Human immunodeficiency virus (HIV) is a virus that can weaken the immune system to the point that it is unable to fight off simple infections. HIV is not the same thing as AIDS.

AIDS (acquired immune deficiency syndrome) is the most advanced stage of HIV infection, when the immune system is at its weakest and a person has several specific illnesses. AIDS is now very rare in Australia, as HIV treatments effectively protect the immune system from the virus.

In Australia, HIV is most commonly transmitted through anal or vaginal sex without condoms or other protection methods, such as PrEP (an HIV prevention drug) or ‘undetectable viral load’ (when a person with HIV has very low levels of the virus in their body). It is much less commonly transmitted through sharing needles, syringes and other injecting equipment.

People with HIV who are on treatment and have an undetectable viral load cannot transmit HIV.

For people who do not have HIV, condoms are the easiest way to prevent HIV transmission. For those at greater risk of HIV, PrEP (pre-exposure prophylaxis) is a medication that, when taken daily, is more than 99 per cent effective at preventing HIV.

**How is HIV transmitted?**

Some of the ways HIV is transmitted include:

- anal or vaginal sex without condoms or other protection, such as pre-exposure prophylaxis (PrEP) or undetectable viral load (when a person with HIV is on treatment and has very low levels of HIV in their body)
- sharing any needles, syringes, or other injecting equipment
- from mother to child during pregnancy, childbirth, or breastfeeding when the mother does not know she has HIV, or is not on effective treatment (see HIV and women – having children)
- through tattooing or other procedures that involve unsterile or reused equipment.

HIV cannot be transmitted by ordinary contact like hugging, kissing, shaking hands, sharing items such as cups and cutlery, or through toilets seats, swimming pools, pets, or insects.

People with HIV who are on treatment and have an undetectable viral load cannot transmit HIV. It is perfectly safe
to consume food and drinks prepared by a person with HIV, regardless of whether or not they’re on treatment.

**Preventing HIV**

There are many easy and effective ways to prevent HIV. It is important to find the right prevention method, or combination of methods, that works for you and your sexual partners.

**Condoms**

Using condoms is one of the best ways to prevent HIV. Condoms are widely available, and also prevent other sexually transmissible infections (STIs) like gonorrhoea, chlamydia, and syphilis.

Condoms should be used with water or silicone-based lubricant, as this reduces the chance of the condom breaking and can increase pleasure for sexual partners.

Female, or internal, condoms are also an excellent way to prevent HIV and STIs. Internal condoms can be used for either vaginal or anal sex.

Condoms are available at most pharmacies (chemists), supermarkets, or from your nearest sexual health or family planning clinic.

**Undetectable viral load**

Undetectable viral load is the term used when a person with HIV who is on treatment has very low levels of the virus in their body. When a person’s viral load is undetectable they cannot transmit the virus. For people with HIV, getting on treatment as soon as possible helps protect their health and wellbeing, and helps their viral load become undetectable faster, preventing HIV transmission.

The viral load of most, but not all, people with HIV can become undetectable with treatment. Even if a person doesn’t reach the strict threshold for undetectable viral load, any reduction in their viral load (the amount of virus in their body) can dramatically reduce the risk of HIV transmission.

**PrEP**

PrEP (pre-exposure prophylaxis) is the use of anti-HIV medication to prevent HIV in people who do not have the virus. When taken daily, PrEP is more than 99 per cent effective at preventing HIV. PrEP is available with a prescription from any doctor, for a low monthly payment (known as a co-payment, or ‘co-pay’ – the Pharmaceutical Benefits Scheme pays for the rest) for people with a Medicare card.

For people without a Medicare card, or who cannot afford the co-pay, PrEP can be imported through online pharmacies, or through compassionate access schemes. More information is available from the Victorian HIV Service at the Alfred Hospital.

If you are starting PrEP, you will have an HIV test and full STI test at your first appointment. It is recommended that you then return to your doctor every three months for repeat HIV and STI tests and for a new prescription. If your doctor is unfamiliar with PrEP or what’s involved in prescribing it, they can call the Victorian HIV Service at Alfred Hospital, on (03) 9076 6081.

**PEP**

PEP (post-exposure prophylaxis) is another way to use anti-HIV medication to prevent HIV. Unlike PrEP, PEP is taken after a known or suspected exposure to HIV. PEP is taken for 28 days, and must be started within 72 hours of an exposure to HIV.

Examples of known or suspected exposure to HIV may include sex without a condom with a person whose HIV status you don’t know, or who is HIV-positive and not on treatment, or sharing needles or other injecting equipment.

If you think you have been exposed to HIV, call the PEP hotline at 1800 889 887, or visit [www.getpep.info](http://www.getpep.info) to find betterhealth.vic.gov.au
Safer injecting

Using clean injecting equipment (such as needles and syringes) prevents HIV and other blood-borne viruses, like hepatitis B and hepatitis C. Never share or re-use injecting equipment. This includes all injecting equipment: needles, syringes, spoons, swabs, filters, water, ties, or tourniquets.

Clean injecting equipment is available from needle and syringe program (NSP) sites throughout Victoria, including most pharmacies. Many of these sites can offer more information about HIV and hepatitis, safer injecting, and referrals to doctors.

Regular testing

Regular testing for HIV and other STIs can help find infections earlier, get them treated sooner, and prevent them from being transmitted to others. HIV tests are available from any doctor, with results usually available within ten days. For more information, see the section Testing for HIV, below.

Unreliable risk reduction strategies

Some people use other, unreliable, methods to reduce their risk of HIV. These include:

- serosorting – having sex only with people who have the same HIV status as them
- strategic positioning – where the HIV negative partner penetrates the HIV positive partner (and not the other way around)
- withdrawal – when the ‘insertive’ partner pulls out before ejaculating (coming).

None of these strategies are reliable, and do not reduce risk by much.

In fact, having sex only with people with the same HIV status is extremely risky. A person may think they do not have HIV, but may have been exposed to it since their last test, or may never have been tested at all. Using a combination of proven, reliable strategies – like condoms, PrEP, and undetectable viral load – is the best way to prevent HIV transmission.

Symptoms of HIV infection

Many symptoms of HIV are similar to those for a number of other illnesses. However, not everyone shows symptoms when they contract HIV.

If you think you have been exposed to HIV, and you have any of the signs below (or a combination of them), consult your doctor. Initial HIV symptoms usually occur between one and three weeks after exposure to HIV.

Symptoms of HIV can include:

- **flu-like symptoms**
- extreme and constant tiredness
- fevers, chills, and night sweats
- rapid weight loss for no known reason
- swollen lymph glands in the neck, underarm, or groin area
- continuous coughing or a dry cough
- diarrhoea
- decreased appetite.

Testing for HIV

Getting an HIV test is easy and convenient. Tests for HIV and other STIs are available from your regular doctor, or from your local sexual and reproductive health clinic.
Regular testing for HIV helps identify an infection earlier, which enables you to get on treatment sooner. Not only does this protect your own health and wellbeing, but it also helps prevent the transmission of HIV to other people.

How often you should get tested depends on your personal practices, risk behaviours, and how often you engage in them. For most people, it is recommended to get a full sexual health test at least once per year, including tests for HIV, chlamydia, gonorrhea, and syphilis. Even people who always use condoms should get tested annually, as condoms don’t provide 100 per cent protection against HIV and STIs.

People at greater risk of HIV should test more often. Gay, bisexual, and other men who have sex with men should get tested every three months, or four times per year. This may vary depending on how many sexual partners you have during the year, so talk with your doctor or sexual health specialist for advice. Your doctor can also provide information about how to reduce your risk for HIV and other STIs.

**Blood tests for HIV**

Blood tests are the most common and most reliable tests for HIV. There is a short period of time between exposure to HIV and the ability for tests to detect HIV or its antibodies. This is often referred to as the 'window period,’ and is between two and 12 weeks. Most tests used in Australia can detect HIV as early as two to four weeks after infection.

If your blood test shows that HIV or its antibodies are present, you are infected with HIV (also known as being 'HIV-positive’). If you have no antibodies in your blood (HIV-negative), it is possible you are not infected with HIV. But a negative result might also mean you are in the window period, so you might need a follow-up blood test to make sure.

Unlike rapid tests (see below), blood tests for HIV are covered by Medicare, which means your doctor can order the test free of charge for you. If you are not eligible for Medicare, you may also be able to cover some of the testing costs through health insurance cover.

**Rapid tests for HIV**

Rapid HIV tests are a convenient tool for people at greater risk of HIV who need to test more frequently. The test involves taking a drop of blood from a finger prick, and can provide reliable results in about 20 minutes. For most people, however, standard blood tests are the best choice for regular testing.

Rapid tests aren’t as reliable as blood tests, and have a longer window period. For this reason, your doctor should give you a blood test at the same time to ensure the result is accurate.

In Australia, rapid HIV tests are not currently subsidised under Medicare. A limited number of doctors and other health providers may offer rapid testing for a small fee.

In Victoria, **Thorne Harbour Health** (formerly the Victorian AIDS Council) runs a free rapid HIV testing service called **PRONTO!**. PRONTO! is a peer-based service site for people at high risk for HIV, primarily gay, bisexual, and other men who have sex with men.

**Getting your HIV test results**

Most HIV test results are available within 10 days.

A positive result can lead to feelings of shock, anger, distress, anxiety, and depression. It is a legal requirement for services that offer HIV testing to also offer counselling both before and after testing.

Before you are tested, talk with your doctor, nurse, or peer tester about your level of risk, the likelihood that the result may be positive, and about what a positive test may mean for you.

Post-test counselling is also important, regardless of the outcome. If the test is positive, counselling can provide emotional support, further information about living with HIV, and referrals to support services. If the test is negative, counselling can provide education about HIV and how to reduce your HIV risk in the future.
Living Positive Victoria or Positive Women are community organisations that provide support and advocacy for people with HIV, including peer workers who can help you navigate living with HIV.

HIV testing and your rights

Testing for HIV is voluntary and carried out only with your informed consent, except in exceptional circumstances. Before you are tested, you will be provided with information about what is involved in the test, what the results might mean for you, and how to prevent HIV transmission in the future. All people who request an HIV test must receive this information from the test provider.

Under Australian and Victorian law, it is unlawful to discriminate against anyone who has HIV. Test results, as well as the fact that you have been tested at all, are strictly confidential. It is illegal for any information about a person being tested or a person with HIV to be disclosed without their explicit permission.

Let your partners know if you have HIV

If you have just been diagnosed with HIV, it will likely be a difficult time for you. You might still be struggling to come to terms with this diagnosis. During this time, it is important to let any sexual or injecting partners know as soon as possible that they may have been exposed to HIV. You do not have to do this alone. Your doctor or the Department of Health and Human Services Partner Notification Officers can help you through this process and ensure your identity is not revealed.

The Letting your partner know resource contains more information for people newly diagnosed with HIV. You can also get support from Living Positive Victoria or Positive Women. Both groups can provide information, support, and guidance for people living with HIV.

Treatment of HIV

HIV treatments are medications that reduce the amount of virus in a person's body by preventing it from making copies of itself. This is sometimes referred to as ART, or antiretroviral treatment.

ART treatment has transformed HIV into a chronic condition, like high blood pressure or diabetes, and enables people with the virus to live long and healthy lives.

Treatment can reduce the amount of virus in a person's body to such low levels that it is undetectable, which means the person cannot transmit HIV to others. Beginning treatment as soon as possible after your HIV diagnosis makes it more effective, protecting your health and wellbeing, and helping you reach undetectable virus levels sooner.

HIV treatment usually involves taking several different medications that target the virus in different ways. Many of these medications are combined into single tablets, taken once a day, every day, making treatment easier and more convenient. You and your doctor will work together to determine the best treatment for you.

If HIV treatments are not taken properly, the virus can become resistant to a medication, which means that it will not work as well. The treatment may then need to change to a different combination of medications.

There is no cure for HIV yet. Daily treatment is the only way for people with HIV to protect themselves from the virus. Stopping treatment, even for short periods of time, can cause the virus to become resistant to medication, or damage your immune system. It is not recommended that anyone interrupt treatment without talking to their doctor.

The Victorian HIV Service at the Alfred Hospital provides a range of services to people living with HIV, and can provide help with getting on treatment and taking it as prescribed.

Side effects of HIV treatment

People on HIV treatment may experience some side effects, however they tend to be mild. Some of the more
common side effects are:

- tiredness and fatigue
- nausea and digestive discomfort
- diarrhoea
- difficulty sleeping
- headaches
- peripheral neuropathy (problems with the nerves in the legs, such as pain, pins and needles, numbness)
- skin rashes.

If you are taking HIV treatment, see your doctor every three to six months. You need to have regular blood tests to make sure that the treatment is working and that it is not causing serious side effects. It is recommended that you also get tested for STIs and talk to your doctor about your sexual health and overall wellbeing.

**HIV – stigma and discrimination**

HIV can prompt intense feelings in people, regardless of their HIV status. It is sometimes viewed with a sense of unacceptability or disgrace. A person with HIV may feel great shame and despair about their status. An HIV-negative person may be fearful or angry when they discover someone has HIV. The relationship of these feelings to HIV is referred to as stigma.

‘Felt stigma’ (also known as internalised stigma) refers to deep feelings of shame and self-loathing, and the expectation of discrimination. It can have serious negative impacts on the health and wellbeing of people living with HIV by discouraging them from getting tested, receiving support, or taking treatment. It can also lead people to engage in high-risk behaviours that harm their health, and contribute to new HIV infections.

‘Enacted stigma’ is the experience of unfair treatment by others. For people living with HIV this can be in the form of being treated differently and poorly, or through rejection, abuse, or discrimination.

HIV stigma is particularly harmful when it overlaps with other factors that are stigmatised, such as if a person uses drugs, is a sex worker, is trans or gender diverse, just to name a few. This can aggravate and complicate the harms of stigma, and make it more difficult to address.

Reducing stigma requires a joint effort:

- doctors and health care providers working to ensure their services are free from stigma, and support people with HIV to build resilience against it

- people with HIV engaging with organisations like Living Positive Victoria and Positive Women to address their internal stigma, and get the support they need in order to live well with HIV.

If you have experienced stigma or discrimination from a health care provider, and are unable to resolve your complaint with them directly, you can contact the Health Complaints Commissioner (1300 582 113) for assistance in resolving your issue.

**Where to get help**

- Your GP (doctor)
- Your local community health service

- **Family Planning Victoria** – comprehensive sexual and reproductive health services for people of all ages. Tel. 1800 013 952 or (03) 9257 0100

- **Melbourne Sexual Health Centre** Tel. (03) 9341 6200 or 1800 032 017 or TTY (for the hearing impaired) (03) 9347 8619

betterhealth.vic.gov.au
• **Get PEP** If you believe you may have been exposed to HIV. Tel. **1800 889 887**

• **Living Positive Victoria** Tel. **(03) 9863 8733**

• **Positive Women Victoria** Tel. **(03) 9863 8747**

• **Victorian HIV Service, Alfred Health** Tel. **(03) 9076 5436**

• **Positive Living Centre** Tel. **(03) 9863 0444 or 1800 622 795** (for country callers)

• **Multicultural Health and Support Service**, Centre for Culture, Ethnicity and Health Tel. **(03) 9418 9929**

• **Thorne Harbour Health** (formerly Victorian AIDS Council) Tel. **(03) 9865 6700 or 1800 134 840**

• **Equinox Gender Diverse Health Centre** Tel. **(03) 9416 2889**

• **PRONTO!** Tel. **(03) 9416 2889**

• **Ballarat Community Health Sexual Health Clinic** Tel. **(03) 5338 4500**

• **Bendigo Community Health Sexual Health Clinic** Tel. **(03) 5434 4300 Or (03) 5448 1600**

• **Gateway Health Clinic 35**, Wodonga Tel. **(02) 6022 8888 or 1800 657 573**

• **Sunraysia Community Health Services** Tel. **(03) 5022 5444**

• **Barwon Health Sexual Health Clinic** Tel. **(03) 5226 7489**

This page has been produced in consultation with and approved by:
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