·POZ IRELAND·

POSITIVE LIVING 1998

SPECIAL EDITION

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CHALLENGE IDEAS NOT PEOPLE

GPI PUBLICATIONS PO BOX 5187 DUBLIN 6.

POSITIVE LIVING

This special edition of POZ IRELAND is a compilation of articles from people living with HIV.

POZ IRELAND reports on experimental and standard treatments for HIV & AIDS, especially those available now. This special edition focuses on the living experiences of positive people.

JOHN WILLIAMS

GPI PUBLICATIONS PO BOX 5187 DUBLIN 6.

Just another voice in the choir

When you meet someone who is HIV negative, when do you sit down and have 'THAT' discussion? There is the fear of doing it too soon, in case you might not know him well enough to trust him, and in doing it too late, that it may give him cause not to trust you. If you don't tell him, and he doesn't ask, and sex is safe, isn't it reasonable not to reveal your status right away.(?)

Some Positive men feel that it's the responsibility of the prospective partner to inquire, and adopt the attitude that if they're not asked, they won't tell. Of course, if both parties turn out to be positive, and both take the don't-tell-unless-asked attitude, the subject may never be broached.

In a positive/negative situation, the subject will probably come up sooner or later. In this case, unlike fine wine, this discovery may not improve with age. A very valid concern in revealing your status up front, in a small community situation, may well lead to problems. Not much stays a secret in a small town environment, where everybody knows everybody else, including in the biblical sense.

I found out I was positive while I was with my past husband. We stayed together until he departed. During those last few months, I thought the issue over and over, and decided that I really did not want to deal with the poz/neg issue in a future relationship. When I started dating, I decided to ask first. This was, of course like "outing" myself, but it was something that I had to do. My choice of action brought criticism from some people around me, their argument being that I was limiting myself to going out with HIV positive men. Other friends of mine have also chosen to take this option.

Of course, whether we like to admit it or not, positive guys are discriminated against by HIV negative men. As Gay men we are discriminated against because of our sexual orientation, even sometimes by fellow gay men. Hiding your status to prevent discrimination is as successful as hiding the fact that you are gay to prevent discrimination. The truth about both situations finally comes to light. You can not eliminate dealing with either; you can only postpone the eventual outcome.

The problem with revealing your status at the beginning of a potential relationship is that this single issue usually overshadows all other elements of the relationship. The negative partner goes through the mental gymnastics of the fear of becoming positive; the stigma of being considered positive with a positive partner; the possibility of having to deal with illness or death; fear of sex etc. etc. By postponing the revelation of your status you develop a relationship which depends on two people getting on together regardless of HIV, and not because of that fact.

There is no single answer to the question, mostly because we are all different people, each with our own set of priorities. The most important thing is to think before you act, because you are the only person that you MUST answer to. By all means, listen to other people opinions and experiences on the matter, but don't let the wrong head make the final decision as to the approach you take.

"Man spends his whole life running from feeling, with the mistaken belief that you cannot bear the pain. But you have already borne the pain; what you have not done is to feel all that you are beyond the pain."

Bartholomew
(The Colour of Light)

who is responsible for the spread of HIV ?

With any complex issue it is all too often attempted to narrow the questions to two choices: right or wrong, left or right, etc. In playing this game the choices are reduced down to one of two alternatives. With the question, who is responsible for the spread of HIV, it is wise to think of the answer in terms of "everyone" rather than in terms of any individual or individual group. This avoids the extreme danger of isolating any portion of society, who when catered to by simplistic alternatives, are made to feel immune to HIV, thus leaving them exposed to that very risk.

The next several years will be particularly decisive for the future of AIDS. Newly developed drugs do not immediately or completely eliminate the virus from the body. They suppress HIV replication, placing the virus under intense evolutionary pressure. HIV is the most mutable virus we have encountered and there remains a real danger that it will somehow manage to evade the most potent drugs.

Our failure to comprehend and modify our preventive efforts could lead to a decisive Second Wave of this epidemic, this time with drug resistant strains of HIV that can never be treated by those drugs which are working at present. The people presently becoming infected indicate that we do not consistently practice protected sex, or at least do not use condoms consistently.

The responsibility for stemming the tide of HIV lies with us all, positive or negative gay or straight. For too long the onus of responsibility has been left with positive people.

How many HIV-negative people have UNSAFE SEX because they wrongly assume their partner is HIV-negative?

HIV-negative people should take responsibility for safer sex and, within a consensual sexual experience, not place themselves at risk.

The myth that people become HIV positive primarily in anonymous sexual encounters is untrue and unfortunately people become HIV positive within relationships, wrongly assuming that love would conquer all. Studies show that higher rates of unprotected anal intercourse take place in privatised spaces (i.e., people's bedrooms) as compared to public sex environments.

To develop a new awareness and understanding about HIV will require a belief in our ability to change, and a desire to survive as healthy people, and our rejection of the homophobic myths that we are by nature shameful, diseased and doomed. If we can achieve this tall order has yet to be seen.

Prevention Studies have found that lack of communication is one of the main factors contributing to the spread of HIV through sexual intercourse. It is only through open, frank and non-judgmental discussion that we can come to the correct and prospective management of HIV & AIDS.

John Williams

VOICES FROM THE FRONT

John Williams

There are no high-risk groups, just high-risk behaviour.

John

Though I've been out of the "dating" scene for some 8 years now, I do believe that in some ways, HIV & AIDS has divided the Gay Male community into two distinct groups: the haves and the have-nots.

William

He wasted away. He became a shadow in the bed. He looked so grey and small that winter afternoon, and breathed a gentle snoring. I touched him and the rhythm of his breathing changed and distressed slightly, then rested and calmed again. Then it stopped. We had said good-bye during the last three months; we just didn't know when it was going to be needed.

David

We really are bigots. Just trying to get people (and myself) to own our own damn bigotry is so hard a lot of the times. Our intolerances of each other are more common than we would care to admit. Just look at the personal ads - I cannot for example imagine why I would want to describe or define myself emulating a role model that I do not subscribe to... i.e.: must be "straight acting" or people who say of themselves I am straight acting, masculine and all that. I think, and this is nothing to do with being politically correct, it's like why am I trying to define myself within a straight man's model. I am not straight. Just what does "straight acting" mean anyway? Do they act vulgar in public and buy their clothes at Pennys? I always laugh and wonder just how straight acting they are with a cock down their throats!

Then go the extra mile and try and calculate their reaction to someone who is HIV positive.

Graham

I wouldn't want to know the gay men who are bigoted towards HIV positive people, let alone sleep with them!

Charles

It just goes to show that just because people are gay and educated about HIV & AIDS does not mean they are not bigoted.

POZ IRELAND
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DUBLIN 6.

Tom

Most of the people who I have told of my status have not been running for the door!

Jim

I was out in a bar one evening and started chatting to someone I knew through my work who was out and gay. He told me of an encounter the previous evening when he had met a guy and gone back to his place with the intention of good shag. Imagine his surprise when the guy told him he was HIV+ve. What did he do? Left immediately and explained to me (he does not know I'm HIV+) that people like that shouldn't be out trying to pick up in bars!

I did ask if he had been tested for the virus and you guessed it - No, but he knew he was ok! (We've all heard that one too.) Even after I explained that this guy had been very open & honest, an action which must have taken at lot of courage he would still not accept the situation. All of this left me feeling very upset and disappointed.

Bob

So am I a bigot for not wanting to date anyone who is Negative?

Bill

Just some sadness here as the summer night passes, I am again reminded of the ravages of AIDS - someone who I know and have not seen in a while has continued to deteriorate - he was once an image of "David" though now parallels an inmate from a concentration camp in his current state.

SURVIVAL TIPS

THESE TIPS ARE COMPILED FROM PEOPLE LIVING WITH HIV & AIDS.

1. UNDERSTAND THE BIG PICTURE - THE DOMINO EFFECT OF AIDS TREATMENT.

2. SEEK OUT AN EXPERIENCED AIDS SPECIALISTS. (THERE ARE THREE IN IRELAND)

Select a doctor who will listen to you and explain things until you understand them. Without experienced and knowledgeable specialists you will succumb more readily to opportunistic infections. Only a seasoned specialist has the experience to maintain a workable trade off between the drugs and body organs. (liver, kidney, bone marrow.)

3. CALL YOUR DOCTOR BY HIS/HER FIRST NAME. IT MAKES THEM THINK OF YOU AS A PERSON.

4. MAKE FRIENDS WITH YOUR SPECIALIST'S TEAM.

5. PREPARE FOR YOUR DOCTOR VISITS. (MAKE LISTS OF QUESTIONS).

List your symptoms and questions ahead of time so you don't forget anything important. Take notes on what the doctor tells you. If you are taking a lot of drugs and changing them frequently, take a list and current doses to compare with your doctor's list.

6. HELP YOUR DOCTOR MANAGE YOUR CONDITION.

Read newsletters and arm yourself with treatment facts. The informed ones include: Poz Ireland, Project Inform, AIDS Treatment Update, and GMHC Treatment Issues.

7. GET A GOOD HIV & AIDS TREATMENT BOOK.

NAM's HIV/AIDS treatment directory or AmFAR is worth having.

8. LEARN TO READ YOUR BLOOD TEST RESULTS.

This is not as hard as you may think. Ask your doctor to give you a copy of your results.

9. IF YOU FAIL ON STANDARD TREATMENTS, ASK ABOUT EXPERIMENTAL DRUGS.

If the big gun drugs stop working, seek out experimental treatment. Learn which trials are in progress. Learn about the latest combination treatments.

10. FIND OUT ABOUT THE BENEFITS YOU ARE ENTITLED TO AND APPLY FOR THEM.

11. BE ONE STEP AHEAD ON NEW INFECTIONS.

You reduce your chance of survival if you do not identify and treat new infections. The longer you wait the harder they will be to treat. Don't be discouraged by new infections. A few of them can be show stoppers, but most aids related infections come and go with treatment

12. ACCEPT YOUR FEARS.

Once you accept your fears they become less. The fear of disease, of dying scare the hell out of all of us, but once these fears are accepted they are no longer so great.

13. EAT WELL, EXERCISE ..... ETC. ETC.

If you haven't come across this advice you have been on another planet.

14. TELL SOMEONE.

People who reject you because of your condition are most likely ignorant, religious, or both. If someone rejects you out of ignorance, attempt to educate them. If that doesn't work, avoid contact with them. Most people are compassionate after the initial shock wears off.

(Continued on page 6)

SURVIVAL TIPS

15. FORGIVE THE JERKS IN YOUR LIFE
We all have had at least one jerk in our lives. They have treated you like @!&^$, hurt you deeply, rejected you and dumped on you. You will have to give up your hates if you want to live. The hatred gives way to pity. Pity takes far less energy than hatred and bitterness.

16. PREPARE TO BE POORER.
Isn't money overrated ?

17. CRY!
Whining or self pity is not allowed! Crying is - any time you feel like it.

18. LOVE YOUR MEDICINE.
Expect the best from your drugs with few side effects. May sound silly but it works.

19. TRY AND TAKE YOUR MEDICINE ON TIME BUT DON'T BE NEUROTIC ABOUT IT.

20. DON'T ACCEPT PAIN AS PART OF YOUR CONDITION.
Pain can be eliminated or controlled. Anti-anxiety drugs are useful when undergoing procedures like starting an IV line or under going various tests. Remember there are no awards for martyrdom.

21. SOME DRUGS MAKE LIFE EASIER. INSIST ON THEM IF YOU HAVE A NEED.
Certain drugs help to eliminate nausea, pain, anxiety, fear and give you a good night's rest. These drugs can help to improve the quality of your life. They are important allies to help you manage these issues but should only be used as part of the solution.

22. WHEN YOU ARE HOSPITALISED, STAY IN THE DRIVERS SEAT.
There is only one person in hospital, more powerful than a doctor. It is you, the patient. You have the right to ask for and receive explanations.

23. DON'T TELL EVERYONE YOU ARE IN HOSPITAL.
When you are in hospital, you are there to heal. Too many visitors can be tiring.

24. BRING COMFORT ITEMS TO THE HOSPITAL.
A good book, your phone book, the TV guide. Borrow a phone. Take something special.

25. MAINTAIN GOOD BASIC HYGIENE.
Use an antibacterial hand soap. Good oral hygiene is important.

26. IF A SUPPORT GROUP IS DEPRESSING - STOP GOING.
Support groups can increase your problems. Chose carefully !

27. YOU NO LONGER "HAVE TO" GO ANYWHERE.
Some occasions maybe stressful and tiring. Don't go out of a sense of obligation.

28. IF YOU DON'T HAVE FUN, DON'T GO!
If you are going somewhere just for the sake of it - think again.

29. COPY THIS FOR FRIENDS IN NEED.

30. HAVE A LIFE APART FROM HIV & AIDS.
There are times when HIV & AIDS is all-consuming. You need something to take your mind off AIDS issues for a while. Create an AIDS-free zone in your home.

31. LET OTHER PEOPLE ACCESSORIZE WITH RED RIBBONS.
It's great to see other people wearing red ribbons, they are usually compassionate types. A lot of positive people don't need the reminder.

32. DON'T GIVE UP ON LOVE.
Try and overcome your fears around HIV and follow your heart.

33. CHERISH AND NURTURE HOPE.
Hope keeps you alive. Everyone needs it. Don't take hope away from anyone.

Treatments are getting better, the cure is getting closer. Lets hope we are all here when it arrives.

Why are we still having unprotected sex?

Recently HIV & AIDS prevention has focused on the fact that unprotected sex is on the increase. Why? Negotiating protected sex can be a complex and confusing issue. Balancing sexual desire and physical action with rational discussion and informed choice demands an approach that the act of having sex does not easily accommodate. Instead we sometimes make decisions based on a combination of logical odds and illogical (emotional) desires. Changing this behaviour involves bringing control into an area of life in which we expect freedom of expression and unbridled passion.
After years of producing safer sex information we know that achieving success is not simply a matter of providing information. We need increased understanding of how and why unsafe sex occurs, and this will result in improved education campaigns and increased practice of safer sex.

Risk Taking
Changes in behaviour need to be sustained for life. Factors associated with an increased risk of unsafe sex include: **denial; despair; depression; survivor guilt; self-esteem and relationships.**
Denial involves feeling that we can't become infected; that if we haven't become HIV positive by now, it's unlikely that we will; or that if he wants unprotected sex he must be HIV negative.
After over 15 years of HIV/AIDS we may despair of this epidemic ever ending so safer sex becomes more difficult as a life-long activity.
This sense of endless epidemic can also lead to depression. Having been surrounded by death and illness for so long, there seems little incentive to continue to act safely.
Survivor guilt is the difficulty of reconciling the different outcomes of men with similar sexual histories. One gay man may remain uninfected after years of unprotected sex while another dies from AIDS; some men are long term non-progressors with HIV while others become ill after being HIV positive for only a short period. Poor self-esteem can be common among gay men - particularly in societies in which gay sex has been highly stigmatised and discriminated against. We may perceive ourselves as less that equal in society's hierarchy, and find it difficult to preserve ad establish a sense of self-worth. We may make comparisons with others and focus on our negative aspects; we are not as young, good looking, healthy, rich, well dressed, well endowed, interesting, intelligent or funny as the other. With low self-esteem, we may well place ourselves and others at risk.

Gay men in relationships are more likely to engage in anal sex and less likely to use condoms than their single counterparts; even though half their relationships are not monogamous. Using condoms may seem to go against mutual trust and interfere with sexual expression. Discussing past risks may be perceived as a threat to the relationship. We rationalise that we know and love our partner and that he doesn't look as if he is HIV positive. Unprotected sex within the context of a relationship now accounts for an increasing number of cases of HIV-positive gay men.

Medical advances
Our understanding of the new developments in the transmission and treatment of HIV can also affect our risk taking behaviour. We make take chances because we either know or presume that:
- Transmission of HIV in a single act of unprotected sex is worth the risk, particularly in an environment in which free sexual association is possible, such as saunas.
- The present combination drug treatments for HIV are resulting in very low and undetectable levels of virus in the blood (viral loads). This reduces the risk of transmission of HIV. Those who know they have a low viral load may feel they do not need to be cautious.
The increasing focus by the medical profession on the promising outcomes of these new medications can also lead to a false sense of security. We may rationalise that treatment for HIV are available, and while they may not be completely refined now, they will be by the time they need them.

Future Challenges
We are continuing to develop our understanding of both the virus and how we, as gay men, organise our sex and emotional lives in its wake. The challenge, for the whole gay community, is to incorporate our understanding into more successful campaigns. Establishing a community norm of safer sex is perhaps the most important single factor influencing how we have sex. We, as a community, must take responsibility for our actions and also incorporate those among us who are HIV positive.
Deciding how to structure such programmes must involve more than the small number of activists currently involved. New ideas and insights as well as new peer groups are essential.
Community members, rather than outsiders, usually know their own communities best and often are best qualified to know what is needed to create successful HIV prevention programmes. It is time we tapped into this resource to begin to find some answers of our own.

John Williams, Bill Foley.

Relationships

Fear of infection

My lover is HIV-negative.

I'm having a hard time getting back to having a "healthy" sex life. I'm so afraid of infection. (Heaven knows, I don't want him to go through what I am going through) and I did the "latex thing" (hate it). It just doesn't work for us. What to do...what to do. Time is the only thing that may cure this situation. I love him VERY much as he does me but I cant help thinking that I'm not being fair to him. He is the bottom in the relationship and now I cant give him what he wants for fear of infection. We tried once (yes I was protected) but I thought about it for days.

I know that there are others that have gone or are going through this what is the solution?

Barebacking

I have struggled with the issue of barebacking within my relationship with my partner since we've been together (over six months). He's negative and I'm positive (duh!). I absolutely love barebacking and he won't do it with me for out of fear of getting it from me just because he's a top. As I understand it, the chances of a neg top barebacking a poz bottom and getting HIV is extremely remote. Yet, there is that chance that he could test poz. This is one of the major thorns in our relationship and that's why I've been unhappy with the way things are going in our relationship. Which is why I'm at a point now where I'm looking for another partner who is POZ and also loves to bareback and give me his charged loads in my ass. My partner and I have only fucked 3 times, all with rubbers. And believe me, the feeling just wasn't the same. I fucked him twice and he fucked me once.

He also doesn't like it when I go out and get fucked raw or bareback. He really wants me around for a long time but I'm really set on going rubberless, regardless of how he feels. I know that that sounds selfish, but that's how I feel, no if's, and's, or but's about it.

The most beautiful eyes

I'm 36 years' old gym train a LOT, I eat well and sleep loads. I have a lover with the most beautiful eyes, ways and manner (and the smallest hands who is POZ too) and reckons that I'm one of the best looking boys around this town for my age. He is 28 and I have never met someone so mature and well put together mentally and emotionally (ok he can be a pain at times but can't we all). And if I hadn't been HIV and if I hadn't had the life I have had I would have never have met him - and I don't think that I could bear to consider that.

I am probably fitter now that I ever was when I was younger and although I often still feel like shit for weeks on end, I ain't dead or lost it yet and don't intend to without a fight.

I didn't get this far feeling that someone should legislate for me or act like my mother. I act for myself and take responsibility for myself. If something goes wrong then "I take a pill darling", or just get on and fight it. That gives me a pride in myself. Sure, sometimes I need help and support like any man but I'm not afraid to ask for it nor do I. If I was to die tomorrow I'd die happy that I'd had such a ball in my short youth and thirties. Getting POZ was an unlucky break but shit happens. If a man never took risks he'd never leave home....!!!

My body My decision

Believe it or not (!) but I went through a period of about three/four years where I was neg and didn't have sex with anyone. Actually not through fear or anything like that, it just wasn't important to me at the time, and probably living in an isolated part of the country had something to do with it as well, (and NO I didn't have any sheep).

Then I moved to the city where I met this terrific guy who I really fell for. He was poz, I knew it, and he also didn't want to use condoms. I thought for a little, and I decided that was fine by me. I KNEW the risks, indeed the likely outcome, and I went ahead anyway. My decision, I was a big boy and could think for myself. I thought it was worth it, and you know what? I would still do the same thing if I could go back and do it over again.

Irresponsible behaviour, maybe, but we all have one life only, and if someone knows the odds and decides to put themselves at risk (whatever that risk may be) then no one else has the right to tell them not to. "My body. My decision."

Occasional three way encounters

Being out of the dating game for some time, I have not experienced the tell-and-be-dumped syndrome. In my work and life I, quite simply, RARELY meet negs in any circumstance (except our straight friends). On our somewhat occasional three way encounters, we prefer to establish the issue up front and we have always shied away from negatives simply for our own added sense of reduced responsibility (though we would follow the same safer sex guidelines anyway)

Once we ended up with a negative "by accident" but we told him and he didn't really care. We had a great time; he even spent the weekend, but hmmm...never could get hard.

POSITIVE STEPS

My name is Mark and I'm 29-years-old. I tested positive last year, apparently while I was still seroconverting. I started combination therapy right away and luckily it has been phenomenally effective. My viral load was sky-high when I started, and it went undetectable in less than two months. The T-cells have been steadily climbing since then, and they just topped the 1,000 mark.

Testing positive was a tremendous shock because my risk profile was so low; I've never engaged in what most people would call "high risk" sex. That's one of the things I struggle most with: I know so many people that have had dozens, even hundreds of partners and done very risky things and they're all negative. I have had no more than five partners and I'm the one who snags the virus! I am aware that sounds self-pitying, but I must confess I feel like that often.

A big problem for me is that I know very few people who are positive. I joined a local HIV & AIDS agency that hooked me up with a guy who has been positive for almost ten years. Our friendship is great, but he is literally the only HIV+ person I know on a personal level. It's unfortunate that he is much older than I am because I feel it presents obstacles to us truly relating to each other.

I regret that my first article should be fraught with such negative remarks (and believe me when I say I could include many more), but HIV has brought little joy to my life. Right now I regard the virus as a challenge that I have kept at bay, but never quite confronted or overcome. Perhaps learning that it can't ultimately be "overcome" is the first lesson.

But I'm hopeful that contacting other positive people is a step in the right direction. I look forward to hearing others' success stories and reaping the benefits of solid, experiential advice.

IF YOU WERE ALIVE

P. This is a real hard time for me. I am pushing myself to be a little active, but I always have to pay-back with a few days in bed.

My head is driving me nuts- maybe even for real. I don't respond to my medication anymore and it isn't even established if I can use any new ones.

I fall a sleep at the weirdest times, and although I know I just have to wait and see what comes next in the line of medication to help me, but it feels like I am losing precious time. God knows how long or how short I have and then, something I always had is degrading it to useless time.

I force myself. I have to do this and have to do that, you know like you are going away and you are nervous about maybe not closing windows, or turning off the stove or any other things you might have forgotten. But no matter how hard I try it is so much stronger than I am.

The docs want to give me the AIDS label already, but I refuse. Not yet. Just not yet! They doubt if it will matter but I DO, and it's my body, so I have the last word, I thought. (All those seizures are taking a huge amount of energy and burned brain cells.)

I can't get a grip on it. I only have IT one and a half years. I know, I know with my medical history you can't look at me as an average HIV+ person, but still that may be a scientific fact, I can't see myself as a 'different person'. I try to hang in here but it is soooo difficult to keep the faith. Faith in some kind of an acceptable future.

My brain is all I have left. But now of course that particular part is getting weaker and weaker.

First I was most afraid of AIDS dementia, but now I realise if this goes on I am not much better off. It scares me so. I wish I could run away from it, to be held close by my Jean, for comfort and safety. But how long will it take before I can reach him?

At one side I hope -of course- it will take many years, but on the other hand I want it to be as soon as possible. Years without quality are no years. They are a waste of time.

Please, pray for me that there IS some medication..somewhere out there!

For Jean

IF YOU WERE ALIVE
If we had no secrets what would you tell me?
If we had no fights, what would you say?
If we had eternity, how long would you stay?
And if you were alive, how would I feel today

Tell me why, am I still alive
I feel I've lost the game,
And I'm changing.

I wanna hold you,
Where no one tell's me it's not right to do it.

(P. died in March 1998)

PRAYING ? ME ? HAH ?

Martin

Tottering on the precipice between this world and (presuming there is one) the next, furtively searching for a firm foothold on life, hoping for a last minute reprieve on this unfairly passed down sentence.

The past two years the record (sorry, CD - its the 90's) has been played ad nauseam. But that has become my life.

Having been diagnosed HIV-positive in 1988; I remained well until 1994. Since then there have been about half a dozen times when I, not unreasonably, thought my number was up. Each time I have (thankfully) been rescued at the last minute from the greedy grasp of hell's angels. Although a cynic and a staunch atheist, I admit momentary lapses in my lack of faith. Like earlier this year, while having a severe reaction to a treatment I had been given in hospital, I panicked and it slipped out. I admit it. I said "God help me." Now I know its not quite prayer and pales in comparison with, for example, the rosary, but in times of acute stress its much easier to remember. But (at least in my head) I heard a thundering voice saying "Feck off, ye bollix. Who the hell are you?" Now my mother would probably chide me at this point and point out that the GOOD LORD would never use language like that, but then my mother's another story altogether.

People are always asking, "What do you do?" meaning I'm sure, "In what way do you contribute in a meaningful way, to the well being of society?" Well, I haven't been employed for over two years, so, in terms of productivity, I've done very little. It would be nice to be able to say that I've taken up painting, or I'm writing a novel or I'm travelling or some equally creative means of spending my time. But I haven't. I have been busy though. Busy just living. Staying alive. And believe me, it's more like hard work than work ever was.

Over the past two years I have come to marvel at the extraordinary energy within us to survive. If I gave an account of my past two years any sane person would say it's not worth it. Certainly if I could have foreseen my future I would have said "NO, NO I can't cope. No I can't deal with it. I want out now!" But in fact you do cope. You do learn to deal with it. And you want now to go on forever, no matter what it bloody takes. And so each new Spring I ask for just one more Spring, each Summer for one more Summer, each Winter for one more (milder, please!) Winter. Although, being an atheist I'm not quite sure who it is I'm asking these favours.....never does any harm to ask now does it? So, another year goes by, although by now I have stopped measuring time in years. Sounds too long. Too immeasurable. Days and weeks are much easier to fit into my scheme of things. Much more reliable.

And so, it is with great expectation that I look forward to the ever brighter, longer days as summer approaches. Out with the party frock. Cancel the instalments to the undertakers (seemed like a good idea at the time - 20% discount if prepaid!). Couldn't be seen in a '96 shroud if I last till '97. Anyway, if I'm going to be around a little longer I can think of more exciting ways to spend my money. Dump me at sea if you have to when the time comes.

I know. Sorry guys. Another false alarm. It's unfair of me to keep doing this to you. But I'm here to stay a while longer. Talk about a drama queen! That's carrying things too far. I don't mean to do it. Honest, it just happens that way. So fasten down the hatches. We're in for a long and maybe bumpy ride. Promises, promises.

May 1996.

The Party that never ends

Sometimes I feel like one of those guests at a party that never leaves. I'm sure at times we've all felt that way, like the unwelcome partygoer who doesn't know when to leave. The party I speak of is the AIDS party. I am speaking from the front lines of the disease I can assure you all. I have had some of the big opportunistic infections, I have watched fellow warriors die, I have worked all the AIDS volunteer booths one can muster, and now it all grows old on me.

I think my initial attraction many years ago to this party was the all the pity that we dished out to each other. But like the warmth of understanding, the years of the same old round has cooled my enthusiasm. I begin to feel that there is little any group or any individual has to offer me by way of support and new knowledge about treating the illness and dealing with the emotions it stirs. Feeling this way is like having the radio on and not listening.

I don't think I have found any rational answers to the questions. I know that I still search for the best way to wrap my arms around the dilemma of AIDS and try to develop a comfortable way in which I can live with it. I believe that being with people who have AIDS has made me feel less alone on those days when I sat alone with tears rolling down my face wondering how I ever got to this point. I thank those of you who were there for the honesty and openness you offered then, you will obviously never know the impact of your words, but it goes far beyond the replies of anyone who has not experienced this disease directly.

I will stay on the periphery of those various groups and do-gooders as an observer for another while.

I wish to stay for a little while longer in the hope of some new inspiration that I haven't come across before. I think I am looking for a life less devoted to AIDS for a while. As I told a friend recently on the phone, I have given AIDS as much of my energy and time as I care to. I plan to face the future doing the best I can at being a survivor but at the same time not giving up life for the sake of more "Borrowed Time". As one sage put it, "The race of the fools is infinite". I asked myself what part of the responsibility for this lack of satisfaction is mine, and what part of it is that of others. I am constantly being asked what are the needs of positive people, and the real answer is somewhere very deep and I haven't gone to there yet. And sometimes I feel people who don't know those answers, shouldn't be in a position to ask those questions!

This time of the year always heightens emotions, happy becomes more happy and sad becomes deep sorrow. Maybe the brighter days will supply a new momentum to give me the energy to get back to the war. But when friends are still being carried off the battlefield it gets difficult to fight on.

Constantly fighting what appears to be a losing battle is taking too much of my energies. Maybe I don't really know what I need at this specific time, but I feel that knowing there are others like me in the same situation will continue to empower me to continue fighting for my life. But maybe just mine this time.

First Person Positive

"You are signing your own death warrant,"

said my friend. I had just told him that I was madly in love with somebody who has HIV. I'm HIV negative. You'd be surprised at the questions people asked. The scare tactics, too. At first, I couldn't even mention the topic because I couldn't handle all the commotion it would stir up. I was asking myself tough questions too, but it wasn't like I went out to a bar one star-filled night and said 'Gee, I think I'll fall in love with somebody who has HIV'.

I met him years ago. We became friends. You know the occasional chat, Christmas and birthday cards. Casual stuff. He and I were both in long term relationships. Then it happened. About a year ago, he had just broken up with his long-time boyfriend. Me too. We were both single. Things heated up, and we decided to get together. ("Marriage" is such a heterosexual word, but that's what we were talking about.)

The Tests

We did the responsible thing: we got HIV tests. No big deal. We had both been in long term relationships -- never suspecting the test results would change our lives forever. My test was negative. "Throw away the condoms. I'm clear." A few days later, I got the news: he was positive. A second test confirmed his news.

My dreams were shattered -- or, so I thought. Everything I looked forward to was over. The End. ANGER is how I reacted. A force beyond control was robbing me -- stealing my boyfriend's time -- without my permission. I felt violated. He called to say he wanted to break things off. He wanted me to go find somebody else. etc. etc. Noble gestures, but pure poppycock. I wasn't about to abandon this man after I'd waited for so long. No how. No way.

I started doing my homework. Back then the information was available via long distance phone and modem -- no Internet access. Sponge-mode, soaking up everything I could find. I learned about current and past drugs. This was before the advent of protease inhibitors, so the news wasn't too cheery.

Friends and Family

I told a couple of friends. The result was shocking.

1. "You are signing your death warrant."
2. "Only a fool puts themselves in such danger."
3. "If he's positive, you'll undoubtedly wind up the same way."
4. "How can you be happy in a relationship like that?
5. "How can you expect to have a normal relationship?"

I was scared, and my friends didn't help. But I was also in love. Anyway -- I have no idea what a "normal relationship" is. I mean, have you actually run into the "functional family?" Was everybody on the planet going to be so negative? (so to speak). Finally I ran into some others who were in the same boat I was in. Two people in love, one with HIV and the other not. They told me about the statistics; only a fraction of one percent of those in a positive/negative relation transmits the virus.

Gary

One of these positive/negative lovers told me to forget all the negative talk.

"You should really look at it as an enhancement of your lives," he said. "Yeah, right," I blurted. What kind of drugs do they have him on? I mean, here's a guy in his 20s. He has a fatal disease, he may be about to infect his lover at any moment, and he's talking about an enhanced life. HELLO! "People take their lives for granted," said my new friend. "They waste the time they've been given." True. I had to admit it. He continued -- "When was the last time you walked into a field and listened to the silence? Or, listened to the trickle of a stream?". "BE PRODUCTIVE," he bellowed suddenly. "That's what society has thought you. The 'bottom line' is the alpha and omega. We do so much stuff that we can't remember how to see life as it really is. But I'm lucky -- I've been given the gift of insight. Insight to see how small we really are -- how fragile." "You have no idea. You can't even imagine. There is no chance you can know how precious it all is -- until you wake up one morning to know that time is no longer your friend. It took awhile for me to get over the initial shock of having HIV. But I did get over it. And it made me grab life -- look at life -- listen and feel life. It made me get over my cheap self -- to get out there and do some of the things I had only dreamed of. I've heard your lover tell others -- 'Be well. Play safe. Godspeed.' Listen to that. The odds of you catching the virus are tiny if you follow the rules. And by following those rules, you'll see life like you never did before. So go for that guy of yours. You'll see an enhanced person because of that damned virus."

Thanks

Thanks, Gary. I did and still do. Grab life. Sometimes by the nuts. But always looking and listening and feeling. And for some reason, a deep sense of gratitude for today.

WHAT I DID ON SATURDAY NITE

I finally told the man I'm dating (or maybe I need to write WAS dating, I'm not sure at the moment) that I am HIV positive. As it turns out, he isn't. I told him when we drove up in front of my house, not the best timing, and once I had said it, it felt like I'd released a poisonous cobra into the car which would strike if anyone made a move or a sound.

We'd been out to the cinema and dinner. I had spent that entire date working up how to put it into words. I felt if I didn't tell him I would explode. NO KISS GOODNIGHT followed, and after I had released the snake, I kinda threw myself out of the car and up the front steps of the house. I spent a night of fitful sleep, and kept repeating in my head what I had done. I wished to re-live that last mioment in his car to take back those words I had released.

I called him the next day (Easter Sunday) to talk, kind of apologise for leaving abruptly. I told him I haven't dated anyone since the man with whom I became HIV positive, and that I was afraid of being rejected because of the virus. I didn't want him to like or dislike me because of my HIV, I wanted to be liked or disliked for myself. You know how sometimes one man dumps another in that polite way, almost so that you're not exactly sure what happened? Like they start by telling their personal problems-'I'm just coming off a relationship that I'm still grieving etc.'-- you get the drift--and they make it sound like it's not you although everyone knows that if you really like someone all that bullshit flies out the window. During our phone conversation, I think that's what happened. The funny part is that I think he was planning on dumping me and my admission (if that's the word I need to use) was pointless. I felt really annoyed with that, there's me releasing unwanted vermin into a potential relationship, only to discover that the exterminators have already been.

On the positive side we did talk about going out again but somehow I just don't think it's going to happen. I think it was his attempt at being 'nice'. We'll see. I'll tell you one thing. I'm not making the next telephone call.

YOU'RE NOT ALONE

Loneliness, is the MOST difficult thing I have ever had to deal with. I have been in a 13-year relationship, which was mostly monogamous. I truly loved my partner more than anyone could have imagined (and unfortunately for me, still do). In many ways we were "icons" in our community and were often told so. I liked to think that we helped to present a positive role model for other gay men

I was most likely infected with the virus before we met in 1982. We both decided to get tested in 1988. I tested HIV positive, and my partner tested negative. With his encouragement and emotional support I went on living and enjoying life with the knowledge of his support, love and encouragement.

However by 1994 my t-cells were so few, I had named them all. It didn't take too many names. Then in early 1995 with work-related stress and failing health, I made the very difficult decision to take disability retirement. About the time I was agonising about my future and quitting work, my partner was going through changes that he would not (could not?) share with me. I found it difficult to get close to him. We both needed support which neither one of us was able to supply. This added more stress, but he assured me that his problems were not a threat to our relationship. I believed him.

It was while we were overseas on what I thought would be the last BIG trip, that he ended our relationship. Talk about devastation! What was supposed to have been our trip of a lifetime turned into a nightmare. I had no idea that our relationship was about to end. I knew that things were difficult and that we were going through a rough patch, but I thought it would all come good again.

Since we have parted, I have so missed the touch, the caresses and loving companionship of a partner. I find it very difficult to live and particularly sleep alone. I thought, too that my life span was limited and that I wouldn't have to worry about being alone for too long.

Then the amazing results of the new drugs started and now I can see my life will go on. But I miss dreaming and making plans together, simple evenings at home, entertaining friends, going on holidays together and making love. A lot of those things you may take for granted when you are with somebody for 13 years. So now I have to start again!

I find it extremely difficult to get back into the dating scene after such a long absence. I didn't enjoy the whole thing 15 years ago and feel the same now. Being older now is an obstacle. Too much emphasis is placed on youth. I also find so much insincerity from men. What people say they want and what they do are too often opposites. Standing about looking interesting in a bar or club, is something I have always hated, especially with a purpose. That coupled with dealing with your HIV status makes the whole thing seem very difficult. Is it worth the effort?

This void in my life was something I could not have imagined. While I do have lots of loving friends, it just is not the same, as that special somebody – a partner. I know I will begin to approach this phase of my life with more optimism, and friends have been supportive. I have been dismissive of others in similar situations, but now I feel at least some of the pain others are feeling being in this unenviable spot. I want to extend my support, encouragement and loving thoughts to anyone who feels such loneliness. In this you are not alone.

THE LAZARUS EFFECT

Is it too early to celebrate? Is it too soon to go back to our lives before HIV? The new optimism is keeping most of us going and relatively healthy at this point and that is something to celebrate, until the cure or even the next great breakthrough. Let's hope that by being alive today we are able to hold off the virus until more effective treatments become established, helping to restore our immune systems, and eventually eradicate this virus.

The difficulty with been presented with a future, that seemed limited some months ago, is a daunting prospect. This is not to seem ungrateful, just a little hesitant, to take up our beds and walk - just yet. The constant question is how long will this last? Also this new optimism is not working for everyone. Being well, gaining strength and health, while others are becoming ill, is difficult to contend with. The feeling of guilt at celebrating your well being in the face of illness allows for a very uncomfortable contradiction. The hesitancy to re-start a career that could once again be curtailed by another illness, is a difficult choice to make.

Life has changed a lot for all of us, and the options we once had are no longer available. Some of us have lost our friends, careers and livelihoods, and the prospect of rebuilding a future with such poor starting materials seems exhaustive. The soft option of remaining in limbo looks preferable to breaking new and often untried ground. To start afresh with the label of seropositivity can be difficult. When you have moved forward in the area of HIV & AIDS, you are often confronted with people who are still entrenched in 'old' prejudices and hatreds more associated with the early 80s than the late 90s. Bringing these people up to speed with HIV in 1998, sometimes doesn't justify the effort. The media are slow to print the positive side of living with HIV, because it lacks sensation and impact. So while we are going forward with new hope, this is often marginalised to groups of positive people. **The more HIV is 'normalised' over the coming years the better it will be for positive people** and will help to consolidate education and prevention programmes.

In the face of our celebration let us not lower our protective and preventative aims, certain communities who don't fully understand what is really happening, and while seeing some of their hopes fulfilled maybe letting down their guard. There is finally increased hope of a cure in sight and some people (especially the young or those who do not fully comprehend the information over-load) believe that promiscuity and unprotected sex can once again be alright. The young, especially, feel immortal and believe that the scientific communities are close enough to a cure that the blanket period of infection without symptoms (10 or so years) will buy them time before the cure.

The vulnerable and uninformed sections of Irish society should know that living with this disease still is not fun, easy or hopeful in any way. There is a lot of guilt felt by many of us still alive when our friends are dead. Sexual relationships are cautious and not carefree anymore. Positive people are expected to sustain the full responsibility for prevention when entering any form of sexual relation. **The burden of fear and restraint in a positive/non-positive relationship is difficult to overcome.** The non-positive partner alternates between the extremes of patronising or superior behaviour. The positive partner usually needs neither. The balance can be struck with a lot of work by both partners, but this demands a loving relationship of greater tenacity, and depth than that normally required. So, in spite of a cure or no cure, we are still living a much different life than non-positive people.

This 'new information' must be taken up by existing HIV/AIDS organisations. The focus on prevention and education must continue. But the basic ethos must take heed of the new lives positive people are living. And we as positive people must voice our needs. If we do not, we cannot complain, when they are unfulfilled.

We still do not have to pretend that living with HIV & AIDS is fun or fulfilling to those who ingest the hype without question, but we can become part of the changes, which must take place with our full and continual participation.

John Williams

FEVER Brian Riordan

I feel it begin
a thrill at the base of spine
a sudden shiver of fear, a walker on
my grave

My bones regroup
My teeth can't stay apart
My head beats like the sun

The sheets are like heavy metal
They hammer me to the bed
Then a rain cloud storms into the
bedclothes

Doctors in cool cotton whites
Suitable for the Congo, glide by in
soft shoes
Nurses flutter like white paper

I'm an explorer on a glacier
Then on a boat in a malarial jungle
With my head drumming

Hourly I travel from tropic to arctic
Elevatoring from Equator to Pole

Finally
I'm high voltage
sparks shoot out from my edges
signs warn of the danger
I am not to be touched

I could power Manhattan.

Brian Riordan died in New York City on September 5, 1997, at age 45.

a poem for positive thinkers

Barbara Mahone (1944-)

for the first time
i be thinkin
like i be dealin
an i be seein stuff
i didn't never see before.

like i see me
an i see
doin your own thing
is not defiance.
it ain't got nothin to do with protest.
i can be me
an it don't have to mean
that i got to show somebody somehow
that i'm better than they think.

cause

for the first time
i be thinkin
like i be dealin
which means i can just be me.

Barbara Mahone lives in Chicago, and writes of her poetry, "I write poems for my children and their children. Because I want them to know who Mama was. Mama being Black and self-conscious about her own maturation - from a child of ignorant beauty to an adult who painfully understands. It's intimate stuff, of a very fragile nature. But it's history and legend that can be built upon."

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Pozitive Partners James

Reframe yourself in a positive light. Pozzies make great life partners, because we are most likely to know all the rules on protected sex, we are more willing to make a loving commitment, and because we need love too. Oh! yes and most of us are house trained and have life assurance policies.

Cynical or what!!

Pozitive and Negative *John*

I would like to know if any of you have a negative-positive relationship, and if so, how does one get through all the ups and downs that come with this disease? I am not sure I want to be in such a relationship (I know it won't happen with this man), but don't want to automatically disqualify negative men.

Please help!

The Morning after Robert

The next day we were having coffee with a mutual friend, and he let it slip I have AIDS. We spent the rest of the day together and when bedtime came around, he left. I know it was because of the HIV issue, and I don't blame him for leaving.

NEGATIVES

I don't want to exclude negatives, but find it almost impossible to date them because of the HIV thing. I'm frankly tired of trying to educate people about safer sex and casual contact and condoms who are still so afraid of getting HIV that they hardly want to touch you. Or else they're afraid you're going to get sick tomorrow so they can't get emotionally involved.

LONG TERM PARTNERS

As soon as you start becoming independent and fully responsible for your own happiness, you have men flocking after you and laying at your feet wanting to make a life with you. (we wish).

I was very lucky with my partner Jon, as all we ever wanted was a family away from the Gay Life so many need to live near, and make our friends out of people, of any sex and any sexual orientation.

It worked for us and I know it has worked for others. At the time, I did not want a partner or a lover, I wanted to wait another year or two, but he just kept falling in front of my feet and I really could not seem to shake him. Well, that was 21 years ago and the rest is history. Don't kid yourself though, we had quite the struggle to stay together and quite the struggle still with living with this disease even though Jon is negative. He still lives it every day and each time I go and return to the doctor to report on my status.

MAGNETIC COUPLES

Its 10 years (13 if you count courting) we've been together. It was me telling Jim I was HIV+ that he says made him finally realize how much I meant to him.

We're going to get hitched this summer in a church! Never thought that would happen to me.

I wonder if I can get away with wearing white.

QUESTIONS ASKED BY ONE POSITIVE GAY MAN TO ANOTHER.

"Why is there such a premium placed in gay culture on *bouncing back,* being resilient, moving on, etc., etc.? Why not feel the full force of the pain for once?"

My own answer is that our culture has become one in which the picture of "mental health" is a person who is smiling all the time. The person who feels pain, grief, sadness, confusion or stress spoils the picture and makes it uncomfortable for others to pretend they are happy all the time. We over prescribe for ourselves in an attempt to provide a "quick fix" for everything. Experiencing "healthy stress" might lead us to make positive changes in our lives if we "listened" to it rather than "swallowing" it. We have developed a culture of avoidance and denial.

I'm sure we all know what it feels like when friends or relatives say (all the time for many of us), "Oh, they're coming up with so many new drugs for AIDS. There'll be a cure in no time. This is not just optimism, it's a way for them not to have to contend with our experience of living with HIV/AIDS -- to dismiss our reality and avoid pain. And our culture seems to do almost everything it can to support this "denial" -- the happy-ending is constantly sought, and if not applicable, is forced to fit the situation, no matter how inappropriate. "You are all right now, aren't you", is said to me so often, that I begin to say "Yes". While we are willed into being well, with the best of intentions, the fact that we dealing with the daily rigours of illness and loss is ignored.

Why are we so quick to brush off our pain as gay men? What I mean by that is, when the grief of a relationship ending hits, why do I grieve only for a few days, then move on as though nothing ever happened, that the relationship, however brief, had no real impact? Why do my friends and myself trivialise what has happened? Why do I not own the grief?

We live in a society, which contends that gay relationships are of little 'real' value, and that they don't last. As gay men we validate those deeply held myths, by trivialising relationships. The avoidance rather than the experience of pain is thought preferable. Some of us, as gay men have experienced so much loss that our threshold of grief has changed. I know that's true for me. I can look back at the death of each friend I have lost along the way and see a diminishing emotional response. For years, I haven't been able to cry at all about anything. (This has changed recently, and I consider it a very good sign and am very grateful for it.) The other side of this coin is that we lose the ability to have real hope for the future of anything, including relationships, and therefore don't invest them with the hopes, dreams and expectations we might have done before AIDS. So naturally, if they end, our response would not be the same as if we had seen them as life-long commitments with a view that life would last 70 or 80 years. I know for myself that all my experience with AIDS has had a terrible numbing effect, almost killing hope (which I've come to see as a basic human need), and this has been one of the effects I've been fighting to overcome lately. With good results.

A POSITIVE APPROACH

A discreet but advantageous spot in the bar, somewhere in Dublin. It's raining - but lightly, and the bar is filling up with slightly damp men. The weekend is beginning and the damp start doesn't seem to bode well for the rest of the night. I re-arrange my face, trying to overcome boredom with reasonable interest and hoping to avoid desperate. A trip to the toilet, and because of stage fright I must wait for an available cubicle. This always makes me feel like I am cruising the loo. I feel I have to point at the cubicle with an 'I-am-waiting-for-that' expression. The main purpose is to reaffirm that I am not looking like the back of a no. 64. Re-arrange a number of strategic bits of clothing and once more unto the breach.

My discreet position has been occupied, so I re-locate to a position nearby but not too close. The new tenant I recognised from a far point down the bar, I thought how he had travelled a lot to reach my spot. All I could make out from his original position was that he was tall and dark. I was now standing in front of him and without being obvious I could not turn to see what he looked like. He smelled good, as the scent of his after-shave came from behind me.

Various people passed and went, the music continued apace and a group of men in front of me shuffled rhythmically to the throb. Conversations were snatched and unfinished. I tried to give out a good appearance to impress my neighbour, as my curiosity increased. He then moved beside me and I glanced across as he looked away and got a fair estimate of his appearance. A man a little older than me, and seemingly at ease with himself and his surroundings. A faint air of curious boredom about him. I looked straight ahead and followed the antics of the group in front of me. I nodded to a vague friend. We had been nodding to each other for years. Why break the habit now?

The awareness of my neighbour's curiosity became a little more apparent and I began to clench a little. A conversation was imminent. Its that instant of indecisiveness when do I want to bother versus I want to. That moment of supreme sexual decision when a cup of tea and the tele is balanced against meeting that (special?) stranger. You await that sign when you hope an incandescent digit would come from the nicotined ceiling and point, saying 'it's you'. I wish that same radiant finger would point out the men here who were HIV positive. Where they would all have little glows over their heads so I could only choose them. It would just be much easier.

"It's busy for a Friday!" came the voice beside me. "I don't know - is it?" was my rather offhand reply. I didn't mean to sound offhand. It was a reflex reaction. I admire people who break the ice. I envy that courage and enterprise. I long to do it and never make the break. The voice was owned by the tall, dark neighbour. Not deterred by my off handedness he smiled and that began a warm conversation which was shouted over the music for the next hour. The closing time for the bar approached and we both hinted at coffee and were aware of the sexual euphemism. This man was not from Dublin; he had a candid approach, which was refreshing from the guarded scepticism that is usually used. As he was a little older it was good to allow him to take the initiative and make a decision for the coffee venue, with a strong hint that there was going to be life after caffeine.

We both left the bar together with a certain smugness that comes from leaving as a pair rather than alone and the faint excitement of the possibilities that may lie ahead. With a certain amount of overestimated hope we broke through the door of the bar with a little glow above each of us.

David

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POZ IRELAND

are HIV positive people working to improve access to and information about HIV and AIDS. **POZ IRELAND reports** on experimental and standard treatments, especially those available now. We interview health professionals, and persons with HIV or AIDS, we also collect information from meetings and conferences, medical journals, and computer databases around the world.

POZ IRELAND

does not advocate particular treatments but seeks to increase the options available. **POZ IRELAND's** guiding principle is that all people affected by HIV in Ireland can understand enough about HIV itself and about HIV treatments to make informed decisions.

POZ IRELAND The Basic Message

Get Tested - Anonymously

If you test positive, **get informed,** get a good doctor who will give you a full immune health workup.
Get baseline CD4 counts and viral load tests done and repeat every 3 months. **Watch your counts.**

If your CD4 count is already below 500 and your Viral Load is above 5,000, or if your viral load is 30,000 - 50,000 regardless of other factors, consider carefully combination treatment options.

Learn about drug interactions.

Consider preventive therapies against PCP if your CD4 count continues to fall below 200.

Learn about preventive therapies for MAC and CMV infections.

You are not alone, GPI is here to help -
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