virus or SIV) most likely was transmitted to

humans and mutated into HIV when humans hunted these chimpanzees for meat and came into contact with their infected blood. Over decades, the virus slowly spread across Africa and later into other parts of the world.

The earliest known case of infection with HIV-1 in a human was detected in a blood sample collected in 1959 from a man in Kinshasa, Democratic Republic of the Congo. (How he became infected is not known.) Genetic analysis of this blood sample suggested that HIV-1 may have stemmed from a single virus in the late 1940s or early 1950s.

We know that the virus has existed in the United States since at least the mid- to late 1970s. From 1979–1981 rare types of pneumonia, cancer, and other illnesses were being reported by doctors in Los Angeles and New York among a number of male patients who had sex with other men. These were conditions not usually found in people with healthy immune systems.

In 1982 public health officials began to use the term "acquired immunodeficiency syndrome," or AIDS, to describe the occurrences of opportunistic infections, Kaposi's sarcoma (a kind of cancer), and *Pneumocystis jirovecii* pneumonia in previously healthy people. Formal tracking (surveillance) of AIDS cases began that year in the United States.

In 1983, scientists discovered the virus that causes AIDS. The virus was at first named HTLV-III/LAV (human T-cell lymphotropic virus-type III/lymphadenopathy-associated

virus) by an international scientific committee. This name was later changed to HIV (human immunodeficiency virus).

For many years scientists theorized as to the origins of HIV and how it appeared in the human population, most believing that HIV originated in other primates. Then in 1999, an international team of researchers reported that they had discovered the origins of HIV-1, the predominant strain of HIV in the developed world. A subspecies of chimpanzees native to west equatorial Africa had been identified as the original source of the virus. The researchers believe that HIV-1 was introduced into the human population when hunters became exposed to infected blood.

Treatment of HIV/AIDS:

Currently, there is no vaccine or cure for HIV/AIDS. But treatments have evolved which are much more efficacious - they can improve patients' general health and quality of life considerably.



1) **Emergency HIV pills:** If an individual believes they have been exposed to the virus within the last 72 hours (three days), anti-HIV medication, called PEP (post-exposure prophylaxis) may stop infection. The treatment should be taken as soon as possible after contact with the virus.

PEP is a very demanding treatment lasting four weeks. It is also associated with unpleasant side effects (diarrhoea, malaise, nausea, weakness and fatigue).

After a positive HIV diagnosis, regular blood tests are necessary to monitor the progress of the virus before starting treatment. The therapy is designed to reduce the level of HIV in the blood.

2) **Antiretroviral drugs:** HIV is treated with antiretrovirals (ARVs). The treatment fights the HIV infection and slows down the spread of the virus in the body. Generally, patients take a combination of medications called HAART (highly active antiretroviral therapy).

The combination of drugs is adapted to each individual. HIV treatment is usually permanent and lifelong. HIV treatment is based on routine dosage. Pills must be taken on a regular schedule, every time. Common side effects include nausea, fatigue, diarrhoea, skin rashes, moodiness, alterations to the adipose (fat) tissue, birth defects.

Antifungal cream Ciclopirox eradicates HIV - researchers at the Rutgers New Jersey Medical School reported in the journal *PLoS ONE* that Ciclopirox, a widely used antifungal cream, as well as Deferiprone, a medication used to remove excess iron from the body, eradicate HIV in cultured cells. They added that when treatment stops, the virus does not return.

3) **Complementary or alternative medicine:** Although widely used, alternative/complementary medications, such as herbal ones, have not been proven to be effective or ineffective. According to some limited studies, mineral or vitamin supplements may provide some benefits. Patients are urged to discuss these options with their doctors.



In this way Mr. Rajib Sarma, the Resource Person had interacted with people by answering their queries on HIV/AIDS. The programme was ended with a vote of thanks from Ms Ipshita Hazarika, Co-ordinator of Aashaa Bora Foundation. Before closing the

seminar, Mr. Rajib Sarma was felicitated by Aashaa Bora.

CONCLUSION:

The main motive of the programme on sensitisation of HIV/AIDS was to make people aware on HIV/AIDS. We got so much information from resource person (Mr. Rajib Sarma) on HIV/AIDS about its causes, symptoms, prevention, and history and how it originated and also about its treatment. Those who attended were highly benefitted by the interaction.

When it comes to AIDS treatment, information is power. The more you know, the better you can manage your health over the long term. As you learn this stuff, there will probably be times when you feel overwhelmed. When that happens, sit down and take a deep breath. Relax. And remember you are not alone.

