

RC
607
A26
F33
1987

ICFA Information
Resource Center

Spring 1987

RC
607
A26
F33
1987



GMS Library
02-07-13
7500 Security Blvd.
Baltimore, MD 21244

FACTS ABOUT AIDS

The Acquired Immune Deficiency Syndrome, or AIDS, was first reported in the United States in mid-1981. Since that time, the Public Health Service has received reports of more than 33,000 cases, about 58 percent of which have resulted in death. An estimated 1½ million people have been infected by the virus that causes AIDS, but have no symptoms of illness.

AIDS is a public health problem that merits serious concern. It is a major priority of the U.S. Public Health Service. Researchers in the Public Health Service and in many major medical institutions have been working for six years to study AIDS and develop treatments and preventive measures.

This fact sheet describes, in question-and-answer form, accurate information about AIDS, the risk of contracting AIDS, the actions individuals can take to reduce spreading AIDS, and current research and related activities under way in the Public Health Service.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
Centers for Disease Control



FACTS ABOUT AIDS

What is AIDS?

AIDS is characterized by a defect in natural immunity against disease. People who have AIDS are vulnerable to serious illnesses which would not be a threat to anyone whose immune system was functioning normally. These illnesses are referred to as "opportunistic" infections or diseases.

What causes AIDS?

AIDS is caused by a virus that infects certain cells of the immune system, and can also directly infect the brain. This virus has been given different names by different groups of investigators: human T-lymphotropic virus, type III (HTLV-III); lymphadenopathy-associated virus (LAV); or AIDS-related retrovirus (ARV). An international committee of scientists has proposed the name, human immunodeficiency virus (HIV), for this virus. Infection with this virus may not always lead to AIDS. Many infected persons remain in good health. Others develop illness varying in severity from mild to extremely serious; these illnesses are designated AIDS-related complex (ARC).

How is AIDS transmitted?

The AIDS virus is spread by sexual contact, needle sharing, or less commonly, through transfused blood or its components. The virus may be transmitted also from infected mother to infant during pregnancy or birth, or shortly after birth (probably through breast milk). The risk of infection with the virus is increased by having multiple sexual partners, either homosexual or heterosexual, and sharing of needles among those using illicit drugs. The occurrence of the syndrome in hemophilia patients and persons receiving transfusions provides evidence of transmission of the virus through blood.

Who gets AIDS?

Ninety-eight percent of the AIDS cases have occurred in the following groups of people:

- Sexually active homosexual men and bisexual men (or any man who has had sex with another man since 1977), 65 percent;
- Present or past abusers of intravenous drugs, 17 percent;
- Homosexual and bisexual men who are also IV drug abusers, 8 percent;
- Persons with hemophilia or other coagulation disorders, 1 percent;
- Persons who have had transfusions with blood or blood products, 2 percent.
- Heterosexual contacts of someone with AIDS or at risk for AIDS, 4 percent;
- Infants born to infected mothers, 1 percent.

Some 2% of patients do not fall into any of these groups, but researchers believe that transmission occurred in similar ways. For example, some patients died before complete histories could be taken.

What are its symptoms?

Most individuals infected with the AIDS virus have no symptoms and feel well. Some develop symptoms which may include tiredness, fever, loss of appetite and weight, diarrhea, night sweats, and swollen glands (lymph nodes) — usually in the neck, armpits, or groin. Anyone with these symptoms which continue for more than two weeks should see a doctor.

How long after infection with HTLV-III does a person develop AIDS?

The time between infection with the HTLV-III virus and the onset of symptoms (the incubation period) seems to range from about 6 months to 5 years or more. Infection with the virus may not always lead to AIDS. Symptoms of illness appear in approximately 30% of individuals within 5 years of infection.

How is AIDS diagnosed?

The diagnosis of AIDS depends on the presence of opportunistic diseases that indicate the loss of immunity. Certain tests which demonstrate damage to various parts of the immune system, such as specific types of

white blood cells, support the diagnosis. The presence of opportunistic diseases plus a positive test for antibodies to HTLV-III can also make possible a diagnosis of AIDS.

What is the geographic distribution of reported AIDS cases ?

Thirty-one 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 all 50 states, the District of Columbia, Puerto Rico, and more than 70 other countries.

How contagious is AIDS?

Casual contact with AIDS patients or infected persons does *not* place others at risk for getting the illness. No cases have been found where the virus has been transmitted by casual household contact with AIDS patients or infected persons. Infants with AIDS or HTLV-III infection have not transmitted the infection to family members living in the same household.

Emergency medical personnel, police, and firefighters who have assisted AIDS patients have not become ill. Nurses, doctors, and health care personnel have not developed AIDS from caring for AIDS patients. Two health care workers in the U.S. have developed antibodies to HTLV-III following needlestick injuries.

Health care and laboratory workers should follow standard safety procedures carefully when handling any blood and tissue samples from patients with potentially transmissible diseases, including AIDS. Special care should be taken to avoid needlestick injuries.

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 great and people who are not at increased risk for getting AIDS are urged to continue to donate blood as they have in the past.

Is there a laboratory test for AIDS?

As with most other diseases, there is no single test for diagnosing AIDS. There is now a test for detecting antibodies (substances produced in the blood to fight disease organisms) to the virus that causes AIDS. Presence of HTLV-III antibodies means that a person has been infected with that virus; it does not tell whether the person is still infected. The antibody test is used to screen donated blood and plasma and assist in preventing cases of AIDS resulting from blood transfusions or use of blood products, such as Factor VIII, needed by patients with hemophilia. For people who think they may be infected and want to know their health status, the test is available through private physicians, most State or local health departments and at other sites. Anyone who tests positive should be considered potentially capable of spreading the virus to others.

What are some of the diseases affecting AIDS patients?

About 78 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; and a type of cancer known as Kaposi's sarcoma (KS). KS 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. The spot or spots persist, and may grow larger. KS may spread to, or appear in, other organs of the body. PCP has symptoms similar to any other form of severe pneumonia, especially cough, fever, and difficulty in breathing. Other opportunistic infections include unusually severe infections with yeast, cytomegalovirus, herpesvirus, and parasites such as *Toxoplasma* or *Cryptosporidia*. Milder infections with these organisms do not suggest immune deficiency.

Is there danger of a child's contracting AIDS from friends or schoolmates ?

No. AIDS is difficult to catch, even among people at highest risk for the disease. The risk of transmitting AIDS from daily contact at work, school, or at home is extremely rare or nonexistent. In virtually all cases, direct sexual contact, sharing of IV drug needles, transfusion of infected blood or blood products, or perinatal transmission (from infected mother to unborn or newborn baby) has led to the illness.

How is AIDS treated ?

Currently there are no antiviral drugs available anywhere that have been proven to cure AIDS, although the search for such a drug is being pursued vigorously. Some drugs have been found that inhibit the AIDS virus. One of these, azidothymidine (AZT), has shown some promise in limited, short-term clinical trials with a select group of patients. Though no treatment has yet been successful in restoring the immune system of an AIDS patient, doctors have had some success in using drugs, radiation, and surgery to treat the various illnesses of AIDS patients. Therapeutic agents are needed for all stages of AIDS infections, to block action of the virus once infection has occurred, and to restore full function in patients whose immune systems have been damaged.

Eventually, a combination of therapies to combat the virus and restore the immune system may be the most effective treatment.

Can AIDS be prevented ?

Yes. Cases of AIDS related to medical use of blood or blood products are being prevented by use of HTLV-III antibody screening tests at blood donor sites and by members of high risk groups voluntarily not donating blood. Heat treatment of Factor VIII and other blood products helps prevent AIDS in patients with hemophilia and other clotting disorders. There is no vaccine for AIDS itself. However, individuals can reduce their risk of contracting AIDS by following existing recommendations. Communities can help prevent AIDS by vigorous efforts to educate and inform their populations about the illness. Meanwhile, the effort to produce vaccines and drugs against AIDS continues.

Recommendations for the General Public

The U. S. Public Health Service recommends the following steps to reduce the chances of contracting infection with HTLV-III — the virus that causes AIDS:

- You can avoid infection through sexual contact if you abstain from sex or have a mutually monogamous marriage/relationship with an uninfected person.
- Don't have sex with multiple partners, or with persons who have had multiple partners (including prostitutes). The more partners you have, the greater your risk of infection.
- Obviously, avoiding sex with persons with AIDS, members of the risk groups,* or persons who have had a positive result on the HTLV-III antibody test would eliminate the risk of sexually transmitted infection by the virus. However, if you do have sex with a person you think is infected, protect yourself by taking appropriate precautions to prevent contact with the person's body fluids. ("Body fluids" includes blood, semen, urine, feces, saliva, and women's genital secretions.)
 - Use condoms, which will reduce the possibility of transmitting the virus.
 - Avoid practices that may injure body tissues (for example, anal intercourse).
 - Avoid oral-genital contact.
 - Avoid open-mouthed, intimate kissing.
- Don't use intravenous drugs. If you do, don't share needles or syringes.

*Persons at increased risk of HTLV-III infection include: homosexual and bisexual men; present or past intravenous drug users; persons with clinical or laboratory evidence of infection such as signs or symptoms compatible with AIDS or AIDS-related illnesses; persons born in countries where heterosexual transmission is thought to play a major role in the spread of HTLV-III (for example, Haiti and Central African countries); male or female prostitutes and their sex partners; sex partners of infected persons or persons at increased risk; persons with hemophilia who have received clotting factor products; and newborn infants of high-risk or infected mothers.

(If you believe that you may be at increased risk for HTLV-III infection, consult your physician for counseling. Consider asking to take the HTLV-III antibody test, which would enable you to know your status and take appropriate actions.)

Recommendations for Persons at Increased Risk of Infection with HTLV-III

The U.S. Public Health Service recommends the following precautions for persons at increased risk of infection by HTLV-III, the virus that causes AIDS. These recommendations are based on the fact that it is possible to carry the virus without knowing it, and thus transmit it to others.

- Consult your physician for counseling. Consider asking to take the HTLV-III antibody test, which would enable you to know your status and take appropriate actions.
- You can avoid infection through sexual contact if you abstain from sex or have a mutually monogamous marriage/relationship with an uninfected person.
- Don't have sex with multiple partners, or with persons who have had multiple partners (including prostitutes). The more partners you have, the greater your risk of contracting AIDS.
- Don't use intravenous drugs. If you do, don't share needles or syringes.
- During sexual activity:
 - Use condoms, which reduce the possibility of transmitting the virus.
 - Avoid practices that may injure body tissues (for example, anal intercourse).
 - Avoid oral-genital contact.
 - Avoid open-mouthed, intimate kissing.
 - Protect your partner from contact with your body fluids. ("Body fluids" includes blood, semen, urine, feces, saliva, and women's genital secretions.)
- Don't donate blood, plasma, body organs, other body tissue, or sperm.
- If you are a woman at increased risk, consider the risk to your baby before becoming pregnant. (AIDS can be transmitted from infected mother to infant.) Before becoming pregnant, you should take the HTLV-III antibody test. If you choose to become pregnant, you should be tested during pregnancy.

Recommendations for Persons with a Positive HTLV-III Antibody Test

The U.S. Public Health Service recommends the following steps for persons with positive results on the blood test for antibodies to HTLV-III, the virus that causes AIDS:

- Seek regular medical evaluation and follow-up.
- Either avoid sexual activity or inform your prospective partner of your antibody test results and protect him or her from contact with your body fluids during sex. (Body fluids" includes blood, semen, urine, feces, saliva, and women's genital secretions.) Use a condom, and avoid practices that may injure body tissues (for example, anal intercourse). Avoid oral-genital contact and open-mouthed, intimate kissing.
- Inform your present and previous sex partners, and any persons with whom needles may have been shared, of their potential exposure to HTLV-III and encourage them to seek counseling and antibody testing from their physicians or at appropriate health clinics.
- Don't share toothbrushes, razors, or other items that could become contaminated with blood.
- If you use drugs, enroll in a drug treatment program. Needles and other drug equipment must never be shared.
- Don't donate blood, plasma, body organs, other body tissue, or sperm.
- Clean blood or other body fluid spills on household or other surfaces with freshly diluted household bleach — 1 part bleach to 10 parts water. (Don't use bleach on wounds.)
- Inform your doctor, dentist, and eye doctor of your positive HTLV-III status so that proper precautions can be taken to protect you and others.
- Women with a positive antibody test should avoid pregnancy until more is known about the risks of transmitting HTLV-III from mother to infant.

Further information about AIDS may be obtained from your local or State health departments or your physician. The Public Health Service AIDS hotline number is 1-800-342-AIDS.

For further information on drug abuse treatment call 1-800-662-HELP.

For information on AZT, call 1-800-843-9388.



CMS Library
02-07-18
7500 Security Blvd.
Baltimore, MD 21244

U.S. Government Printing Office: 532-013-1988

CMS LIBRARY



3 8095 00009280 5