

2009

AVI CONFIDENTIAL



April ended with some really nice weather and May looks to be following suit. What a nice change this is from the wind and rain of earlier this spring!!

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*We have been invited to participate in a new fundraising event and I'm hoping that you'll all come out and support it.*

*The **Bling Festival** is happening Sunday May 31st in Lantzville. This family event is a festival of fine art, fine music, and fine jewelry with partial pro-*

*ceeds from the \$10 admission coming to AIDS Vancouver Island Nanaimo.*

*The event takes place from 2:00 pm to 5:00 pm with door prizes, coffee, tea and cookies as well as face-painting and other events for the kids. I hope to see you there.*

*I have enclosed a card with the address and driving instructions to make it easier for people to find.*

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As I told you last month, this office closes on cheque

day to enable me to attend staff meetings in Campbell River.

Last month, we also closed the day after cheque day to allow me to travel to Port Alberni and meet with clients.

I am hoping that this will be a monthly, and possibly weekly eventually, event from now on and signs will be posted in the drop in as reminders.

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### Reminders:

- May 7 AVIHC HIV care clinic
- May 11 Men's Support Group
- May 18 Closed for Victoria Day
- May 27th Closed for Cheque day
- May 28th Closed for travel
- May 31st Bling Festival

## HIV Care Clinic

The AVI Health Centre is very pleased to announce the opening of our HIV Care Clinic on the first Thursday of each month, starting in May 2009.

We will be providing GP services to people living with HIV who do not have access to a family doctor assisting them with their HIV, and/or may be in need of a referral to

an Infectious Disease specialist.

We have developed our own HIV monthly service as Dr. Brian Conway will no longer be providing specialist services with us.

The HIV service team will consist of the AVI Health Centre physicians: Dr. Keith Phillips, Dr. Mary Winder, Dr. Richard Roe and Fran Falconer

RN. Anita Rosewall, Positive Wellness Counsellor, will also be available for advocacy and counselling.

This is a free service to anyone living with HIV.

Please contact the AVI Health Centre at 250-754-9111 to make an appointment.

## CATIE News - Not so symptom-free after all

If left untreated, HIV infection inevitably degrades the immune system, leading to the development of life-threatening infections—AIDS—about 10 years later. The time between initial HIV infection and the development of AIDS is commonly referred to as the symptom-free, or asymptomatic, period. The reason for this is that during that time life-threatening infections are uncommon. The idea of dividing the stages of HIV disease into these specific periods occurred early in the course of the AIDS pandemic, when the medical focus was on delaying the appearance of severe infections and the always-looming spectre of death.

In 1996, highly active antiretroviral therapy (HAART) became available in high-income countries. As a result, for the first time in the history of AIDS, HIV positive people were able to recover from and resist life-threatening infections. Today, the benefits of HAART are clearly prolonged and so immense that researchers increasingly expect that some HIV positive people may live near-normal life spans.

### Symptoms at all stages

As mentioned earlier, the period between initial HIV infection and AIDS is referred to as the symptom-free, or asymptomatic, period. However, this idea may be changing. Researchers in Norway, South Africa, Taiwan, Kenya and the United States have been surveying HIV positive people about their health status. Their findings suggest that during the so-called asymptomatic period, HIV positive people may have symptoms after all.

### Study details

In total, 1,992 HIV positive people were surveyed. Their average profile was as follows:

- \* 35% female, 65% male
- \* age – 42 years
- \* 55% had been diagnosed with AIDS
- \* 70% were taking anti-HIV medicines
- \* 60% had serious co-existing health conditions

The study team divided participants into three groups based on their CD4+ cell counts, as follows:

- \* 0 to 200 cells
- \* 201 to 350 cells
- \* 351 or more cells

The survey asked questions about participants' health status, particularly about a wide range of symptoms covering physical and mental issues.

### Results

In general, after assessing the number of symptoms reported, there were no significant differences among the three groups of people. This suggests that even at modest or high CD4+ counts, HIV positive people experience symptoms of illness.

Participants who were taking anti-HIV drugs tended to report less-intense symptoms than people who were not taking HAART.

### Symptoms

Commonly reported symptoms included the following:

- \* fatigue
- \* depression
- \* muscle aches
- \* worry
- \* difficulty concentrating

- \* memory loss

For some participants, regardless of CD4+ counts, these symptoms were intense.



1996 HAART became available

Some of the above-listed symptoms could occur as isolated problems or as part of many other health conditions, including but not limited to anxiety, depression and hormonal deficiencies. Although none of the study participants were experiencing life-threatening conditions, even those who had more than 350 CD4+ cells were experiencing symptoms of illness, perhaps unrelated to HIV.

The international study team suggests that doctors and nurses carefully interview their patients about health-related issues regardless of CD4+ counts. In doing so, health care professionals may uncover underlying conditions that are reducing their patients' quality of life, which would allow them to provide relief.

—Sean R. Hosein

### REFERENCES:

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2. Roberts RB, Murray HW, Rubin BY, Masur H. Opportunistic infections and impaired cell-mediated immune responses in patients with the acquired immune deficiency syndrome. *Transactions of the American Clinical and Climatological Association*. 1984;95:40-51.
3. Sabin CA, Phillips AN. Should HIV therapy be started at a CD4 cell count above 350 cells/microl in asymptomatic HIV-1-infected patients? *Current Opinion in Infectious Diseases*. 2009 Apr;22(2):191-7.
4. Willard S, Holzemer WL, Wantland DJ, et al. Does "asymptomatic" mean without symptoms for those living with HIV infection? *AIDS Care*. 2009 Mar;21(3):322-8.

## Campbell promises \$20 million for AIDS

By Rob Shaw, Times Colonist April 24, 2009

Premier Gordon Campbell opened an international HIV/AIDS conference in Vancouver yesterday with a promise of up to \$20 million a year for a pilot program to help hard-to-reach victims of the disease in Prince George and Vancouver's Downtown East Side. The funding is contingent on Campbell's Liberals winning re-election May 12. The premier said the five-year pilot project, which helps increase access to Highly Active Antiretroviral Therapy (HAART), could prevent as many as 173 HIV infections and save around \$64 million in HIV treatment costs.

It's estimated as many as 12,000 people live with HIV in B.C., and 27 per cent are undiagnosed. "Some of us forget that some people don't know the care is even there, so if you give them the care and support and say here's what we can do for you, that's a different approach than we've taken in the past, and by doing it in a place like Prince George as well as in Vancouver, you see two different models and make sure the model generally works before we apply it in

a broader basis," said Campbell. "We expect over 170 lives to be saved."

The money is not new -- Campbell said it comes from a \$4.8-billion, four-year health-care budget increase already announced in February. The \$20-million annual cost is as of the third year of the program, with lesser funding required the first two years.

However, the timing of the announcement, in the middle of an election campaign, means the money will only be allocated if the Liberals are re-elected.

Dr. Julio Montaner, director of the B.C. Centre for Excellence in HIV/AIDS, said he didn't feel accepting the money aligned his organization with Campbell's bid for re-election.

"We've spent the last five years working on this project.

This is not political opportunism -- this is the culmination of a very long process," said Montaner. "People that are not accessing care, they are dying, despite the fact services are available. So we need to bring the services to the people so that we can help them to save their lives."

The premier's address to approximately 800 delegates at the 18th Annual Canadian Conference on HIV/AIDS Research was interrupted by a placard-waving protester who accused Campbell of not helping the homeless. "I want to see you do something about that Mr. Campbell," shouted Chloe Sage, who said she worked for the ANKORS AIDS network outreach society in Nelson. Campbell took the disruption in stride, telling Sage he agreed that providing housing was an important part of helping the homeless. Sage then left the room and parked herself where Campbell was set to do a post-announcement press conference. The premier's staff moved the gathering to a different room.

# What is food borne illness and why does it matter?

Rob T.

Bacteria cause most food borne illness. But it can also be caused by:

- Viruses
- Parasites
- Toxins (or poisons) produced by some bacteria
- Chemicals that may get into food

Although not traditionally considered a food borne illness, allergens (like peanuts) in certain foods may also cause mild to severe reactions in some people.

You cannot see, smell or taste bacteria or other germs that can cause food borne illness. They can multiply to millions in a few short hours at the right temperature.

Symptoms of food borne illness can include:

- Nausea , Vomiting , Diarrhea, Fever , Stomach cramps

It is not always easy to tell if your symptoms have been caused by food. You can start feeling sick anywhere from hours to weeks after the food has been eaten. Most often, people get sick within a couple of days after eating food that has become contaminated. Food borne illnesses are often mild, but sometimes there can be long-term complications and even death.

People most likely to become very sick are: Seniors, young children, pregnant women, people who are already unwell.

If you think you have a food borne illness, visit your doctor and notify your local public health unit right away

## Are some foods riskier than others?

All foods can cause food borne illness if they are not properly handled. However, bacteria can grow better in some foods than others.

Foods that can support the growth of bacteria or other germs are called "potentially hazardous" (or high risk) foods. Be sure to cook these foods to a high enough temperature and for a long enough time. Then keep these foods hot enough until serving them, or store them in the refrigerator or freezer, so that they are out of the danger zone. The danger zone, where bacteria grow rapidly, is between 4°C (40°F) and 60°C (140°F).

Examples of High Risk foods include: Dairy products (e.g. milk, cream, cheese, yogurt, and products containing them such as cream pies and quiches) , Eggs, Meat or meat products, Poultry, Fish and seafood

In contrast, "non-potentially hazardous" (or lower risk) foods generally do not need to be refrigerated (until opened) and tend to be high in sugar, salt or acid and/or low in water content. Many examples of lower risk foods are sold in farmers' markets. They include fresh fruits and vegetables, bread and most baked goods, candies, pickles, honey, jam and preserves, syrups and vinegars. Lower risk foods such as fresh fruits and vegetables can still become contaminated through food handling or production processes. Be sure to follow safe food handling practices and wash fresh fruits and vegetables thoroughly under running water before eating or preparing them.

**Reduce the risk of food borne illness by following these four steps: Clean, Separate, Cook, Chill**

## STEP 1: CLEAN

Clean your hands, surfaces and equipment. Do it often and do it well! Bacteria can get onto your hands, countertops, containers, dishcloths, utensils, and the food itself.

### Cleaning your hands

Wash your hands **before** preparing, handling, serving or eating food.

Wash your hands **after**:

- Using the washroom
- Sneezing, coughing or blowing your nose
- Touching your face, mouth or hair
- Handling raw meat or other uncooked foods, or the surfaces they have been on (e.g., cutting boards, countertops)
- Handling dirty utensils or dishes
- Handling money
- Smoking
- Touching pets
- Cleaning
- Handling garbage
- When washing your hands:

1. Wet your hands with warm water.
2. Lather your hands with soap for 15 to 20 seconds.
3. Rinse hands thoroughly and pat dry with a paper towel.
4. Use the paper towel to turn the tap off.

Wherever possible, use a proper hand washing station to wash your hands. This includes a sink with hot and cold running water that drains into a proper sewage system.

If a hand wash station is not available, use a clean water container filled with warm water from a safe drinking water source. The water should flow out of the container through a valve that you can turn on and off. If you are using a temporary water supply line connected to a drinking water supply, sanitize and flush the line before use. Make sure the line is composed of food-grade material (not a garden hose) and install a one-way valve to ensure the water cannot flow back.

## Water for hand washing and preparing food

Use a safe drinking water source (such as a municipal water supply or a tested private source) for hand washing and food preparation. Wash, rinse and sanitize drinking water containers before using them. If you are using a temporary water supply line connected to a drinking water supply, sanitize and flush the line before use. Make sure the line is composed of food-grade material (not a garden hose) and install a one-way valve to ensure the water cannot flow back.

## Cleaning dishes and utensils

When cleaning dishes, utensils and containers by hand, use the three compartment sink method.

Sink #1: WASH – Warm water, dish detergent.

Sink #2: RINSE - Clean, warm water.

Sink #3: SANITIZE - Add 2.5 mL (1/2 teaspoon) of household bleach to every 1 liter (4 cups) of warm water you put in the sink. Soak dishes and cutting boards for at least 45 seconds. Let them air dry completely before use. If sinks are not available, use tubs or basins instead.

Alternatively, use single serving methods such as toothpicks, paper cups and disposable plates, forks, knives and spoons. Keep a back-up supply of clean utensils (tongs, scoops, etc) to replace soiled or contaminated ones. Back-up utensils should be wrapped or kept in a clean, sealed container.

## Cleaning countertops and other food contact surfaces

Using a sanitizing spray is a safe way to kill harmful bacteria left on surfaces after regular washing. To sanitize countertops, tables, taps, sinks, meat slicers and other appliances, follow these steps:

Mix 5 mL (1 teaspoon) of household bleach per litre (4 cups) of water.

Put mixture in a labeled spray bottle.

Squirt the mixture on countertops and other surfaces.

Wipe with a clean cloth or paper towel.

Make a fresh solution often.

## Do not:

Do not handle food when you are sick – especially if you have been vomiting or have diarrhea.

Do not sneeze, cough or blow your nose over unprotected food or surfaces.

Do not pet animals when handling food.

Do not allow smoking near food handling areas.

## Do:

Wear clean clothing.

If you have a cut or wound on your hands, bandage it and wear clean, disposable gloves.

When handling food, tie your hair back or cover with a hair net, bandana or baseball cap.

Provide garbage disposal bins.

Provide enough washrooms for the size of the market.

Consider food safety training for anyone who will be preparing or handling food.

## STEP 2: SEPARATE

### Do not cross-contaminate

Cross-contamination occurs when bacteria spread from one food item to another. This can easily happen when cooked or ready-to-eat foods come into contact with raw meat or other uncooked foods, dirty

hands or contaminated utensils. **Keep raw meats and ready-to-eat foods separate!**

### Common sources of cross-contamination are:

- Cutting boards, countertops, plates and other food surfaces
- Slicers, mixers and grinders
- Serving utensils, knives and tongs
- Hands, gloves or mitts
- Insects
- Containers, bags or crates used for food storage
- Covers used for table tops
- Food probe thermometers (these are used to test the inside temperature of food)
- Juices from raw meats dripping onto cooked or ready-to-eat foods

### To prevent cross-contamination follow these tips:

Wash hands often and well!

Store raw meat, poultry and seafood on the bottom shelf of the fridge.

Separate produce, nuts and herbs from raw meats and other high risk foods. Similar foods should be stored together.

Use separate cutting boards if possible – always the same one for raw meats and a different board for vegetables, fruits and other lower risk foods.

Wash, rinse and sanitize cutting boards, utensils and food probe thermometers before re-using.

Never put cooked food on a plate, cutting board or surface used for raw meat, poultry, seafood or eggs. Keep them separate!

Tightly cover baked goods and ready-to-eat foods (e.g., processed meats and dry cheeses) with plastic wrap.

Handle ice with tongs or a scoop (not directly with hands).

Use sneeze-guards over food displays or samples to limit contamination from insects, sneezing and dust.

Provide clean tongs with any customer self-service bins for bread or buns.

Keep food containers off the ground – including boxes of fruits, vegetables, nuts and herbs.

Do not smoke while preparing food.

## STEP 3: COOK

Cook food to a high enough temperature and keep it out of the danger zone! The danger zone, where bacteria grow rapidly, is between 4°C (40°F) and 60°C (140°F).

### Using a food probe thermometer

Use a food probe thermometer to measure the inside temperature of cooked foods (e.g., meat, poultry, fish) to check that they are cooked to a high enough temperature.

Push the thermometer into the thickest section of the meat you are cooking, but make sure that it is not touching bone, fat or gristle.

Wash, rinse and sanitize the food probe thermometer between uses.

For cooked or ready-to-eat food, be sure to **keep your hot foods hot!**

To properly cook meat, poultry, fish or eggs, heat them to a high enough temperature for a long enough time to prevent harmful bacteria from multiplying (see temperature chart).

After cooking, keep hot food at 60°C (140°F) or hotter until it is served.

Serve hot food while hot, or put it in the fridge, freezer or in a cooler with ice as soon as possible once cooled (within two hours of preparation).

### Some additional cooking tips include:

Make sure that food and water come from safe and reliable sources.

Do not eat or serve hamburgers rare. Always cook hamburgers and other ground meat to the correct inside temperature.

Cook fish to the correct inside temperature and until it flakes easily with a fork.

Use a microwave oven properly by first covering the food, then stirring and rotating for even cooking. This will help to avoid cold spots in the food.

Bring sauces, soups and gravy to a full boil every time you re-heat them. Heat other leftovers thoroughly to 74°C (165°F).

## AIDS Vancouver Island

[www.avi.org](http://www.avi.org)

201-55 Victoria Rd  
Nanaimo, BC  
V9R 5N9

Phone: 250-753-2437

Fax: 250-753-4595

Email: [anita.rosewall@avi.org](mailto:anita.rosewall@avi.org)

*AIDS Vancouver Island provides comprehensive, accessible and effective education, prevention, care, treatment and support services to residents of Vancouver Island and the Gulf Islands to:*

- (1) reduce the spread of, primarily, HIV/AIDS and also Hepatitis C and/or other co-infections; and*
- (2) improve the health and well-being of people infected and affected primarily by HIV/AIDS and also by Hepatitis C and/or other co-infections.*

*For more information call the AIDS info line*

**1-800-665-AIDS (2437)**

## IMPORTANT PHONE NUMBERS

### Health & Addictions

Clearview Detox 753-9968  
Crisis Line 754-4447  
Drug & Alcohol 741-5554  
Nanaimo Hospital 754-2141  
AVI Health Centre 754-9111  
Caledonia Clinic 754-7777  
Medical Arts Clinic 741-0447  
Lantzville Medical Clinic 390-4542  
Wellington Medical Clinic 740-2100  
Victoria Rd Clinic 716-9911  
Hepatitis C Clinic 740-6942  
Snuneymuxw First Nation Health Centre 740-2337  
Tillicum LeLum Health Centre 753-6578  
Harris House Health Clinic 753-6759  
Samaritan House 753-1474  
New Hope Centre 714-1142

### Mental Health Services

Mental Health & Addiction Services 741-3600  
716-7786

### Life Labs

Port Place Mall 753-1342  
Brickyard Road 758-7852  
Norwell Road 758-1811  
Wallace Street 754-7524

### Pharmacies

Outreach Pharmacy 753-9606  
London Drugs 753-4433  
Shopper's Harewood 753-8234

### Central Drugs:

Dunsmuir St 753-6401  
Campbell St. 753-5342  
Dufferin Cres. 716-0063  
Bowen Rd 758-7711  
Brickyard 751-2439  
Lantzville 390-4423  
Beaufort Rexall 753-6655  
Southgate Rexall 753-7195

### Community Services

Citizens Advocacy 753-2321  
Nanaimo Affordable Housing Society 755-1158  
Legal Aid 753-4396  
Nanaimo Community Food Bank 753-6232  
RCMP 754-2345  
The Canadian Red Cross  
Equipment Loan Service) 756-9363  
The Salvation Army 754-2621  
BC Ferries General Information 753-1261

### Social Services

MEIA 1-866-866-0800  
BC Government Access Centre 741-3636

### Toll -Free & Long Distance Numbers

AIDS Vancouver Island - Victoria 1-800-665-2437

AIDS Vancouver Island—Courtenay/Comox 1-877-311-7400

AIDS Vancouver Island—Campbell River 1-877-650-8787

VIPWAS 1-250-382-7927  
VARCS 1-250-388-6220

BCPWA 1-800-994-2437  
Positive Women's Network 1-866-692-3001

BC Bus Pass 1-888-661-1566  
BC Ferries (Schedules) 1-888-223-3779  
Travel Assistance Program 1-800-661-2668

BC Hydro 1-800-224-9376  
Telus 1-888-811-2323

### Canada Customs & Revenue Agency (Income Tax)

Child Tax Benefit 1-800-387-1193  
General Inquiries 1-800-959-8281  
Refund Inquiries 1-800-959-1956  
GST 1-800-959-1953  
CPP 1-800-277-9914  
MSP 1-800-663-7100

### BC Centre for Excellence (St Paul's Hospital)

Dr. Montaner 1-604-806-8316

Dr. Montessori 1-604-806-8644  
or 1-604-806-8667

Oak Tree Clinic - 1-604-875-2212  
1-888-711-3030

Spectrum Health 1-604-681-1080

Swift Street Clinic 1-250-385-1466

Mental Health Info Line 1-800-661-2121

Narcotics Anonymous – 24 hr. 1-888-265-7333

Pharmacare 1-800-554-0250

Inquiry BC 1-800-663-7867

Social Insurance Number 1-800-206-7218

### Social Services

Tenant's Info Hotline 1-800-665-1185

Residential Tenancy Office (24 hr) 1-800-665-8779