

for the AIDS Resource Centre - Okanagan & Region

### AIDS Walk '99

Kelowna, Sept. 26



Gary Taylor, AIDS Walk '99 Coordinator
See Insert for more information

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## We need your help!

Ministry "cuts" ARC funding — Programs and services jeapardized

he word has come down from the Ministry of Health, HIV/AIDS Division, that funding will be slashed to \$247,000 for fiscal year 1999/2000 — this at a time when the AIDS Resource Centre is at its most active providing essential programs and services throughout its mandated area.

During the past two years our client base increased 342 per cent from 31 registered clients in July 1997 to 106 in 1999. We

also have seen requests for educational sessions increase 200 per cent during the same period. ARC's mandated area covers the two Regional Health authorities, Okanagan Similkameen and North Okanagan, and encompasses 78,000 square kilometres with a population of 337,603 people (based on 1996 census).

We live in a province where two individuals test positive for HIV every day. That .... continued on page 2

#### **British Columbia AIDS Funding by Region**

Health Region	Region	% of Total	Funding	% of ACAP	
	Population	Population		Funding	Per Person
East Kootenay	76,473	2.03%	\$35,000.00	0.39%	\$0.46
West Kootenay-Boundary	80,037	2.13%	\$243,009.00	2.15%	\$2.41
North & South Okanagan	337,603	8.97%	\$263,702.00	2.94%	\$0.78
Thompson	125,282	3.33%	\$226,331.00	2.53%	\$1.81
Lower Mainland	2,042,844	54.30%	\$7,009,840.00	78.21%	\$3.43
Capital Health Region	331,966	8.82%	\$738,476.00	8.24%	\$2.22
Central & Upper Van. Island	347,728	9.24%	\$191,646.00	2.14%	\$0.55
Coast Garibaldi	<i>7</i> 0,921	1.89%	\$0.00	0.00%	\$0.00
North Interior	124,681	3.31%	\$212,889.00	2.38%	\$1 <i>.7</i> 1
Peace Liard	62,346	1.66%	\$9,175.00	0.10%	\$0.15
North West Regional	90,638	2.41%	\$52,328.00	0.58%	\$0.58
Cariboo	71,701	1.91%	\$30,024.00	0.33%	\$0.42
Provincial Total			\$8,962,420.00		\$2.38
**Aborigiñal dollars included in	total		\$ 749,387.00		

#### Funding cuts

... continued from page 1

represents 18 per cent of the 11 individuals testing positive each day in Canada. Other statistics you may be interested in

relate to the breakdown in funding throughout BC, and the glaring inequity in funding to regions outside the Lower and Mainland Vancouver Island. (See Table 1 below.) As you can see, we certainly are not the only "have-not's" vying for funding but this makes it no less frustrating to witness these cuts to our Prevention, Awareness and Support Programs.

As we go through the process of the regionalization of the HIV/AIDS dol-

lars in our area, the dollars allocated in the contract with the Ministry in 1999/ 2000 will set what Regional Health Authorities will spend for years to come. Is this enough?

Bear in mind it will be a huge challenge for our region to have funding reinstated to a level appropriate to the needs of our current services.

The ramifications of one person contracting HIV is devastating to a community. AIDS affects everyone. Its economic

cost must be measured in terms of extraordinary medical, social and personal costs to individuals, family, friends and partners. Despite this, it has become apparent to ARC's staff and volunteers over the past several years that most citizens in our region don't believe AIDS affects them. If

we spend the funds today on education, awareness and support, this may one day prove to be true. However, if we at ARC are forced to reduce our presence in our area this definitely will not be the case.

We ask that you get involved as members of ARC, clients of ARC or simply as a concerned citizen of either the North Okanagan Regional Health Authority or the Okanagan Similkameen Regional Health Authority. Please tell your local MLA how you feel about this funding cut or contact Elena Kanigan, Director HIV/

AIDS Division, Ministry of Health, 3<sup>rd</sup> Floor, 1520 Blanshard Street, Victoria, BC V8W 3C8. Phone: 1-800-663-7867. Ask for 952-2481. e-mail: elena.kanigan@moh.hnet.bc.ca. (MLA contacts are listed on page 6.) If you require assistance or have a question about how you can help, please don't hesitate to call (250)862-2437 or 1-800-616-2437.

Daryle Roberts, Executive Director, AIDS Resource Centre, Okanagan & Region

# ARGILLUS

Michael J. Saya, Editor



This
newsletter is
the official
publication
of the AIDS
Resource
Centre Okanagan
& Region

(ARC), formerly Kelowna and Area AIDS Resources, Education and Support Society. It is published four to six times yearly. The materials in this newsletter are meant to be consistent with ARC purposes which are:

- to promote awareness of AIDS and related diseases
- to develop and provide resources to combat the spread of AIDS and the HIV virus
- to develop and provide educational resources
- to support those living with AIDS and those diagnosed HIV+, and/or their significant others

Even so, the opinions and comments within this newsletter are those of the authors and do not necessarily reflect official ARC policy. The newsletter does not recommend, advocate ar endorse the use of any particular treatment or therapy described as information. The board, staff and volunteers of ARC do not accept the risk of, nor responsibility for any damages, costs or consequences of any kind which may arise or result from the use of information disseminated through this newsletter.

Persons using the information provided through this newsletter do so by their own decision and hold the society's Board, staff and volunteers harmless.

Submissions for publication may be sent to our offices at any time; publication deadline is two weeks prior to publication date. Submissions will be returned if a request is made in writing and an address provided. Permission to reprint and distribute this newsletter is openly encouraged.

The ARC office is located at: #202, 1626 Richter Street Kelowna, BC V1Y 2M3 Phone: (250) 862-AIDS (2437) 1-800-616-AIDS (2437) FAX: (250) 868-8662 Website: arc@silk.net Internet: www.silk.net/arc/

#### What these cuts mean:

- · 2 full-time staff lost
- Client support services in your area reduced or cancelled
- AIDS Educator unable to travel from Kelowna to mandated areas
- · Volunteer training reduced
- No conference attendance
- Phone lines cut back; Internet Service cancelled
- Additional cutbacks to be determined

Health Canada AIDS Community Action Plan British Columbia Funding by Region

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Capital Health Region	331,966	8.82%	\$100,000.00	13.1 <i>5</i> %	\$0.30
Central & Upper Van. Island	347,728	9.24%	\$ 0.00	0.00%	\$0.00
Coast Garibaldi	70,921	1.89%	\$0.00	0.00%	\$0.00
North Interior	124,681	3.31%	\$60,000.00	7.89%	\$0.48
Peace Liard	62,346	1.66%	\$0.00	0.00%	\$0.00
North West Regional	90,638	2.41%	\$0.00	0.00%	\$0.00
Cariboo	71,701	1.91%	\$40,000.00	5.26%	\$0.56
ACAP Provincial Total	3,762,220		\$760,500.00		\$0.20

## Topher Talks

## "A Client's Viewpoint"



Three times a day

Once a day

By mouth

As needed

Intravenous

Intramuscular

Immune helper cells

Measure of virus in the blood

Sexually transmitted Disease

Central Nervous System

Cerebral Spinal Fluid

Injection Drug Use(r)

A measure of increase or

decrease in viral load

**Blood Brain Barrier** 

nce upon a time there was a mother mouse that was walking through a field with her babies. They happened on to a cat that was hunting mice in the field. The mother mouse thought quickly and told her babies to hide behind her. Slowly the mother mouse puffed herself up and started barking like a dog. The cat froze in its steps and looked around. Once more the mother puffed herself up and started barking again. The cat, a little confused at not seeing a dog, turned and ran away. Happy with the results, the mother turned to her babies and said: "See? I told you it pays to learn a second language.

As clients with this disease know, HIV/ AIDS requires that we learn a second language. Actually we learn parts of many languages. Unfortunately, many of these acronyms, abbreviations and medical jargon leave us confused. So, here is a

These are just a few of the many short forms that we use in daily conversations. I know many more are out there.

Whether you're HIV-positive or someone who supports PWAs, I hope YAHAGS (you are having a good summer) and you WCSUATAW (will come support us at the AIDS Walk) in September!

#### Organizations

ASO	AIDS Support Agency
PWA	Persons living with HiV/AIDS
CDC	Centre for Disease Control
NAPWA	National Association of Persons
	With AIDS
BCPWA	British Columbia PWAs
PWN	Positive Women's Network
PAN	Pacific AIDS Network
CAS	Canadian AIDS Society
PARC	Pacific Aids Resource Centre
CATIE	Community AIDS Treatment
	Information Exchange
FDA	Federal Drug Administration

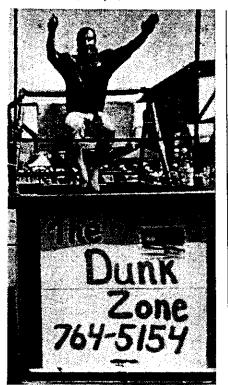
#### Medication and Illnesses

Predication	and inicosocs
PEP	Post Exposure Prophylaxis
PCP	Pneumocystis Carinii
	Pneumonia
KS	Kaposi's Sarcoma
OI .	Protegse Inhibitors

ARVD	Anti-retroviral Drugs	BID	Twice
NRTI	Nucleoside Analogue Reverse	TID	Three
	Transcriptase	00	Once
NNRTI	Non-Nucleoside Analogue	PO	By mo
	Reverse Transcriptase	PRN	Ás ne
HAART	Highly Active Anti-retroviral	l IV	Intrav
	Therapy	l IM	Intran
Mega HAART		CD4 or T4	lmmur
Super Mega I		Viral Load	Measi
	a HAART Multi-drug Regimens	Logs	A med
CHF	Complementary Health Fund		decre
MAC	Mycobacterium Avium	Miscellaneous	
CHY	Complex		Blood
CMV	Cytomegalovirus	BBB	
HAV	Hepatitis A Virus	STD	Sexua
HBV	Hepatitis B Virus	CNS	Centro
HCV	Hepatitis C Virus	CSF	Cereb
CBC	Complete blood count	I IDU	Injecti

## ARC supporters splash for cash

A great big thank you goes out to Willow, Geoff, Barbara-J, Janet, Stephenie and our fearless leader, Daryle, who all took turns being dunked during the Mardi Gras Festival



July 17. Additional thanks go out to Barbara-J, Janet, Brenda, Julie, Altair, Linda B, Stephenie, Geoff, Willow, Pat, Lisa and Rose Hein for manning the booth. We even managed to get CHBC Weatherman Chris Cleaver (left) and the First United Church's David Martin (bottom) to sit and be dunked for half an hour. (The biggest splash occurred when I was dunked. . . .) Thanks to Drew and Libby Sherwood for their generous donation of the dunk tank.



## Women's Study Results Are In

## Pregnancy, HAART and drug use are targetted during multi-year study

he Canadian Women's HIV Study began in 1993. Five hundred and fifty-six HIV-positive and 324 HIV-negative women from across Canada have participated.

For the full text of this study contact the

ARC librarian or:

Dr. Catherine Hankins, Co-principal investigator, Canadian Women's HIV Study Tel: (514) 528-2400, ext. 3694; e-mail: md77@musica.mcgill.ca

 Does finding out you are HIV-positive change the likelihood of becoming pregnant? Now that HIV transmission to babies can be reduced, are more HIV-positive women becoming pregnant?

The advent of anti-retrovirals to prevent mother-to-child HIV transmission has not led to an increased pregnancy rate among HIV-positive women. However, more pregnant HIV-positive women are deciding to continue with their pregnancies now that anti-retroviral prevention is available even though it does not completely stop transmission.

2. Is HPV (human papilloma virus ) infection more likely to persist in HIV-positive women and increase their risk of cervical cancer?

Compared to HIV-negative women (49%), HIV-positive women were more likely (89%) to have HPV infection (any type) and more likely to have persistent HPV infection with types associated with increased risk of cancer of the cervix.

3. Has highly active anti-retroviral therapy (HAART) meant fewer opportunistic infections in HIV-positive women?

Results suggest the beginning of a decline in opportunistic infections since the introduction of combination ant-iretroviral therapy. However, we need to follow these trends more closely and for a longer period of time before conclusions can be made about the extent of the decline.

4. Is the use of HAART increasing in Canadian women?

Although HAART use in Canadian women with HIV infection has increased, less than half of eligible women with immune helper cells (ČD4) under 500 were on triple therapy during 1996/97. We are continuing to follow trends in the Canadian Women's HIV Study which suggest increased use of triple therapy.

5. Has the use of complementary therapies gone by the wayside since HAART?

The introduction and increasingly widespread prescription of combination antiretroviral therapy does not appear to have affected the use of complementary therapies among women in our study.

Cigarettes, alcohol and illegal drugs what are HIV-positive women using?

When they first join the Canadian Women's HIV Study, 57% of women say they have smoked at some point in their life; 36% say they currently smoke and half of these women (54%) say they smoke more than 15 cigarettes a day. At the time of their last visit, the percentage of women who currently smake was similar at 40% but the proportion of smokers smoking more than 15 cigarettes a day decreased (48%). CD4 count did not seem to influence whether or not a women changed her smoking habits.

The percentage of women who drank alcohol in the six months before entry into the study decreased from 59% (reported at the time of their first visit) to 50% (reported at the time of their most recent visit). The percentage of women who said they drank more than 15 drinks per week remained similar: 6% at the first visit and

4% at the most recent visit.

Meanwhile, 16% of women say they have injected drugs at some point in their lifetime. Six percent say they injected drugs in the six months before joining the study and, at follow-up, 4% say they injected drugs in the six months before their latest visit. At the most recent study visit, 12% of the women say they had used marijuana in the last six months; women with CD4 greater than or equal to 500 were more likely than women with CD4 under 500 to report using marijuana (19% versus 11%).

## Counsellor's Corner

about talk People 'Lifestyle'. What does that mean from a counselling point of view? Can you help me understand what that means for me?

Gayle replies:

Human behaviour is social behaviour and is influenced by our relationships with others. Early on we have reactions and create experiences. Through our unique interpretations, we form ideas of how the world works. This, in turn, determines our life goals. The concepts of self, others and a world view can be called your lifestyle.

As we travel through life, our lifestyle remains relatively stable. We unconsciously interpret new life experiences in the light of previously held convictions. However, we can run into trouble if these early convictions were faulty in any way. Faulty convictions can cause us to repeat the same mistakes over and over again.



"In order to see where you are going, it is important first to look at where you have been."

The most effective understanding of our behaviour comes through understanding how we perceive the world: i.e. our lifestyle. By understanding our unconscious goals (and our lifestyle), we can gain insight into our behaviours and relationships with others. We can learn tools to use when our faulty convictions get us into trouble, or we can change these faulty convictions and thus our behaviour.

Insight allows us greater understanding of ourselves and others. We become empowered and better equipped to face life's challenges and live a fulfilling

Gayle Gregory is a Master's student in Counselling Psychology and is available to PWAs by appointment at the AIDS Resource Centre.

Mail or drop off your questions at our reception for Gayle to answer personally or in the next newsletter.

## Volunteer A Corner



Merv McLeod Coordinator of Volunteer Services

he Volunteer Comer has been a very busy place since the last newsletter. The most important event since then was the Volunteer Appreciation evening of miniature golf at Scandia on April 22. Mother Nature even cooperated allowing our tournament to take place outdoors. Prizes included CDs donated by HMV and A&B Sound, as

well as coffee donated by Starbucks. The volunteers who were able to attend included Marie, Nicole, Brenda, Janet, Julie, Judy Waege, Chris, Geoff, Barbara-J, and Tia-Toni. Staff present were Daryle, Terri and myself; team numbers were rounded out by Rob, Jordan, Ross and Mary. Though the golf scores started matching the national

Rags of Riches

prizes were distributed.

The next event was a huge garage sale May 1 of used clothes and other treasures to raise funds for AIDS Walk '99. I would like to thank all volunteers. Marjorie, Janet, Chris, Barbara-J, Julie, Geoff, Jennifer, Altair, David, Ann, Sasha, Carol, Michael, Nicole, Rob and Rod are among the people who contributed to the success of this event which raised about \$500.

debt by the end of the evening, all the

A number of businesses also helped out: Second Tyme Around and Party Rental donated display racks, hangers and tables. Safeway donated a coffee pot and Starbucks the coffee. Food was given by B-Hive Bistro and Okanagan Pie Company. Argus Properties loaned us the space.

Youth Making Healthy Choices

Thanks to **Safeway** for donating pop and **Breadeaux Pizza** for donating six large pizzas to the youth focus group meetings in June. These were events inviting youth to give feedback on proposals for Healthy Choices, a joint committee of many agencies in the Okanagan. Bean Scene also donated their board room for the meetings. Thank you!

Bucks from Baseball . . . or . . . lt's Safe! (The food that is. . . . )

In preparation for running the concession at the Rainbow Coalition's June 27 baseball tournament, several ARC volunteers attended a Food Safe course taught by Kelown Health Inspector Dave Nelson. The usual \$65 fee for the course was waived. Chris, Julie, Altair, Tia-Toni, Barbara-J, Nicole, Tammi and I were all successful in passing this course. All the new Food Safe graduates spent some time flipping burgers, wieners and smokies. (We had Linda helping us, too.) In terms of fundraising, the barbecue made over \$500 for the centre.

Local Heroes in the News!

Finally, five members of our volunteer corps were voted local heroes. Their names — Julie, Stephenie, Chris, Donna, and Marie — were announced on SILK FM the week of July 19 to July 23. They received plaques from United Way of the Central & South Okanagan/Similkameen.

And a big thank you to the *Knights of Columbus* who made a generous donation to our Volunteer Lunch Program. •



Just A Volunteer, Am I? You bet! olunteer: one who offers service, joins a force, etc., of his/her own free will: offers oneself.

Someone told me the other day, that *I* was just a volunteer. Why do I do it? What do I receive for volunteering? This is worth some thought. . . .

I looked back on how I came to the centre. Back in 1993, my brother Jerry (who has passed on now) asked me to meet him at KARES (a small organization then.) After that, if we had nothing better to do, my daughter and I would hop on the bus and head up to the office. There was always work to be done: stuffing envelopes, folding pamphlets, and so on.

First, I had to understand what HIV/AIDS was all about before knowing how to help the community. I decided I would do public "speaks". My first speech was on World Aids Day, December 1, 1995 and the topic was how HIV/AIDS had infected or affected my life as a sister and as a parent. I was scared because it had to be at least 20 minutes. A camera and a microphone were there (I don't

care for either too much), and I was the first speaker. I think I only lasted 12 minutes, but I did it! From then on, I began to help out more and more. Of the many services offered by ARC, I have helped with most of them at one time or another.

So, yes, I am a volunteer who has eamed the respect of others at ARC. I have stuck with it over the years and have done my best. If it sometimes cut into my personal life, that was my decision. I have made this my job and sometimes I brought it home with me, but I have learned to set my boundaries too.

So, to answer my initial question: Do I get something from volunteering here? Yes. I have learned so much. I get support from the staff and volunteers. I see the benefits to the people who learn at the 'speaks'. I get acknowledged from both sides. I have learned to set clear boundaries for myself and my family; and I get the benefits of the many self-help courses and other workshops that are offered to volunteers.

Yes, 1 am a volunteer and damn pleased to be one!

## From the ARC Library . . .

Tips for HIV-Positive Travellers

ve always wanted to go there." Something clicked when Lori Ayers heard herself saying this to a friend who was packing for Africa. It was the spring of 1992 and Ayers had just found she was HIV-positive. "I said, 'What am I waiting for?' "Two weeks later, she flew to Botswana. "I came home a different person. I wasn't just waiting to die anymore." Since then, Lori has traveled extensively and has learned how to balance adventure with the realities of dealing with HIV away from home.

Here are some things the traveller should consider:

#### Six Months In Advance

If you haven't been exposed to hepatitis B virus, your doctor may recommend taking three vaccines over a six-month period.

#### Two Months In Advance

Planning is crucial. Once you've chosen your itinerary, start collecting information on how to avoid hassles and limit exposure to bugs and environments that could make you sick. Consider your overall health, immune status, medications, length of trip and access to medical care. You should also consult with your doctor, a travel clinic (ask your local health department for a referral), the Centre for Disease Control and Prevention and the foreign consulate if applicable.

#### One Month In Advance

Obtain copies of your prescriptions and a two- or three-day supply of medications to put in your carry-on in case of lost lug-

Shop for herbal medicines. Medical herbalist Daniel Gagnon suggests the following:

 Black currant leaves can raise your overall resistance. • Chamomile tea will soothe an upset stomach.

off harmful microbes.

 Sweet anise and quassia can help free you from diarrhea and cramps.

Acidophilus can help your intestines fight

· Ginger drops can prevent motion sick-

California poppy can help you deal with

#### While You're Away

Avoid fatigue. Design an itinerary with time for resting and allow for jet lag. Include some yoga and meditation in your unscheduled time. Avoid infection. Observe food and water safety precautions. Assert your right to sit at least five rows away from a coughing or sneezing fellow traveler on a plane, bus or train. Let AIDS fade into the background. Waking up in new places makes it easy to shape an identity broader than your diagnosis.

#### Once You've Returned

Don't lock your new perspective away with your suitcase. Start planning your next trip! Or try 'travelling' at home. Create a "Spanish Saturday." Invite amigos for flamenco dancing, paella and sangria. Or visit the planetarium or park.

When we leave familiar routines and surroundings, anything's possible. Lori Ayers watched the sun rise outside her tent in the Kalahari Desert and suddenly remembered that she is more than the virus swimming through her veins. You, too, can dream up creative vacations that open you up to new possibilities. Deep healing requires this kind of openness, this knowledge that miracles can happen.

(From Poz Magazine, June 1997. By Lis Freedman. Ask for a copy of Countries With Hiv-Related Entry Restrictions available from the ARC librarian or the educator)

#### Okanagan & Region MLA Contacts

Jim Doyle MLA Columbia River-Revelstoke 103 Gould's Island Golden, BC V0A 1A0 Phone: (250) 837-6814

> Bill Barisoff MLA Okanagan Boundary 34843-97 Street Oliver, BC VOH 1T0 Phone: (250) 498-3001

John Weisbeck MLA Okanagan East 230 Highway 33E Kelowna, BC V1X 1X0 Phone: (250) 491-1940

Rick Thorpe MLA Okanagan - Penticton 103-74E Wade Penticton, BC V2A 8M4 Phone: (250) 493-7111 April Saunders MLA Okanagan - Vernon 106-3334-30 Avenue Vernon, BC V1T 2C8 Phone: (250) 260-4474

Sindi Hawkins MLA Okanagan West 102-2121 Ethel Street Kelowna, BC V1Y 2Z6 Phone: (250) 717-1570

George Abbott MLA Shuswap 103-320 Alexander NE Salmon Arm, BC V1E 1E7 Phone: (250) 833-1815

Harry Iali MLA Yale-Lillooet 1928 Quilchena Merritt, BC V0K 2B0 Phone: (250) 378-6873

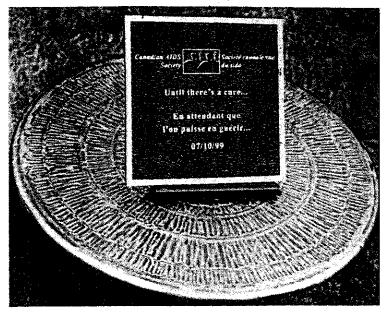
### Until there's a Cure

## AIDS Time Capsule reflects history and hope

Imost 20 years into the epidemic, people living with HIV/AIDS (PWAs), physicians, researchers and frontline AIDS workers marked their last meeting of the century by burying a premillenium time capsule. The event took place during the Canadian AIDS Society's annual general meeting July 9 to 11. During the meeting delegates had the opportunity to write about their personal experience with HIV/AIDS, and to share their personal and professional milestones in the fight against HIV/AIDS. These were gathered, along with their hopes and dreams for the future, and placed in the time capsule. The capsule will only be exhumed once a cure is found.

"This event allows us to reflect on the great energy spent to fight against AIDS, celebrate our efforts, and honour the memory and important contributions of those individuals who are no longer with us. It also allows us to look forward to the day that there finally will be a cure," said Terrence Stewart, Chair of the Canadian AIDS Society (CAS). Stewart unveiled a plaque bearing the inscription "Until There's a Cure" which will mark where the capsule is buried at Théâtre de l'Île Park in Hull,

Québec.



The AIDS time capsule will only be exhumed once a cure is found.

"In a world where the history of dominant political, social and cultural groups are instantly recorded and filed at the National Archives, collecting and maintaining your own historical archives is key to ensuring that your voices will be heard by future generations. This will, in turn, ensure a balance when a history of this social movement is researched and written."

CAS gratefully acknowledged the City of Hull for authorizing the time capsule burial and plaque display.

### Caveat Emptor:

A Warning about Viagra and Protease Inhibitors

Doctors in Scotland warn against a possible interaction between Viagra and protease inhibitors (PI). Viagra is a drug used to treat sexual dysfunction in men. The drug is metabolized in the liver by enzymes of the P450 cytochrome. Pl are known to inhibit these enzymes, which may lead to increased levels of Viagra in the blood. In turn, this can lead to undesirable effects such as headache, flushing and possibly low blood pressure. In order to reduce the risk of potentially harmful interactions between Viagra and PI, the authors recommend a lower starting dose of Viagra for people on highly active anti-retroviral therapy (HAART). In the meantime, the authors describe the need for thorough study of Viagra use in patients using Pl as "urgent". The doctors also describe the combination of Viagra and amyl nitrite (poppers) as potentially lethal.

(From Lancet 1999;353:840)

### PWAs enjoy Loon Lake Retreat

On the July 2 weekend, three of us travelled to Vancouver for the Loon Lake Retreat. We ignored the snow along the Coquihalla by singing along to a tape of good ol' seventies and eighties tunes. On Monday we joined about 25 other men and women (all HIV-positive) to register. We were tagged with a sticker with our Zodiac sign and also our Chinese sign (Year of the Dog, Rabbit, Dragon). The Goats and Rabbits got a lot of attention!

After piling into a yellow school bus, we were entertained by several comedians. The blue sky lifted everyone's spirits and (after a mandatory smoke break) we arrived at the BC Ministry Forestry Reserve somewhere north of Abbottsford.

Warm sun, dense forest, a quiet but cold lake, and many cabins were there to enjoy. The dinner bell called us for endless platters of great food three times a day. A hot tub, canoeing and hiking were available anytime. Facilitators ran small groups, and

others provided massage, acupressure, healing touch, acupuncture, and an In Touch Workshop for men. My favourite was Lucy, an outrageous, beautiful clairvoyant. Between fits of laughter she was able to accurately divine what was important to each person at that moment. Apparently I have to wait until after next summer before I meet Mr. Right!

The game of Pictionary challenged the drawing impaired (and I still think the other team cheated!) The evening of the talent show was memorable for its spontaneity, complete irreverence and many surprises.

Music, skits and tacky costumes were de rigeur. Really good solo singing and a rude threepart round were fun.

Our heartfelt thanks to Jackie Haywood and her crew for getting us there and taking such good care of everyone's needs. Let her know that you want to attend the next PWA event by contacting the BCPWA retreat team.



1999 Condom Cop team. Standing, left to right: TJ (Trevor) Perepolkin, Perry Bahniwal, Nicole Hale and Willow Lloyd. Kneeling: Lisa Gilderdale and Geoff Barker.

# Condom Cops take it to the streets . . . and beaches

he Kelowna Condom Caps (Geoff and Willow) are happily on patrol for another Okanagan summer. Things are going swimmingly, and we've enjoyed a warm reception from our "clients." Our beat includes downtown Kelowna, Gyro Beach, the Nude Beach (where there's lots to see), the nightclubs and pubs, and many other spots. So come find us and get all of your condom needs fulfilled!!!

The Penticton Condom Cops (Lisa and Perry) have competition this year from the "Slip on a Shirt, Slap on a hat, Slop on Sunscreen Police" (sound familiar?) sponsored by the Canadian Cancer Society. Cool weather kept the beaches quiet but business picked up once the sun came out. We also hope to attend the Iron Man event and raves as they come up.

Nicole and TJ, the Condom Cops in Vernon, are being well received. We have three bars to visit in town, and the Nude Beach. Some of the beaches have been closed. We also travel out to Mabel Lake, Salmon Arm, Fintry, the Westside, and Armstrong. The bars in Enderby will be approached for permission, too.

Hope you're having a good summer. Play safe!

## **Coming Events**

September 1, 1999

AIDS Walk '99 Early Bird Entry Deadline for team registration and air fare draws

September 10-11

Kelowna Core Training for all new volunteers/staff at OUC's KLO campus Friday, 7 pm -10 pm Saturday, 9 pm - 4 pm

#### September 17 -18

Kelowna Volunteer Festival. The AIDS Resource Centre, Okanagan & Region Information Booth will be at the Kelowna Curling Rink

Friday, 9 am -1 pm and 4 pm - 8 pm Saturday, 10 am - 4 pm

September 20

ARC Annual General Meeting at the Ramada Lodge, Kelowna, 7 pm

#### September 26

AIDS Walk '99 (Kelowna)

Spring 2000 (dates to be announced)

A National Conference on Women and HIV/AIDS is calling for seven volunteer women to sit on the planning team For info contact the Canadian AIDS Society, 900–130 Albert St., Ottawa, ON K1P 5G4. Fax: (613) 563-4998

e-mail: tasha@cdnaids.ca

