



Re-infection

Research so far suggests that re-infection with another strain of HIV is probably not very common, although no one can be certain of this. Research also suggests that re-infection is probably more likely to happen in the first three years after you first got HIV, if you are not on HIV treatment (HAART), or if you are taking a treatment break.

If you are re-infected with a drug resistant strain of HIV it could mean that your HIV treatment options are reduced, and that finding a combination of drugs that will be able to reduce your viral load to an undetectable level could be much harder.

If you are re-infected with a more aggressive strain of HIV this could cause a sudden rise in your viral load and drop in your CD4 count, putting you at more risk of an HIV-related illness.

If you are concerned about re-infection you can reduce the risk by using a condom when you fuck.

Re-infection: getting another strain of HIV as well as the one you already have

Further Information

The information in this leaflet and further information about co-infection and re-infection is available online at www.metromate.org.uk/doubletrouble

If you are concerned about any issues raised in this leaflet you can speak to your doctor or a health adviser at your HIV clinic. Alternatively, for advice and information about HIV and AIDS, you can speak to someone in confidence by calling **THT Direct** on **0845 1221 200**.

Free sexual health check-ups are available through your HIV or GUM clinic. To find a clinic near you visit: www.metromate.org.uk/clinics

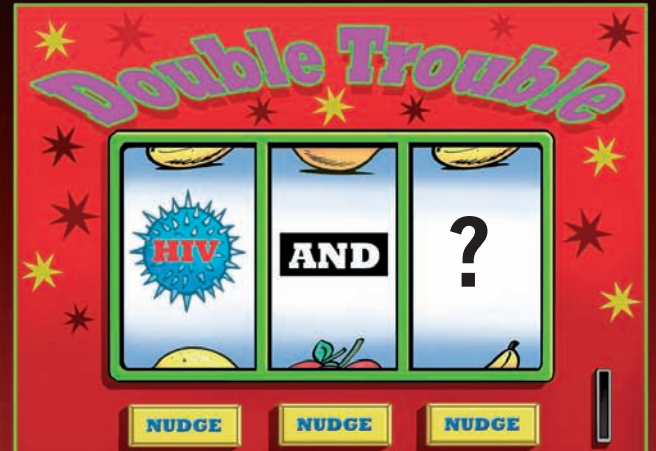
Reliable and accurate information about all aspects of living with HIV is available from NAM. You can pick up NAM's free factsheets and information booklets from your HIV clinic, or download the information from their website, Aidsmap: www.aidsmap.com



GMFA projects are developed by positive and negative volunteers. To volunteer or donate call 020 7738 6872 or go to www.gmfa.org.uk Charity number 1076854.

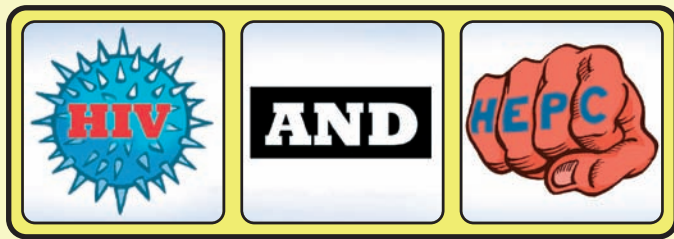
Information in this leaflet accurate as of January 2006

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Co-infection and Re-infection

Know the stakes before
you decide to gamble



Hepatitis C (Hep C)

Hep C is a virus that attacks the liver. You can get Hep C by: being fisted by a man with Hep C who has cuts or sores on his hand, or by a man who has just fisted another man with Hep C; using a dildo or other sex toy that has just been in a man with Hep C; sharing lube with a man with Hep C, as lube can become tainted with blood; using a drug snorting straw, banknote or bullet that has been up the nose of someone with Hep C. It's even possible to get Hep C by fucking bareback with a man with Hep C.

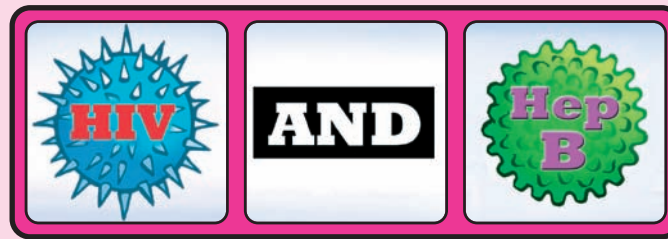
It is estimated that 4-8% of gay men have Hep C. However, up to 90% of people with Hep C do not know they have it. There is no vaccine available to protect you against Hep C.

About 85% of people who get Hep C will not be able to get rid of it without treatment. Hep C treatment can cause side effects such as high temperature, joint pain, weight loss, nausea and depression. It can also reduce your HIV treatment options.

Only 20-50% of people who have HIV and Hep C will respond to Hep C treatment. The rest will go on to develop chronic (long-term) Hep C infection putting them at a high risk of developing liver disease and liver failure (which would be fatal without a liver transplant). People with HIV can progress to this stage much faster than people without HIV.

Having Hep C can also mean that your HIV treatment may not be as effective as it should. The damage Hep C does to your liver could also mean that you have a greater risk of side effects from your HIV drugs.

You can reduce the risk of getting Hep C by: making sure the man fisting you is wearing an unused latex glove; using a new condom on a dildo if it's been used in someone else; using your own drug snorting straw, banknote or bullet; using a condom when you fuck.



Hepatitis B (Hep B)

Hep B is also a virus that attacks the liver. You can get Hep B in a similar way to HIV – by fucking bareback and sucking cock. Hep B, however, is much more infectious than HIV. At some London HIV clinics, up to 6% of gay men with HIV also have Hep B.

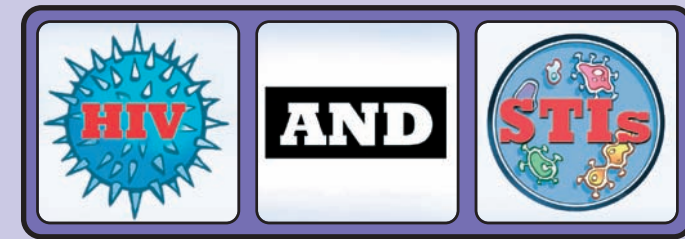
About a third of people with HIV who get Hep B will not be able to get rid of it without treatment.

Of this third, only 20-40% of people will respond to treatment. Those who don't respond to treatment will go on to develop chronic (long-term) Hep B infection.

As with Hep C, people with chronic Hep B infection are at a high risk of developing liver disease and even liver failure. Hep B treatment can cause side effects such as high temperature, joint pain, weight loss, nausea and depression. The damage Hep B does to your liver could also mean that you have a greater risk of side effects from your HIV drugs. Your HIV treatment options could also be reduced.

There is a vaccine available that can protect you against getting Hep B. The vaccine is available free from your HIV or GUM clinic and is the best way to protect yourself, although the vaccine doesn't work for everyone. The vaccine works better if your CD4 count is high and your viral load is low. Also, immunity after vaccination may not last for life, so you will probably need boosters every so often. Ask at your HIV or GUM clinic when you go for your jab.

If you are not vaccinated against Hep B, you can reduce the risk by fucking with condoms or not getting cum up your arse or in your mouth.



Other Sexually Transmitted Infections (STIs)

STIs such as syphilis, gonorrhoea, herpes, genital and anal warts, chlamydia or LGV (a type of chlamydia) can be more severe, progress faster and be harder to treat if you are HIV positive and especially if your CD4 count is low. Some of these infections can lead to more serious complications if left untreated.

For example, having a low CD4 count means that attacks of herpes can be more frequent, more severe and last longer. LGV can progress much faster and cause extreme swelling and ulceration of the genitals. Syphilis can be harder to cure, more severe and progress more quickly.

As having some STIs can make it easier for someone to get HIV, it is probable that having one of these STIs could make you more susceptible to re-infection (which is covered later in this leaflet). Some STIs can also increase your HIV viral load, making it more likely that you could pass on HIV to sexual partners.

Condoms can provide protection against some STIs but not against all of them. However, most STIs are much easier to treat if they are diagnosed at an early stage.

Some STIs show no symptoms, so the best way to be sure you haven't picked up an STI is to have regular free sexual health check-ups at your HIV or GUM clinic.

Co-infection: having another infection as well as HIV, such as Hepatitis or another STI