# The WIHS Woman

### The Connie Wofsy Women's HIV Study

### The Flu and You

Questions and Answers about the Flu for HIV+ and HIV- Women

by Edward L. Machtinger, MD Director, Women's HIV Program at UCSF

### What is the flu?

The flu is an infection caused by the influenza virus. This virus is easily passed from person to person through the air after infected people cough or sneeze. You can even get the flu just by touching something, like a handrail on a bus that has been contaminated by someone who has the flu. The influenza virus enters the body through the nose or mouth. It then takes between one and four days to develop symptoms. Someone with the flu can be infectious to others from the day before they develop symptoms until seven days afterward the symptoms go away.

The flu season typically lasts from November through March. During flu season, getting the flu is really common: between 10 and 20 percent of Americans will come down with the flu during these months.

Most people get better from the flu after 1-2 weeks without any medical treatment. However, for people with chronic illnesses, such as HIV, heart or lung disease, diabetes, and others, and for those over 65 years old, the flu can be much more severe and even lifethreatening.

# How can I tell the difference between the flu and a common cold?

A lot of people describe any illness that causes a runny nose, cough, or sore throat as the flu. However, unlike your average cold, the flu is usually much more severe and comes with a high fever, headaches and body aches, and severe exhaustion. Most people can keep going with a regular cold; the flu tends to really knock you down. If the diagnosis is confusing, your doctor can easily test you for the flu by sending a small sample of the fluid in your nose to the lab.

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# Is the flu more dangerous for HIV+ women?

Yes. People with HIV/AIDS are at increased risk for getting serious flu-related complications, especially pneumonias. Symptoms of the flu in HIV+ people tend to be worse, last longer, and are more likely to result in hospitalization and even death, compared to HIVpeople

### Should I get the flu shot?

Because influenza can result in serious illness, all people with chronic diseases or who are over 65 should definitely get the vaccine. Also, anyone living in a long-term care facility, such as a drug treatment program, should receive the vaccine. This includes all HIV+ women. Healthy people under 65 generally don't need the vaccine because the flu is not as dangerous to them.

The vaccine takes 2 weeks for protection to develop. It helps prevent getting the flu and, if you do get it, the vaccine has been shown to lessen the serious complications.

The only people who can't get the shot are those who are severely allergic to eggs or who have had Guillain-Barre syndrome after receiving a flu vaccine in the past. There is a small risk that you will feel a little sick from the vaccine (nowhere near as sick as the flu) and that your viral load will go up a little for a few weeks. But these risks have not been proven to be dangerous in any way and are much less risky then actually getting the flu.

### Can I use the new flu nasal mist (FluMist) instead of the shot?

HIV+ women CANNOT use FluMist because it actually contains a weakened form of the live influenza virus. It is thus dangerous to people with HIV. FluMist is also not recommended for HIV- women who have other chronic illnesses or who are over 50. This means, that for most people, FluMist will not be the vaccine to get. For all others, ask your doctor if this vaccine is right for you.

# *Is there anything else I can do to prevent getting the flu?*

If you have been, or know you will be, in contact with someone diagnosed with the flu, such as someone you live with, there are medicines you can take for 7 days to help prevent getting the flu. The medicines help prevent getting the flu whether you have received the vaccination or not. Tell your doctor about your situation and together you will decide if you need the extra pills.

You can also prevent getting the flu by avoiding contact with sick people during flu season and by washing your hands after you touch things in public.

# What to do if you think you have the flu?

If you think that you may have the flu, tell your doctor ASAP. There are medicines that you can take to help you get better faster and avoid flu-related complications, but they need be started within 48-hours after you get sick to be maximally effective.



#### (Continued from page 2) What's the deal with the bird flu?

Bird flu or avian influenza, has been in the news a lot recently but has not yet infected anybody in the USA. So far, it only has infected a small group of people in other countries who work closely with live birds, like ducks. We'll let you know right away if anything changes and help you get the proper medications if it ever becomes necessary.

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### Menopause

### by Cheryl Conover

The most important thing to remember about menopause is that it is a normal part of aging. The average age that women experience menopause is 51. Menopause is simply the ending of menstruation. Your official menopause is the actual date of your last menstrual period. Although you may have erratic periods, and long spans of time without any periods during peri-menopause, your menopause is the date of your official last period. So if you don't have any periods for 10 months and then have a period, you have not reached your official menopause date yet. You must be free of periods for one full year to be in menopause. Any bleeding after that is considered abnormal.

Menopause is considered "natural" when it occurs after age 40. It is gradual and begins with peri-menopause, which starts several years before menopause and can cause symptoms. This period usually lasts from 2 years before your official last period to 2 years after. Your menstrual cycle can be erratic and you may experience hot flashes and/or vaginal dryness. Post-menopause is the period after menopause to the rest of your life. Menopause that happens before age 40 is considered premature menopause. Some things that can cause premature menopause include having a hysterectomy or chemotherapy.

Symptoms of menopause are caused by a decrease in estrogen. Menstrual cycles can be longer or shorter with long periods of not having a period at all. Some other common symptoms of menopause include breast tenderness, worsening of premenstrual symptoms, loss of interest in sex, fatigue, mood swings, insomnia, and bladder control problems. It is important to remember that menopause affects every woman differently. You may have some of the above symptoms or you may not have any symptoms at all.

What you can do: keep track of your periods as they become irregular. Keep track of hot flashes. Your doctor can tell what stage of menopause you are in by performing 2 simple tests. Your doctor can perform a FSH (follicle stimulating hormone) blood test and/or take a pap-like smear of your vagina and analyze it to look for vaginal atrophy, which is a drying out and thinning of the vaginal walls. Whatever stage of menopause you may be experiencing remember to relax because menopause is a natural part of life, and many women are going through the exact same thing!



#### The WIHS Woman

### CAB CORNER



### SF WIHS Participant Reports Back on Meeting in Pittsburgh, PA

### by Michelle Barry

San Francisco National Community Advisory Board (NCAB) representative, Sheila Bryant, attended the biannual NCAB and Executive Committee (EC) meetings, which were held in Pittsburgh, Pennsylvania at the end of October. At the EC meeting, Sheila learned about proposed study changes and current study results from the WIHS. She mentioned a new questionnaire that will be administered to participants that will inquire about participants' opinions of the health care system. These surveys will also address the level of sensitivity, honesty, and respect participants feel from their health care providers. The NCAB representatives agreed that this evaluation would be a helpful addition to the study. After the meetings, Sheila attended a dinner hosted by the Multicenter AIDS Cohort Study (MACS), a study that works in partnership with the WIHS. The dinner was held at the Frick Fine Arts Building on the University of Pittsburgh campus. Sheila had the opportunity to meet scientists and staff from different WIHS and MACS sites, while enjoying a rich exhibit of American culture. She especially enjoyed the exhibit on African American art.

At the NCAB meeting, CAB members from all of the WIHS sites across the nation gathered to discuss topics for future NCAB conference calls and to plan future NCAB meetings. They suggested gynecological topics to discuss with Dr. Stewart Massad, an OB/GYN doctor from the Chicago WIHS site, on their upcoming conference call in January 2006. Sheila will also be participating in two other conference calls in January, one focusing on Hepatitis and the other covering various topics on the science behind the WIHS (study goals, questions, procedures, results, etc.). The NCAB leadership is periodically rotated among the NCAB members, and Sheila is now serving as co-chairperson along with Amirah Waleed from the Bronx WIHS center.

Each year, the NCAB members attend a conference of choice. This year, they will attend "Voices 2006, Strengthening Our Partnerships" (sponsored by the AIDS Alliance for Children, Youth, and Families) in Arlington, Virginia, which will occur a week before the next NCAB/EC Meeting in May in Washington, D.C. Sheila plans to attend both conferences and will report back the information learned at both meetings in the summer newsletter.

#### WIHS Participants Get a Chance to Speak with an HPV expert, Dr. Joel Palefsky

#### by Michelle Barry

In early October, we had our quarterly CAB luncheon meeting at WORLD in downtown Oakland. At this meeting, Dr. Joel Palefsky, discussed human papillomavirus (HPV) infection in women. You may recognize Dr. Palefsky's name, since he heads the WIHS anal HPV study (also known as the "tushie study"). HPV is a virus that can infect genital areas and is initially detected in an abnormal Pap smear result. Although there are many strains of HPV that the body can clear up without treatment, a few strains may cause genital warts or even cancer. He talked about the risks of infection, areas on the body that

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can be infected, the procedures necessary for diagnosing HPV, and treatment options. WIHS participants were able to get a closer look at how Pap smear results are analyzed and what clinicians are looking for in these results. They also asked many insightful questions and had the opportunity to speak one-on-one with Dr. Palefsky after his talk. Many of the participants found his presentation very helpful with improving their understanding of the importance of Pap smears and the meaning of their Pap results.



### 2005 WIHS Holiday Party Pictures

This year, over 50 participants and their guests attended the festive event!











#### The WIHS Woman



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## University of California, San Francisco

Veterans Affairs Medical Center, San Francisco

# We are looking for HIV-negative women for a research study on HIV Protease Inhibitors

### Participants will be required to:

- Take one dose of a FDA-approved HIV Protease Inhibitor drug and placebo.
- Spend two nights on two separate admissions at the Special Diagnostic and Treatment Unit at the San Francisco Veterans Affairs Medical Center.
- Undergo two sets of studies of metabolism including oral glucose tolerance testing to study diabetes and CT scan of the abdomen and whole body DEXA to measure fat in the body.

### <u>Criteria:</u>

- Age 21-72 and HIV negative uninfected
- Does not have diabetes or heart disease

Volunteers will be compensated \$500 Transportation can be reimbursed For information, please call:

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