

The Pitt Men's Study

News and Notes

CDC highlights the importance of HIV testing among youth

In a recent article published on the Centers for Disease Control and Prevention (CDC) Website, researchers concluded that a "disproportionate number of new HIV infections occurs among youths, especially blacks/ African Americans, Hispanics/Latinos, and men who have sex with men (MSM)."

The report went on to say that although the number of new HIV infections is highest among men, fewer men have been tested for HIV (as compared to women). Routine HIV testing as part of regular medical care was therefore recommended by the CDC for everyone. In addition, the American Academy of Pediatrics recommends testing for all youths by age 16–18. They also recommend testing for all sexually active youths regardless of age.

Better adherence to these guidelines, especially for men, is needed to increase early HIV diagnosis and treatment. Treatment is not only critical for the health of the person infected, it is also critical in reducing the chances of spreading the infection to others.

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News and Notes is published by the Pitt Men's Study. All information and opinions are the sole responsibility of the Study and do necessarily reflect the policies or views of the University of Pittsburgh or the National Institutes of Health. Other key points from the CDC report:

• Youths aged 13–24 years account for 7% of the estimated 1.1 million persons living with HIV in the United States.

• In 2010, 26% of estimated new HIV infections were among youths: 57% among blacks/African Americans, 20% among Hispanic/Latinos, and 20% among whites.

• Nearly 75% of the 12,200 new HIV infections among youths were attributable to male-to-male sexual contact.

• Only a low percentage of youths have been tested for HIV, and 60% of youths with HIV are unaware of their infection.

• Young males who have sex with males are at increased risk for HIV because of high rates of HIV in potential sex partners, and they are more likely to engage in HIV-related risk behaviors (e.g., unprotected sexual intercourse and injection drug use) than other male or female high school students.

To read the full report, you can go to the CDC's Website: http://www.cdc.gov/vitalsigns/

Research supports high-dose flu vaccine for people with HIV



From Philly.com: "A quadruple-dose flu vaccine for the elderly also provides better protection for people with HIV, researchers reported Tuesday in the first of several studies to publish results of high-dose vaccine for

people with compromised immune systems.

The team of researchers from Philadelphia institutions will ask a federal advisory committee to recommend high-dose vaccination for HIVpositive people, said Pablo Tebas, an infectiousdiseases physician at the Hospital of the University of Pennsylvania and senior author of the paper in Annals of Internal Medicine."

Welcome, Jessica and Ken!



We've recently welcomed two new people to our staff. The one you'll be seeing the most of is Jessica McGuinness, who will be asking questions and drawing blood in the clinic.

Jessica is a transgender woman who worked as an EMT in the South Hills of Pittsburgh for 12 years. Her coming out letter to her coworkers was published in the book *American Heroes Coming Out From Behind the Badge*, edited by Greg Miraglia. She has done speaking engagements at a number of colleges, community centers and bookstores, has done outreach work for the transgender community and has been heavily involved in several advocacy issues. She was featured on the cover of the LGBT publication Pittsburgh's Out in April and has done several radio interviews including one on KDKA with Marty Griffin.



Also new is our medical director Ken Ho, who is replacing Ross Cranston. Dr. Ho is an Instructor of Medicine in the Division of Infectious Diseases. He completed his internal medicine training in 2007 at UPMC and then completed a three year fellowship in Infectious Diseases at UPMC. During this period, he was selected as an NIH T32 fellow and conducted research on DNA damage biomarkers of human papillomavirus associated analdysplasia.

Dr. Ho's current interests lie in HIV prevention with a focus on microbicides and oral pre-exposure prophylaxis. He is a site principal investigator for HPTN-069, a safety and tolerability study of maraviroc as pre-exposure prophylaxis. He is also a pharmacovigilance safety officer with the NIH funded Microbicide Trials Network.

Clinic Notes: The Medical Release

What's the importance of the medical release, and why do we ask you to sign a new one every frickin' time you come in?

There are two kinds of medical releases that we need at the Pitt Men's Study. The first one is used to obtain your medical records from your doctor. If you've had any new significant conditions since we last saw you - anything from heart disease to cancer or AIDS-related illnesses - we're going to want to know more about it, and we need a release to get that info.



The other release is used to send the results we get from your blood draw to your physician. This is a great way to keep your doctor informed of any new conditions that we might find from your blood work.

Because of rules stated in the Health Insurance Portability & Accountability Act (HIPAA), we need a recently signed release each time we send out or acquire your medical records. This helps to protect you: Due to the sensitive nature of your records, it's important that we have your permission each time we seek or send your medical information.

We also need your doctor's name, address, and/or contact number on the release, so be sure to bring that with you to the clinic if you're interested in having your results sent out, and especially if you've been diagnosed with any new conditions or problems. Please note that "we can only send results to two physicians but our volunteers are free to copy their results and bring it or send to any additional health care providers.

You & Your Data

Questions, blood, urine, mental tests, even cups full of spit - we collect a lot from our volunteers at Pitt Men's Study appointments. So where does all that info go and what do we do with it? Below are some recent articles that appeared in scientific journals using data that you provided for us. The results aren't always groundbreaking or newsworthy - science generally moves in baby steps rather than strides - however without you and your data, none of these articles would exist.

Title of Article	Journal & Publication Date	The Gist of It
Neurologic disorders incidence in HIV+ vs HIV- men: Multicenter AIDS Cohort Study, 1996-2011.	Neurology. 2012 Oct 17. [Epub ahead of print]	This study looked at neurologic disorders in men who have participated in the MACS, comparing HIV-positive and HIV-negative individuals. It concluded that HIV-positive men receiving HAART (highly-active antiretroviral therapy) have a higher burden of neurologic disease than HIV-negative men, and that they develop neurologic disease at younger ages.
Neuropsychological test performance before and after HIV-1 seroconversion: the Multicenter AIDS Cohort Study.	Journal for NeuroVirology. 2012 Dec 11. [Epub ahead of print]	The objective of this study was to compare neuropsychological test performance before and after HIV seroconversion in order to identify possible changes in psychomotor speed, memory, attention, and concentration. The results suggest that HIV does not appear to have a measurable affect on psychomotor or complex cognitive processing for up to 2 years following infection.
Adversity and Syndemic Production Among Men Participating in the Multicenter AIDS Cohort Study: A Life-Course Approach.	American Journal of Public Health. 2013 Jan.	A few visits back, we administered a long questionnaire that asked about (among other things) child abuse and sexual development. This paper used that information and concluded that life-course events like victimization and internalized homophobia were associated with health outcomes like depression and drug use.
Cumulative exposure to stimulants and immune function outcomes among HIV-positive and HIV- negative men in the Multicenter AIDS Cohort Study.	International Journal of STD & AIDS. 2012 Aug.	This study examined associations between stimulant use (meth and cocaine) and immune function among HIV-positive men taking meds and HIV-negative men. It concluded that HIV- postive men who adhere to their drug regimen have healthier immune systems, regardless of whether they use stimulants; and that HIV meds are important for immune health in HIV-positive men who engage in stimulant use.

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- Important health information for men
- Published research articles using Study data
 - Explanation of Study tests and test results
- Photos and writings from 29 years of the Study's history
- Parking information for Study volunteers

Is Oral Sex Safe?

One of the most often asked questions regarding sex and HIV is "can I get HIV from oral sex without using a condom?"

The short answer is yes. Although a lot of sexual health experts put oral sex into the "safer sex" category, there is a degree of risk. Using condoms for oral sex is your safest bet.

With that said, if you're not going to use a condom, the following are ways to reduce your risk even more:

• Don't brush or floss your teeth for at least an hour before giving head. You can use a mouthwash, breath mint, or gum instead. This will keep the number of tears and cuts in our mouth to a minimum.

• Try not to eat abrasive foods (like tortilla chips, French bread, pretzels, etc.) for the same reasons.

• In general, it's also a good idea to maintain excellent oral hygiene to prevent the possibility of easy tears/cuts in the mouth. If your gums bleed when you brush, you need to step up your oral hygiene—talk to your dentist about what to do.

• Avoid getting semen in your mouth; semen contains active HIV. If you do get semen in your mouth, as the saying goes, "Swallow or spit, just don't let it sit." The longer semen stays in your mouth, the more potential for HIV to find an entry point into your body.

• Avoid deep throating since this can cause abrasions in the throat. Pre-cum/semen can come into contact with these abrasions, creating an effective entry point for HIV infection.

Pitt Men's Study Winter Weather Policy



When bad winter weather threatens, the Pitt Men's Study will closely monitor the situation in order to decide if we should keep the clinic open or close it for the safety of our volunteers and staff. When winter storms are approaching, please call 412-624-2008 or 1-800-987-1963 before leaving for your appointment.

If we have decided to close, our outgoing messages will be changed to reflect this; this change will usually go into effect at least 2 hours prior to the first appointment of the day. If we are going to be open, you will hear the usual outgoing messages. Even if we are open, if you feel it would be unsafe for you to travel, please stay home - just call to let us know that you are not coming, and we will reschedule the appointment.

Text for Testing



Text for Testing is a program created by the Pitt Men's Study and the Pennsylvania Prevention Project, at the University of Pittsburgh's Graduate School of Public Health. It was designed to make free HIV testing more accessible to residents of Pennsylvania.

By texting "PAtest" to 41411, smart phone users can connect to the Centers for Disease Control and Prevention database that lists free testing clinics throughout the state. You can then search by zip code to find the location nearest you.

Many of the clinics provide free rapid oral testing too which means no needles and you get your results while you wait. For more information about Text for Testing, contact the Pitt Men's Study by sending a message to PMS@stophiv.pitt.edu.

