

## IN THIS ISSUE

Pg. 2  
- Clients Rights-  
- Annual Family Picnic

Pg. 3  
- Open Door Family  
Practice

Pg. 4  
- 10 Keys to Live Well  
With HIV continued

Pg. 5  
- Magical Thinking in  
HIV: Much More  
than Denial

Pg. 6  
- June Support Groups  
- Zumba

## 10 Keys to Live Well With HIV

From TheBody.com

For most people who have reliable access to modern treatment and health care, managing HIV is not just about survival; it's about living well. But what does "living well" actually mean, and what specific steps can you take to maximize your health and happiness if you're HIV positive?

Here, in brief, are 10 recommendations for how you can improve the quality of your life with HIV -- while also improving its quantity.

### Find Your Purpose

Do what excites you. Rediscover your gifts and talents -- or take the time to develop new ones. Find time to serve others. These are among half a dozen critical pieces of advice our mental health expert David Fawcett, Ph.D., suggests can help you gain and maintain a sense of personal control -- which, in turn, can improve your general health.

Whether it happens on the day of their diagnosis or evolves slowly over time, people living with HIV often rethink their sense of self. "Having a sense of purpose is correlated with lower stress, better health outcomes and an improved overall sense of well-being," Fawcett says. Shock, shame and stigma can throw all of that off balance -- but those same obstacles make it all the more important that you find your center and gain confidence in it.

### Quit Smoking

If you smoke tobacco, you've no doubt already heard and seen an endless stream of efforts urging you to quit. Maybe you've already tried to quit and it hasn't stuck; maybe you feel you're just waiting for the right time; or maybe you just feel it's not important, or even realistic, given everything else you've got going on in your life.

If you feel any of these things, you're far from alone: Roughly 42% of people with HIV in the U.S. smoke, according to a 2013 study, a rate twice as high as among the general population. And quitting tends to be harder for people with HIV.

But if you care about your health (and you wouldn't be reading this unless you did), there may be no more important step you can take than to ditch the cigarettes. Smoking reduces a person's lifespan more than HIV itself -- and HIV-positive folks who smoke have dramatically higher odds of heart attack, lung cancer and pneumonia than people with HIV who don't smoke.

As recent research testifies, there are well-defined paths people with HIV can take -- often with the help of their health care providers -- to get themselves firmly on the road to a tobacco-free life.

As for e-cigs, they may be less deadly than regular cigarettes, but that doesn't mean they're a great alternative. Work It

"I haven't been able to write about HIV much lately," our blogger Matthew Ebert wrote in late 2015. "I don't know why. Maybe because, with work, I feel like I don't even have HIV anymore."

A solid job isn't just good for the piggy bank. The right work can also be good for the spirit: It can help you find a sense of purpose (the importance of which we talked about earlier) and can even be good for your health.

Employment and HIV can sometimes be difficult to navigate, especially when stigma and discrimination rear their ugly heads. But discrimination, and there are great resources out there to help people with HIV get the training and support they need to find and keep a job.

### Get Nutritious

It's easy to overlook the importance of the food we cram into our faces every day for keeping us healthy. But good nutrition -- eating both the right kinds and the right amounts of food -- can bring a whole host of health benefits, including weight management, energy, a stronger immune system and more resilient organs (including heart and bones). It can even help reduce the inflammation associated with so many HIV-related health issues.

Even top HIV doctors have different nutritional advice for HIV-positive people. What they tend to agree on, however, is that dietary changes can often help you avoid taking additional medications that may interact with your HIV medications or potentially cause their own side effects.

**Continue on Page 4**

*News & Views* is a publication of the Open Door Client Advisory Committee (CAC) - developed by clients and staff together to provide up-to-date information on health issues, HIV advocacy and health center events.

*The CAC's mission is to act as advocates for the clients of Open Door by promoting and providing feedback and suggestions in order to improve or enhance continuity of care & client services. Taking action with compassion to address issues of isolation, stigma and misinformation often associated with HIV/AIDS, working to improve overall health and the lives of Open Door clients and the community at large.*



**When it comes to your health information, you have certain rights & Open Door has responsibilities. Every**

**month we will help you learn about them!**

We typically use or share your health information in the following ways:

**Treat you:** We can use your health information and share it with other professionals who are treating you.

**Run our organization:** We can use and share your health information to run our practice, improve your care, and contact you when necessary.

**Bill for our services:** We can use and share your health information to bill and get payment from health plans or other entities.

**Help with public health and safety issues:** We can share health about you for certain situations such as: preventing disease, helping with product recalls, reporting adverse reactions to medications, reporting suspected abuse, neglect, or domestic violence, preventing or reducing a serious threat to anyone's health or safety.

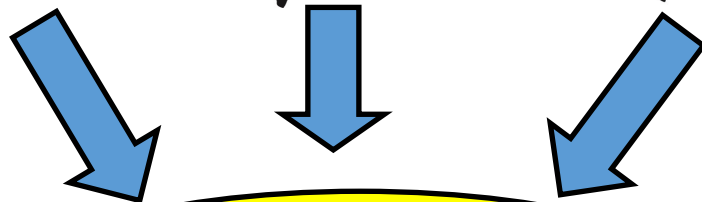
**Do research:** We can use or share your information for health research.

**Comply with the law:** We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

**Respond to organ and tissue donation requests.**

**For a complete copy of how medical information about you may be used and disclosed and how you can get access to this information, please ask the receptionist**

## Notes from the CAC



**COME AND JOIN  
THE FUN**

## CAC Annual Family Picnic

Hosted by

First Congregational Church  
Of Geneva UCC

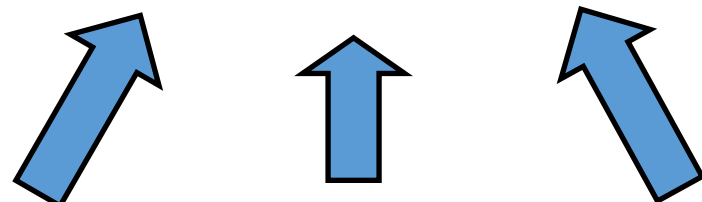
August 13, 2016

- Activities for all
- Activities for the kids
- Fun, Food and Drink

321 Hamilton Street Geneva IL 60134

Please RSVP via

[rsvp.odcac@outlook.com](mailto:rsvp.odcac@outlook.com) or call one of  
the centers ext. 375



## Open Door is now your Family Practice!

Open Door has worked hard to provide quality HIV/AIDS specialty care since the 1980s. We've developed an interdisciplinary team for comprehensive care. Our team approach can now benefit your family members who are age 12 and older.

Open Door is proud to announce the addition of a Family Practice to our medical services. We hope we can become your families choice for routine medical care including yearly exams, vaccinations and referrals to specialists.

*We aim to serve your family with the quality medical care you have come to expect from us.*

Please contact an Open Door staff member for a list of accepted insurance or if you have any questions. Please encourage your family members to schedule an initial consultation with a member of our family practice team - Dr. Daniel Murphy and Monica Herdrich, FNP-C, APN **today!**



## 10 Keys to Live Well With HIV

### Continue from Page 1

"I'm always happy when -- instead of prescribing more pills -- we can fix a patient's health problem with a change in diet," says Joanna Eveland, M.D. Take Supplements Cautiously

Speaking of pills, many people consider vitamins to be an essential part of their daily diets. In some cases, this may be true -- particularly when they're prescribed by a doctor or they're treating a deficiency that diet/exercise changes alone can't fix. HIV medical experts tend to agree, however, that dietary supplements are not and that it's important to speak with your doctor before taking supplements while you're on HIV meds.

For sure, the right mix of vitamins and supplements can complement a healthy diet and help fight the long-term effects of chronic health conditions. But it's important to make sure that you're buying supplements you can trust -- and that the pills you're dishing out hard-earned cash for are really worth it.

In addition, a range of supplements can potentially interact with HIV medications. This is a major reason why it's so important to communicate closely with your health care team about taking them. (Of course, taking supplements *instead* of HIV meds is not a good idea; there are usually workarounds that can allow you to take essential supplements while remaining on successful HIV treatment.)

### Manage Stress

Easier said than done, we know. Stress is a daily reality for plenty of us, and trauma often looms large in the life history of people with HIV.

But whether it's small daily aggravations or major ordeals, stress affects not only your mood, but also your quality of life. Research suggests, for instance, that stress can influence viral load and CD4 count. Taking care of your mental health -- addressing anxiety, depression, trauma and other challenges frequently seen in people with HIV -- can help you manage HIV better and lead to a more vibrant life.

That's why it's important to stop and recognize the signs of stress and what might be causing it, take practical steps to address it and reduce its hold on you.

### Heed the Bigger Health Picture

It's becoming days to hear someone say that a person "died from HIV" -- that is, developed an AIDS-related opportunistic. Instead, when people with HIV fall ill, it tends to be from the same health problems that everyone encounters: cancer, heart problems, organ damage (to the liver, kidneys and bones) and the like.

There's still a great deal of debate about the effect HIV has on these health issues (though HIV-related inflammation seems to play a key role). But there's little question that, by getting regular health checkups and paying attention to potential symptoms, you can both help prevent additional health issues from arising and receive prompt and effective treatment when problems emerge.

There is a wealth of expert advice available and plenty to learn about potential health concerns that aren't considered to be directly related to HIV.

### First, Love Yourself

All people, no matter what their HIV status, deserve to be in loving, supportive relationships. Abusive, violent or unhealthy relationships decrease the quality of many people's lives, but some fear that if they leave their partners, no one else will want them.

Reliable, judgement-free support can be hugely valuable to your health and well-being, whether it's found through a romantic relationship, family, close friends or a support group. But it starts with accepting that you're worthy of love and respect.

Likewise, figuring out how, when and whom to tell that you're HIV positive can feel like walking through a minefield -- but it all starts by finding strength within yourself.

### Avoid and Treat STIs

HIV, of course, is a sexually transmitted infection (STI). But it's often not the only one that an HIV-positive person has to think about. Having an undetectable HIV viral load means that you have virtually no risk of transmitting HIV -- but you can still acquire or transmit other STIs.

In fact, STIs are common among people with HIV, particularly (and increasingly) gay men. But most are easy to detect and treat. Good thing, too, because if they're left undiagnosed and untreated, many STIs can become serious; HPV, for instance, is a major cause of cancer in HIV-positive people.

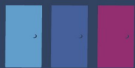
There's great information and advice available for HIV-positive people about STI prevention and treatment, whether you're a gay man, a woman or anyone betwixt and between.

### Curb Alcohol and Drug Use

Addiction and HIV have a long, close relationship. Finding a way to break them up can be one of the harder things a person with HIV will ever have to do. TheBody.com is home to many stories by and about HIV-positive people who have dealt with substance use in their lives. We also have an expert who has answered tons of questions about alcohol, meth, poppers and plain ol' marijuana, among many other topics.

There are few factors that can reduce the length -- and quality -- of an HIV-positive person's life as much as recreational drug or heavy alcohol use. On the flip side, recovery can completely turn a person's life around (as well as the lives of friends and loved ones).

There's a wealth of information out there about how to seek help for addiction -- as well as how to use safely if you inject drugs. For people in gay or queer communities who use meth, tweaker.org offers non-judgmental information and resources for reducing harm and finding help.



## Contact the CAC

The CAC welcomes your comments and suggestions at any time. You can contact us three ways:

**via Telephone**  
630.264.1819 ext. 375  
847.695.1093 ext. 375

**via E-mail**  
rsvp.odcac@outlook.com

**via Comment Box**  
Located in the  
reception area



# Magical Thinking in HIV: Much More Than Denial

## How Unrealistic Thoughts Keep People Away From Medical Care

By Drew Gibson

From [Test Positive Aware Network](#)



HIV-related magical thinking can be as prevalent among those who have been in care and on antiretroviral therapy as it is among those who choose not to seek help. The number of people who have been diagnosed with HIV, linked to medical care, and then lost to care is very similar to the number of people who were diagnosed but never linked, with each group representing roughly 1 out of every 5 HIV-positive people in the U.S., according to the CDC.

What this suggests is that it is just as hard, if not harder, to retain someone in HIV care as it is to get them connected to care in the first place. And, while there is a plethora of reasons why an HIV-positive person might be lost to care, I believe that one of the biggest reasons is this sort of magical thinking.

The most notable and bizarre public manifestation of HIV-

positive magical thinking in recent years happened in January when actor Charlie Sheen followed up his public announcement that he was positive by going on *The Dr. Oz Show* and revealing that he had stopped taking his antiretroviral medication in favor of seeing a discredited doctor in Mexico. The doctor claimed to be able to cure HIV with goat milk and, allegedly, injected himself with Sheen's blood in front of him.

The combination of Sheen's celebrity, money, and history of mental health and substance abuse issues may have made his version of magical thinking more sensationalistic than most, but the impetus for his actions and his perception of risk probably weren't much different from that of thousands of HIV-positive people in the U.S. who think their way out of care each year.

I have known people living with HIV who were doing well, were adhering to their antiretroviral therapy, were virally suppressed and who then, for all intents and purposes, dropped off the face of the earth. And, a few months or a few years later, when I finally saw those people again, I found myself talking with someone who was sick, but refused to acknowledge it. They railed against [Atripla](#) and [Truvada](#) and [Stribild](#) as "poison" while telling me about the great new herbal therapies they were on. They said that they were cured or that the HIV test they took way back when was defective and that they had been HIV-negative all along. Others were in a [serodiscordant](#) relationship but had condomless sex with their partner because they were convinced that you couldn't contract the virus by sleeping with someone you truly loved.

All of these are examples of magical thinking. The reasons for the ubiquitousness of this sort of thinking are many and varied, but, ultimately, the simplest explanation for it is the fact that we're human.

At present, two-thirds of HIV-positive individuals in the U.S. who have been diagnosed are currently not in care and, out of that two-thirds, I'm guessing that there is a sizable subgroup of people whose failure to get into and remain in care can be traced back, in part or in whole, to magical thinking.

Thus, the question arises: how do we go about eliminating these harmful thoughts and replace them with thinking patterns that promote consistent engagement with HIV service providers and healthy mechanisms to cope with the day-to-day realities of being positive?

There is no easy answer, but each and every time HIV providers have contact with someone who is positive, they have an opportunity to provide them with support and the reassurance that, regardless of where the person is at, they are willing to meet them there.

Should, as was the case with the young man I discussed earlier, an HIV provider encounter someone who is struggling to come to terms with the reality of their diagnosis, they need to do all they can to listen to and appreciate that person's concerns, no matter how fantastical they may seem. If giving an HIV test to someone who has already been diagnosed is the opening the person provides us to help them deal with their fears and reassure them about the benefits of being in care, then we need to give it because the cost of a seemingly superfluous OraQuick test is nothing compared to the cost of rejecting a client's roundabout invitation for us to help them.

## June Support Groups

01	HIV Health & Wellness Changing Habits & Patterns of Substance Abuse	10am- noon	A
01	HIV Positive Support Group	12-1pm	E*
02	HIV Health & Wellness Changing Habits & Patterns of Substance Abuse	12- 1:30pm	E*
03	HIV Psychosocial Group	4-6pm	A*
07	HIV Positive Support Group	4-5pm	A*
07	LGBT Group	6-8pm	G
08	HIV Health & Wellness Changing Habits & Patterns of Substance Abuse	10am- noon	A
08	HIV Positive Support Group	12-1pm	E*
09	HIV Health & Wellness Changing Habits & Patterns of Substance Abuse	12- 1:30pm	E*
10	HIV Psychosocial Group	4-6pm	A*
14	HIV Positive Support Group	4-5pm	A*
15	HIV Health & Wellness Changing Habits & Patterns of Substance Abuse	10am- noon	A
15	HIV Positive Support Group	12-1pm	E*
16	HIV Health & Wellness Changing Habits & Patterns of Substance Abuse	12- 1:30pm	E*
17	HIV Psychosocial Group	4-6pm	A*
21	HIV Positive Support Group	4-5pm	A*
22	HIV Health & Wellness Changing Habits & Patterns of Substance Abuse	10am- noon	A
22	HIV Positive Support Group	12-1pm	E*
23	HIV Health & Wellness Changing Habits & Patterns of Substance Abuse	12- 1:30pm	E*
24	HIV Psychosocial Group	4-6pm	A*
28	HIV Positive Support Group	4-5pm	A*
28	Transgender Group	6-8pm	G*
29	HIV Positive Support Group	12-1pm	E*
29	HIV Health & Wellness Changing Habits & Patterns of Substance Abuse	10am- noon	A
30	HIV Health & Wellness Changing Habits & Patterns of Substance Abuse	12- 1:30pm	E*

\* Snacks will be served.

## Open Door Health Center Invites You to Their Zumbathon!



**Friday, June 10, 2016**

**6:00pm - 8:00pm**

At Fiesta Mexicana

50 N Spring St, Elgin, IL 60120

*Are you ready to zumba for two hours?*

*Join Adolfo Ramirez and his team from "Bienestar Wellness". Help us raise funds so we may continue to expand our services and create a safe medical space free of stigma.*

\$10 entrance charge per person.

Cold beverages will be available for purchase.

**Register TODAY at [www.odhcil.org](http://www.odhcil.org)**

Please contact Marcos Bostho with any questions at  
847.695.1093 ext. 224 or by email at

[marcosb@odhcil.org](mailto:marcosb@odhcil.org)