

HIV, COVID-19, and ORAL HEALTH FOR SPECIAL POPULATIONS

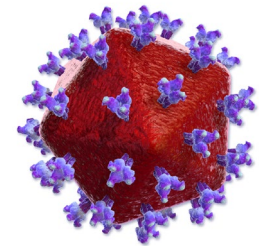


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What is HIV?

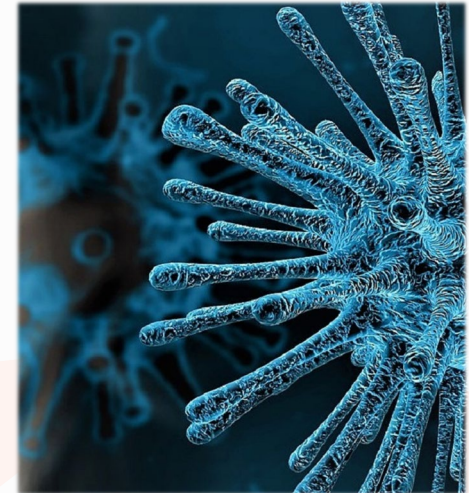
- HIV (human immunodeficiency virus) is a virus that attacks the body's immune system. If HIV is not treated, it can lead to [AIDS](#) (acquired immunodeficiency syndrome).
- There is currently no effective cure. Once people get HIV, they have it for life.
- But with proper medical care, HIV can be controlled. People with HIV who get [effective HIV treatment](#) can live long, healthy lives and protect their partners.



Human Immunodeficiency Virus (HIV)

What is COVID-19?

- COVID-19, 'CO' stands for 'corona,' 'VI' for 'virus,' and 'D' for disease.
- A cluster of pneumonia of unknown origin was identified in Wuhan, China, in December 2019. On January 12, 2020, Chinese authorities shared the sequence of a novel coronavirus termed severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) isolated from some clustered cases.
- The first laboratory-confirmed case of COVID-19 in the United States was confirmed on January 20, 2020.



HIV:

1.2 million people in the US are living with HIV

1 in 7 are not aware of their status and have not been diagnosed

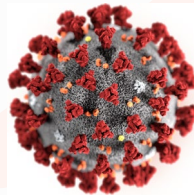


There are 40,00 new diagnoses of HIV per year

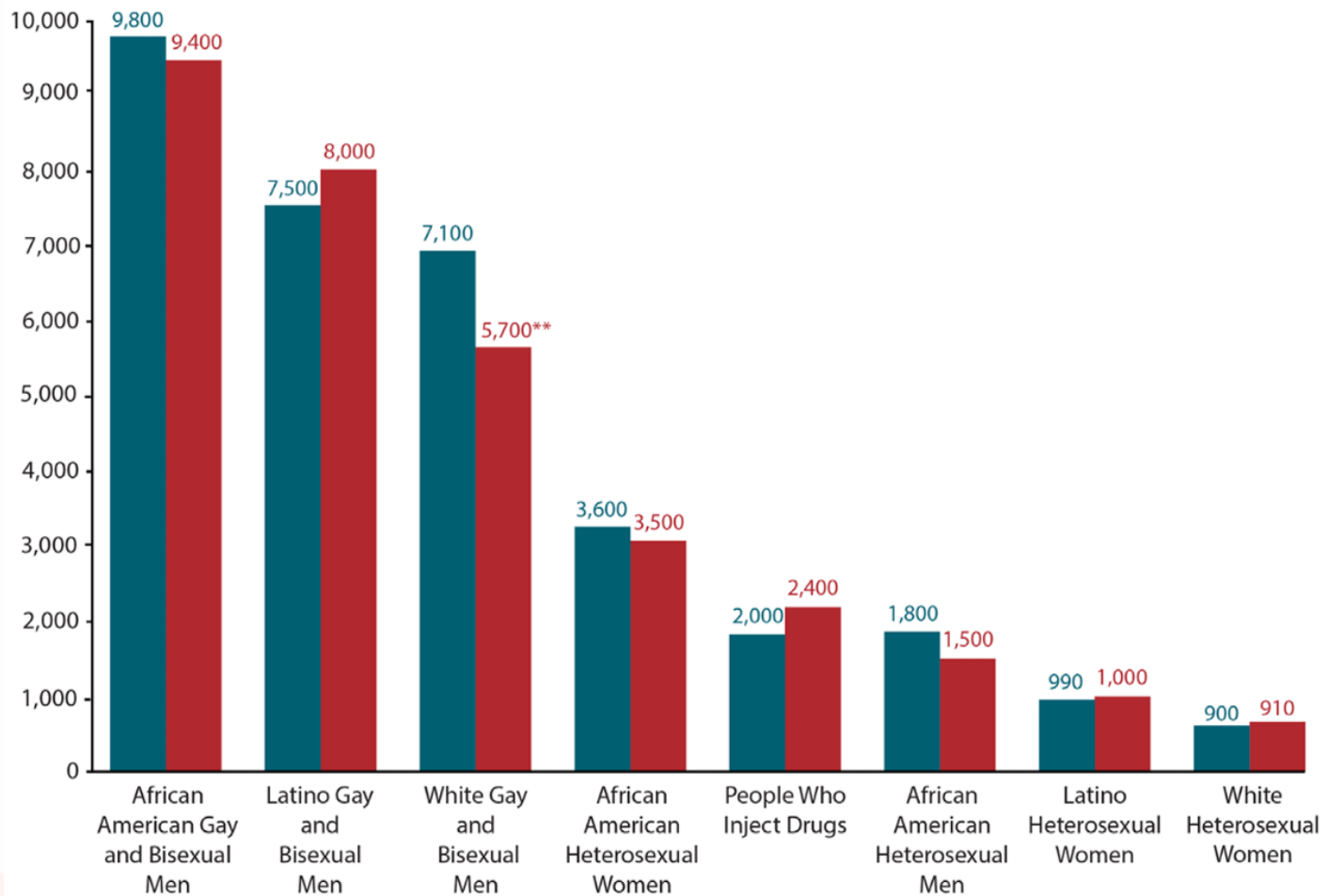
The latest estimates indicate that effective HIV prevention and treatment are not adequately reaching those who could most benefit from them, and certain groups such as men who have sex with men (MSM), transgender persons, African Americans, and Hispanic/Latinx individuals continue to be disproportionately affected. Additionally, the highest rates of new HIV infection continue to occur in the South.

COVID-19:

29.7 million cases



550,000 deaths





Women and Girls, HIV and AIDS

- Women account for more than half the number of people living with HIV worldwide. Young women (10-24 years old) are twice as likely to acquire HIV as young men the same age.
- HIV disproportionately affects women and adolescent girls because of vulnerabilities created by unequal cultural, social and economic status.
- Unaccommodating attitudes towards sex outside of marriage and the restricted social autonomy of women and young girls can reduce their ability to access sexual health and HIV services.
- Much has been done to reduce mother-to-child transmission of HIV, but much more needs to be done to reduce the gender inequality and violence that women and girls at risk of HIV often face.

Women and Girls, HIV and AIDS

- HIV can spread in different ways:
- Through unprotected sex with a person who has HIV. This is the most common way it spreads. Women may be at greater risk of being infected with HIV during sexual contact than men are. For example, vaginal tissue is fragile and can tear during sex. This can let HIV enter the body. Also, the vagina has a large surface area that can be exposed to the virus.
- By sharing drug needles
- Through contact with the blood of a person who has HIV
- From mother to baby during pregnancy, childbirth, or breastfeeding

Women and Girls, HIV and AIDS



- **How does HIV/AIDS affect women differently from men?**
- About one in four people in the United States who have HIV are women. Women who have HIV face some different challenges from men who have HIV:
 - Complications such as
 - Repeated vaginal yeast infections
 - Severe pelvic inflammatory disease (PID)
 - A higher risk of cervical cancer
 - Menstrual cycle problems
 - A higher risk of osteoporosis
 - Entering menopause younger or having more severe hot flashes
 - Different, sometimes more severe, side effects from the medicines that treat HIV/AIDS
 - Drug interactions between some HIV/AIDS medicines and hormonal birth control
 - The risk of giving HIV to their baby while pregnant or during childbirth

HIV and Pregnancy

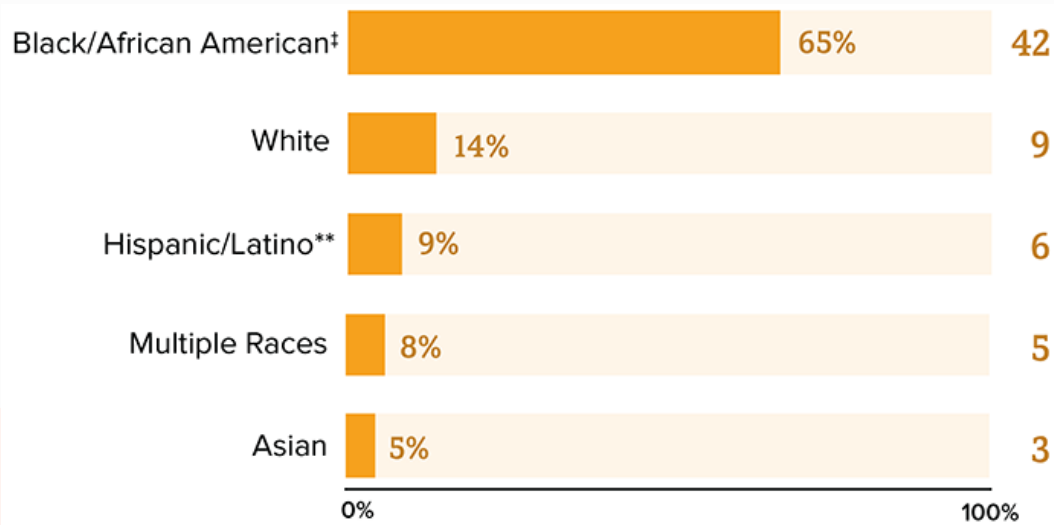


HIV can be passed from mother-to-child anytime during pregnancy, childbirth, and breastfeeding. This is called *perinatal transmission*.

Preventing Perinatal HIV Transmission

Advances in HIV research, prevention, and treatment have made it possible for many women with HIV to give birth to babies who are free of HIV. The annual number of HIV infections through perinatal transmission in the United States and dependent areas has declined by more than 95% since the early 1990s.

Most perinatal HIV diagnoses were among Black/African American children.[†]





Treatment as Prevention

- What is HIV treatment?
- When should I start treatment?
- What if I delay treatment?
- What are the benefits of taking my HIV medicine every day as prescribed?
- Does HIV medicine cause side effects?
- Will HIV treatment interfere with my hormone therapy?

HIV and Pregnancy

What You Can Do If You Are Pregnant and Have HIV



Visit your health care provider regularly.



Take HIV medicine as prescribed to stay healthy, protect your partner, and protect your baby.

Taking HIV medicine reduces the amount of HIV in the body (viral load) to a very low level, called *viral suppression* or an *undetectable viral load*.^{*} Getting and keeping an undetectable viral load is the best thing you can do to stay healthy and help prevent transmission to your baby.



The risk of transmitting HIV to your baby can be 1% or less if you:

- Take HIV medicine daily as prescribed throughout pregnancy, labor, and delivery.
- Give HIV medicine to your baby for 4-6 weeks after giving birth.



If your HIV viral load is not adequately reduced, a Cesarean delivery can also help prevent HIV transmission.



Do not breastfeed or pre-chew your baby's food.

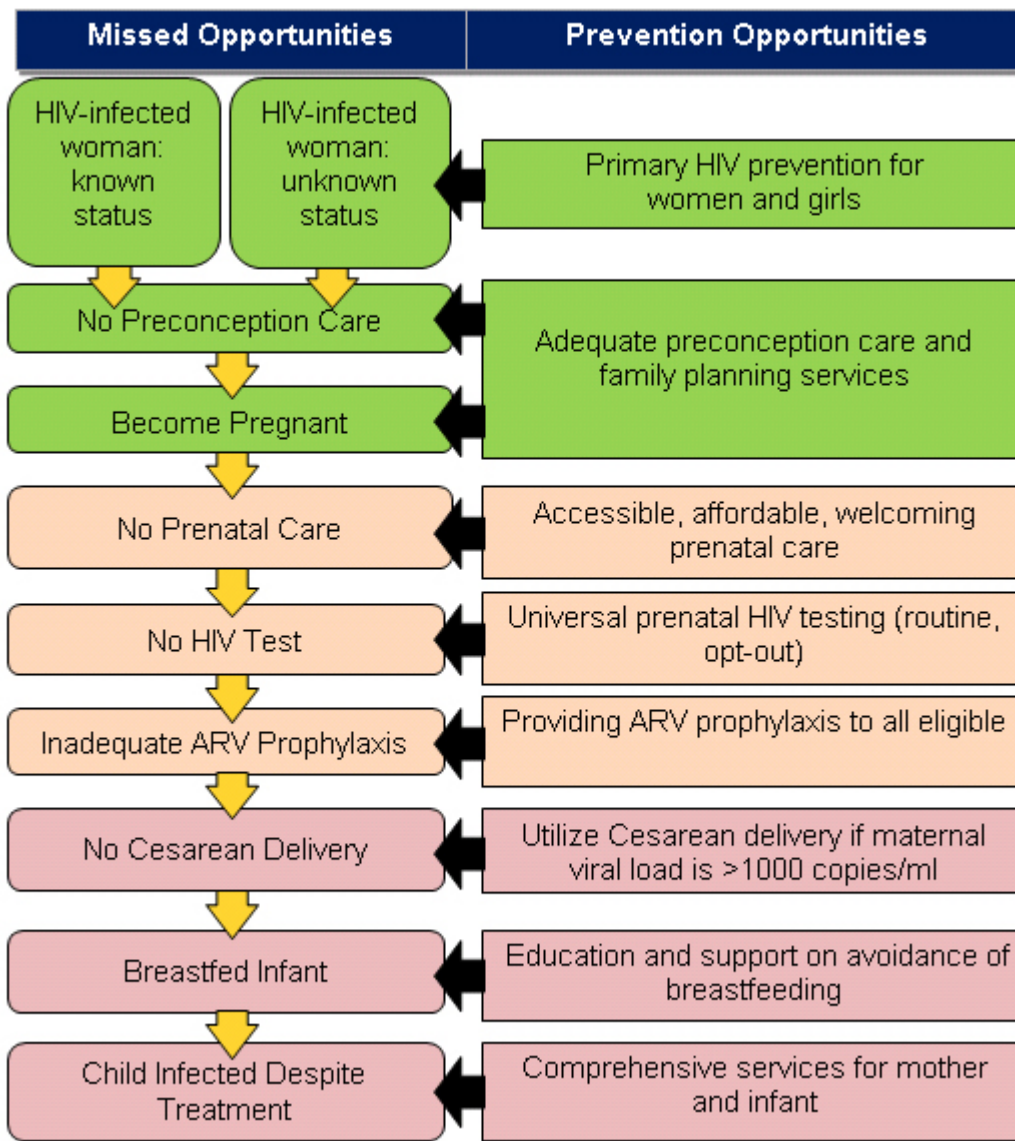
Keeping an undetectable viral load substantially reduces, but does not eliminate, the risk of transmitting HIV through breastfeeding. The current recommendation in the U.S. is that mothers with HIV should not breastfeed their babies.



89% of women reported having sex without a condom in the past 12 months



24% of women reported having anal sex without a condom in the past 12 months



The Transgender Population

HIV and Transgender People

■ Terminology



Transgender: people whose gender identity or expression is different from their sex assigned at birth.



Gender identity: person's internal understanding of their own gender.



Gender expression: person's outward presentation of their gender (example, how they dress).



Transgender women: people who were assigned the male sex at birth but identify as women.



Transgender men: people who were assigned the female sex at birth but identify as men.



The Transgender Population

HIV and Transgender People

- From 2009 to 2014, 2,351 transgender people received an HIV diagnosis in the United States. Eighty-four percent (1,974) were transgender women, 15% (361) were transgender men, and less than 1% (16) had another gender identity.
- Around half of transgender people (43% [844] of transgender women; 54% [193] of transgender men) who received an HIV diagnosis lived in the South.



The Transgender Population

- **Prevention Challenges**
- **There are numerous prevention challenges that may impact the HIV health outcomes for some transgender people. These include:**
 - **Certain behaviors and socioeconomic factors can affect outcomes, HIV behavioral interventions**
 - **Many transgender people face stigma, discrimination, social rejection, and exclusion**
 - **Transgender women and men might not be sufficiently reached by current HIV testing measures.**
 - **Transgender men's sexual health has not been well studied. Lack of knowledge about transgender issues**
 - **Transgender women and men might not fully engage in medical care. Transgender and other gender minority youth are an at-risk group understudied in HIV prevention (e.g., PrEP) and HIV treatment. Transgender-specific data are limited.**

PrEP for Women



- PrEP stands for **P**re-**E**xposure **P**rophylaxis. It means taking medicine **before** being exposed to something to prevent yourself from getting a disease or condition
- PrEP here means that HIV-negative women take an HIV drug to reduce their risk of acquiring HIV if they are exposed to the virus.
- The drug for PrEP in women is called Truvada. Taken one pill per day.
- If taken properly PrEP lowers the risk of acquiring HIV from sex by over 90%
- PrEP does not protect against pregnancy or sexually transmitted disease.



Challenges

- **Sticking to my treatment plan is hard. How can I deal with the challenges?**



COVID-19

People with COVID-19 have reported a wide range of symptoms, from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea



COVID-19

Men appear to suffer more severe cases and die of the disease at greater rates than women, with deaths possibly up to 20 percent higher.

What actions can you take to prevent the spread of COVID-19?

- Cleaning your hands often.
- Avoiding close contact with people who are sick.
- Staying home when you are sick.
- Covering coughs and sneezes with a tissue or the inside of your elbow.
- Cleaning and disinfecting frequently touched surfaces.
- Using a mask in public, especially when it may be difficult to maintain a distance of at least six feet from other people.

COVID-19 and HIV

- Based on limited data, we believe **people** with **HIV** who are on effective **HIV** treatment have the same risk for **COVID-19** as **people** who do **not** have **HIV**. Older adults and **people** of any age who have serious underlying medical conditions might be at increased risk for severe illness
- The risk for people with HIV getting very sick is greatest in:
 - People with a low CD4 cell count, and
 - People not on effective HIV treatment (antiretroviral therapy or ART).
- The best way to prevent getting sick is to avoid exposure to the virus. People with HIV should take everyday preventive actions to help prevent the spread of COVID-19.
- If you have HIV and are taking your HIV medicine, it is important to continue your treatment and follow the advice of your health care provider. This is the best way to keep your immune system healthy.

COVID-19 and HIV/The Vaccine

- The U.S. vaccine safety system makes sure all vaccines are as safe as possible. COVID-19 vaccines have gone through the same safety tests and meet the same standards as other vaccines. People with HIV were included in clinical trials, though safety data specific to this group are not yet available.
- People with HIV are part of the group of people with [underlying medical conditions](#).
- If you have HIV, you may choose to get vaccinated if you have not had [a severe or immediate allergic reaction](#) to any of the vaccine ingredients. If you have a weakened immune system, you should also be aware of the potential for reduced immune responses to the vaccine. If you decide to get vaccinated, continue to take [everyday preventive actions](#) to protect yourself against COVID-19.



COVID-19 and Stigma

Stigma is discrimination against an identifiable group of people, a place, or a nation. Stigma is associated with a lack of knowledge about how COVID-19 spreads, a need to blame someone, fears about disease and death, and gossip that spreads rumors and myths.

- No single person or group of people are more likely than others to spread COVID-19. Public health emergencies, such as this pandemic, are stressful times for people and communities
- [People who have disabilities](#) or [developmental or behavioral disorders](#) who may have difficulty following recommendations;
- Groups who experience stigma may also experience discrimination. This discrimination can take the form of:
 - Other people avoiding or rejecting them;
 - Getting denied healthcare, education, housing, or employment;
 - Verbal abuse; or
 - Physical violence.
- Stigma can negatively affect the emotional, [mental](#), and physical health of stigmatized groups and the communities they live in. Stigmatized individuals may experience isolation, depression, anxiety, or public embarrassment. Stopping stigma is important to making *all* communities and community members safer and healthier. Everyone can help stop stigma related to COVID-19 by [knowing the facts](#) and sharing them with others in their communities.



HIV and Oral Health

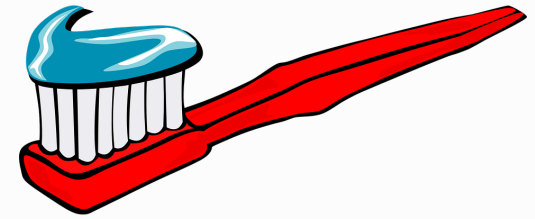
- People with human immunodeficiency virus (HIV), the virus that causes acquired immunodeficiency syndrome (AIDS), are at special risk for oral health problems.
- People with HIV/AIDS have an increased risk for oral health problems because HIV/AIDS weakens the immune system and makes it harder to fight off infection.
- The relationship between oral health and overall health is well established.



Covid-19 and Oral Health

- The American Dental Association (ADA) has been tracking developments of tongue and mouth issues COVID-19 patients experience since early on in the pandemic. Oral health is an important and vital part of overall health, and the ADA is continuing to examine the connection between the two as it relates to COVID-19.

Basic Oral Health Care



Home Oral Care Recommendations to Reduce the Risk of Caries and Gum Disease Advise all patients to:

- Brush teeth twice a day with fluoride toothpaste
- Clean between teeth daily
- Eat a healthy diet that limits sugary beverages and snacks
- See a dentist regularly for prevention and treatment of oral disease
- For patients with increased risk of gum disease, consider mouth rinse or toothpaste with proven antimicrobial activity
- For patients with increased risk of caries, consider fluoridated mouth rinse
- For patients who struggle to clean between their teeth, consider what interdental cleaning tool might be best
- For patients seeking or needing improved plaque removal, consider a power toothbrush
- Discourage practice of do-it-yourself orthodontic treatment
- Recommend that patients drink fluoridated water
- Discuss tobacco cessation (smoking and smokeless tobacco)
- Recommend that patients avoid oral piercings



thank you!