

Some medicines prevent illness. One example is Cotrimoxazole, which prevents an infection. This is called prophylaxis. Epilepsy treatment is another example. Taking your medicines daily will prevent you from getting fits. Once you have a fit, you need different medicines.

Some medicines stop symptoms. Your skin might be itching, because of a fungal infection, flea bites or an allergic reaction. In all these cases anti-histamine tablets can relieve the itch symptom. Likewise, pain medication such as paracetamol can take away pain caused by different things.



### **Dosage – how much, how often?**

Your dosage is important. That is how much of a specific tablet you must take and how often you must take it. Let's say you take a Paracetamol tablet for pain. The tablet dissolves in your stomach where the chemicals get absorbed into the blood, which carries them to the liver. The liver changes these chemicals to make their transport around the body easier. A medicine can only work well if there is enough of it in the blood. The medicine chemicals can then interact effectively with the body's chemicals to try and correct the problem. However, if there is too much medicine, you will have more side-effects or it can even

poison your body. Alternatively, if there is too little medicine, the liver can filter it out. If you do not take the medicines regularly, they will not work, as too little reaches the body parts that need the medication.

Different medicines also compete against each other in the liver and the rest of the body. Some medicines make each other ineffective or increase the risk of side-effects. It is therefore important, whenever you get medicines from a doctor, nurse, or a pharmacist, to always show them the medicines you are taking already.



## Poverty and health

Many illnesses are the result of poverty. Lack of food, dirty water, overcrowding and poor housing help spread diseases. Cholera, for example, is spread because of lack of clean water. Hospitals alone cannot take care of all the health needs of our community. We need development of our community to prevent many illnesses. We need nurses and clinics close to the people in order to prevent illnesses or treat them effectively. Communities can be educated about basic health issues. This approach to health in the community is called primary health care. Hospitals, where patients sleep over, are called secondary health care.

Although there are many, many illnesses and many, many medicines, most illnesses can be treated with a few medicines. The Essential Drug List (EDL) provides guidelines that explain how the most common illnesses can be treated.

## Are medicines used too much?

According to the EDL medicines are used too much. Many problems can be controlled without medicines. Patients, impressed by the effectiveness of a medicine, sometimes unnecessarily demand a medicine for every problem. Nurses and doctors are often too rushed to explain and just give a medicine to please the patient. Illnesses like a cough, flu or diarrhoea will normally go away within a week. The body's healthy immune system has the power to fight the diseases on its own.

## More medicines needed by people living with HIV

The EDL's approach to medicines presents some challenges to people living with HIV. Many illnesses that usually go away on their own, stay for a long time in an HIV positive person. The body's immune system is not strong enough to fight the illnesses on its own. Illnesses that according to the EDL need no medicines, now need medicines. Nurses and doctors need ongoing training on HIV treatments.

## People living with HIV often need many different medicines

The EDL says the pharmacy can give you three different medicines only. If you have a chronic illness the maximum is five. For people with HIV this is a problem. You can have five chronic illnesses at the same time and might need ten different medicines.



## Full course of medicines even if it is expensive

In an attempt to save money many government pharmacies issue tablets for a few days only. Many people will get rid of an itch after taking Antihistamine tablets for three days. However, people living with HIV often have a chronic rash that requires Antihistamine tablets for months. They need to ask the nurse or doctor for a prescription that will last until their next appointment. Also, make sure the pharmacy gives you all the prescribed medicines. Often the doctor prescribes pain tablets for two weeks, but the pharmacy only gives you one packet of tablets for two or three days. Most medicines are very expensive. The government could save money by buying more generic medicines.

## Do not accept drug shortages

There is a shortage of medicines at government pharmacies because of an increasing number of patients combined with a shortage of staff. People need to stand up and speak out. Many patients feel they have no rights. This is not true. The first guiding principle of the EDL is: "To ensure the availability and accessibility of essential medicines to all citizens." The government's Patients' Rights Charter says: "Everyone has the right of access to health care services that include: provision of special needs in the case of persons living with HIV or AIDS patients". It also says: "Everyone has the right to complain about health care services and to have such complaints investigated and to receive a full response on such investigation."



Send a representative

Questioning these problems on your own is difficult. These are things that support groups should discuss. First inform yourself well. Then analyse the problems. Then a delegation of the support group should discuss it with the pharmacist and the matron.



...or decide to all go together



**You might need to take many medicines at the same time.  
Do not accept drug shortages.**

# Medicines regularly used by people living with HIV

Here is a list of Medicines regularly used by People living with HIV and some possible side effects. Only the medical name is given, not the advertising name. Consult your nurse or doctor.

Medicine	Some uses		Possible side effect
Medicines against germs	benefit far outweighs the risk of		With all clinic medicines the side-effects.
TB tablets - combination:	First time TB	2 <sup>nd</sup> time TB	
Rifampicin, INH, PZA, Ethambutol	First 2 months	First 3 months orange urine	Rash, vomiting, peripheral neuropathy, liver damage, dark
Rifampicin, INH	Last 4 months		Same as above
Rifampicin, INH, Ethambutol		Last 5 months	Same as above
Streptomycin (injection)	Not needed	First 2 months	Rash, deafness, kidney failure
INH	Prevention of TB		Peripheral neuropathy, liver problem, rash
Cotrimoxazole	Prevent PCP pneumonia Bigger dose against diarrhoea		Rash and itch, if a problem, use Dapsone instead
Amoxycillin	Many infections, e.g. chest		Not to be used by person allergic to Penicillin. Rash, diarrhoea
Flucloxacillin	Skin infections		Not to be used by person allergic to Penicillin.
Penicillin (injection)	Syphilis		Serious allergic reaction. Do not use if you had rash with Penicillin, Flucloxacillin or Amoxycillin before.
Erythromycin	Use when allergic to Penicillin		Cramps, vomiting, diarrhoea
Doxycycline	STD - Chlamidia		Nausea and vomiting
Ciprofloxacin	STD - Gonorrhoea Diarrhoea with blood		Nausea, skin rash
Metronidazole Chronic diarrhoea	STD - Trichomonas take with food		Commonly vomiting. To avoid,
Clotrimazole (vaginally)	Vaginal thrush or itch		Few



<b>Medicine</b>	<b>Some uses</b>	<b>Possible side effect</b>
Nystatin (mouth medicine)	Thrush in mouth	Few as it does not get absorbed into blood
Amphotericin B or Miconazole (oral medicines)	Resistant thrush in mouth	Few as it does not get absorbed into blood
Fluconazole	Oesophageal thrush, resistant thrush in mouth or vagina,	Vomiting, diarrhoea, rash Cryptococcal meningitis
Griseofulvin	Fungus infection of skin, head or nails	Rash, vomiting and diarrhoea. Do not use in pregnancy, damages sperm cells
Mebendazole	All worms of intestine; Prevention taken 6 monthly	Tummy pain, diarrhoea
Artemether/Lumefantrine	Malaria	Heart problems
Aciclovir	Herpes and Shingles	Headache, vomiting
Antiretrovirals (triple therapy)	Advanced HIV disease	Rash, vomiting, diarrhoea, anaemia, liver problem
<b>Other medicines</b>		
Amitriptyline or depression	Peripheral neuropathy sleepiness (sometimes better since	Dry mouth, obvious heartbeat, sleep is wanted)
Paracetamol	Pain or temperature	Very poisonous to liver if overdose is taken
Diclofenac, Indomethacin, Ibuprofen,	Pain especially of joints and muscles	Ulcers, dizziness, tight chest, rash
Codeine or Mist Morphine	Severe pain, diarrhoea, cough	Constipation, dizziness
Promethazine	Allergic conditions, itch	Drowsiness, nausea
Metoclopramide	Vomiting and nausea	Uncontrolled movement of tongue or face, drowsy
Loperamide	Chronic diarrhoea	Farting, blurred vision, dry mouth
Ferrous salt and Folic acid	Anaemia, lack of iron in blood	Nausea, diarrhoea, dark stool
Vitamin B Complex	Tonic – makes you feel better	Nausea, vomiting
Pyridoxine	Peripheral neuropathy neuropathy	However, can cause peripheral
Vitamin A and Vitamin C	Protects against infections  kidney stones	Headache, vomiting, diarrhoea, nerve problems, liver damage,
Medroxyprogesterone or Norethisterone (injections)	Prevent pregnancy	Abnormal menstruation, weight gain

# How to make the best use of my doctor and nurse

Doctors often only take life-threatening complications seriously. They might not attend to the problem that bugs you every day – you will have to remind them.

**You will probably only see a doctor for 15 minutes per month. Try and make the best use of this time.**



- Attend the clinic together with your partner if you have one.
- Try to find a doctor and nurse you feel comfortable with.
- Try to always see the same doctor and nurse.
- Be open with the doctor and tell her/him exactly what you feel.
- The job description of doctors and nurses demands they keep everything you tell them confidential.
- If your doctor does not speak your language and you are not comfortable in English, insist to see the doctor with

a counsellor or nurse. You have to be able to communicate well. If the clinic does not provide staff to assist you, ask a family member or a friend from the support group to join you and translate for the doctor. The doctor will only be able to ask all the necessary questions if s/he can understand you well. You will also understand better what the doctor says.

- Sometimes you might forget to ask the doctor something. Write down the things you want to ask before you see the doctor. You can then use your list.
- Keep a diary in which you tick off every time you take your medication. Also note the days when you have a headache, a fever, bad cough, running tummy or your menstruation. Monitor your own weight and write down everything you eat two days a month. Your doctor will notice you care for your health, which will encourage her/him to explain more.
- Insist on privacy if you feel that other people are listening.
- Ask the doctor what s/he finds when s/he examines you.
- Ask about all results from special tests (X-rays, blood tests).



Ask about your medicines and remember their names.

- If the doctor does not answer questions, explain that it is your right to know. It is your health and your body, not hers/his. You don't only need medicines, you also need knowledge.

## Making the best use of the waiting time

You can learn a lot from talking about problems with other patients. Use the time in the waiting room to make friends and learn more about HIV. Other people living with HIV often find it easy to understand your problems. Also speak to your counsellor about the things that concern you. Make sure you join an active support group. Once you are open about your HIV status you will learn much more. This will help you to stay healthy. Assist other patients with their problems.



**You can learn a lot about staying healthy by talking to other patients.**