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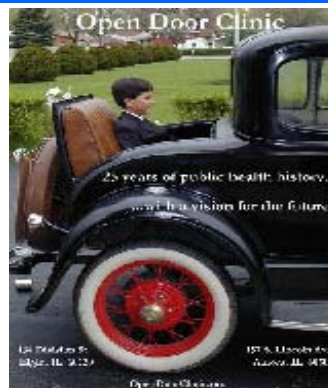
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Open Door Clinic (ODC) – The Basics

By: David M. Roesler

Welcome to the first edition of our Open Door Clinic (ODC) NEWSLETTER. We have the Client Advisory Committee to thank for taking on this project. For my part, I've been asked to give you the basics of what ODC is and stands for. As Executive Director, it is my pleasure to give you a brief summary of our clinic's purpose, history and current services.

ODC is a non-profit organization, governed by a 10 member volunteer Board of Directors, and staffed by 15 full and part-time employees. All our staff and volunteers are dedicated to the respect, confidentiality and dignity of our clients and are committed and trained to offer culturally competent care at both locations in Aurora and Elgin, IL. ODC's mission is to provide the best full-service confiden-



tial sexual health & wellness clinics for our communities and to end the stigma and discrimination of people with Sexually Transmitted Diseases (STD's) including HIV/AIDS.

We opened our doors in 1975 to provide STD testing and treatment at the height of the sexual revolution. Today we are nearing the end of 31 years and 25,000 satisfied customers! Sixteen (16) years ago ODC began offer-

ing specialized HIV/AIDS Medical Care 1 day every other week in Elgin and Aurora and today we offer 24/7 primary care coverage for all of our HIV+ clients. People Living with HIV/AIDS (PLWHIV/AIDS) have a primary care home at ODC and no longer have to use hospital emergency rooms as their primary source of medical treatment.

ODC offers PLWHIV/AIDS an array of complimentary therapies and services designed to improve their quality of life and assist in their ongoing treatment adherence and transmission risks. These services include: Case Management, Mental Health/Substance Abuse Therapy, Dental Care, Nutrition Assistance and HIV+ Support Groups. Dedicated to stopping new

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NEWSLETTER NEEDS A NAME

By: Dean

The newsletter needs a BOLD but clever name. We are asking you to put you creative minds to work. We are looking for names that will get peoples attention and that would make them want to read this newsletter.

give your ideas to your case managers or send them to my email address at deanb@opendoorclinic.org.

Also if you have any articles or ideas for the newsletter that you think that would be of interest please give them

to your case managers or send them to me. I hope that you will enjoy this newsletter and get important information that you will use apply to your lives.

We are planning to publish this newsletter every other month. Thank You

CAN I TAKE THESE MEDS FOR THE REST OF MY LIFE?

By Deneen Fountain

I am a woman living with HIV. The decision to take medications, or change medications, has always been difficult. I know how important it is that I take my meds every day and on time. With this in mind, I try to ensure that my choice of therapies supports my ability to adhere to a medication schedule.

Here are five tips that have ensured proper adherence to my medication regimen:

1. Plan ahead. Make an informed decision with your physician.
2. Read current literature on medication before you begin the therapy.
3. Choose your therapy based on your current lifestyle.
 - * Do you have a job?
 - * Are you a parent?
 - * What is the busiest time of day for you?
4. Begin your medication when

you have time to deal with the side effects. My personal rule is to begin my medication on the weekend so I can adjust before I return to work on Monday. I also send my children to the babysitter and inform my husband so he can clear his schedule to be home with me just in case I need him.

5. Finally, have a support system in place to call on if you need encouragement.

Theses tips have worked for me. Using them helps me maintain a healthy, well-balanced life with

Here are five tips that have ensured proper adherence to my medication regimen:

CAN I TAKE THESE MEDS FOR THE REST OF MY LIFE?

CONTUNED FROM PAGE 1

transmissions, ODC provides peer counselors and confidential and free anonymous HIV testing, harm reduction supplies (condoms and bleach kits), and information to well over 3000 individuals at high-risk of contracting HIV/AIDS and other STDs every year. ODC's website, at www.opendoorclinic.org, provides general information about STD/HIV/AIDS prevention and intervention

services offered by ODC as well as valuable links to related information and services. Our commitment to a about our Continuous Quality Improvement (CQI) Committee in 2003. A necessary program that works to measure program quality and outcomes. In addition it has sparked the birth of our Client

Advisory Committee (CAC), comprised provide valuable insight into the needs of PLWHIV/AIDS. The success of The Legacy Campaign began with our CAC members and now they are about to roll out a support and mentoring program coordinated by PLWHIV/AIDS for new HIV+ clients

and, as I wrote earlier, they have ODC's successful 31 years is due to its commitment to and inclusion of our clients. Without you, we are nothing. I hope I gave you a brief but thorough explanation of what ODC is and stands for. Thank you for reading and thank you for choosing Open Door Clinic!

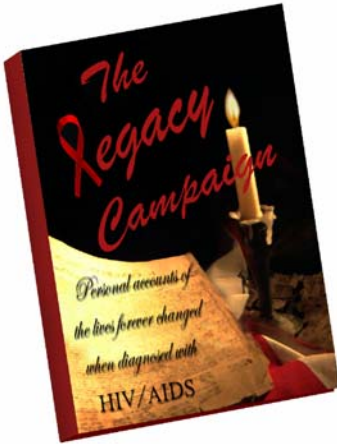
THANKS LEGACY SPEAKERS

The CAC and the staff would like to thank all of the PEER OPINION LEADERS (Legacy Speakers) for taking time out of there schedules for going out to the different schools, organizations and shelters. I am sure that we had an impact on those that we told our stories to and I hope that this will continue in the near future. Thank you all..

- | | | | | | |
|--------|-----------|----------|---------|--------|--------|
| Angela | Shirley | Josefina | Pam | Tom | Greg |
| Annie | Karen | Abraham | Verlana | Julio | Martin |
| Char | Dominique | Sabrina | Dean | Johnny | Luis |



A new way to fight HIV/AIDS stigma and discrimination!



**“this gift
is to be
passed
along
when you
have
finished”,**

By: David M. Roesler

Open Door Clinic has begun collecting, and making accessible to our community, the personal stories of PLWHIV/AIDS through “**The Legacy Campaign.**” The 45+ stories compiled demonstrate the diversity of lives impacted by HIV/AIDS here in the Heartland. They offer a powerful glimpse into the personal struggles of these courageous individuals who hope that their stories can contribute to limiting new infections while correcting and eliminating unwarranted fears, stigmas, and discriminatory practices where they live and work.

We have collected more than 45 stories and counting! *If you are HIV+ take some time to write and submit your story, it can be anonymous, to the Legacy Campaign and we will add your story to our website for others to read and benefit from! Any PLWHIV/AIDS can submit their story of “How HIV has affected their lives” to info@opendoorclinic.org ! (Each story writer receives \$15 for their submission)*

The Legacy Campaign has published the first 45 stories in paperback form for sale and distribution. These stories should be mandatory reading for the HIV-community! At \$15 each, this book is an inexpensive tool for helping people you know and love to understand better what

PLWHIV/AIDS experience in our suburban and rural communities. We are looking for Champions, special PLWHIV/AIDS and their supporters, living in the western suburbs, willing to give these books away during the holidays with a note written inside that simply says, **“this gift is to be passed along when you have finished”**, our community’s culture of ignorance and stigma could be overtaken by education and compassion in record time. Become a Champion in the fight against HIV/AIDS stigma and discrimination and make a difference in the world around you! It starts with all of us being willing to get these stories into the hands of our leaders; leaders of families, of groups & organizations, of businesses, of governments and leaders of our churches and religious

organizations. Each of us knows at least 2 leaders that would benefit from these stories and in turn can influence many around them. If you don’t have \$15, you can send them an e-mail or a card with the link to www.opendoorclinic.org where anyone can access all of the stories for free. Our website is experiencing over 3,000 hits each day!

Finally, another outcome from The Legacy Campaign is the 18 PLWHIV/AIDS that have become certified Speakers and are courageously going out with ODC peer counselors to at-risk groups to tell their stories. So far more than 700 at-risk youth and adults have heard the personal stories of PLWHIV/AIDS through the Legacy Campaign.

Get involved helping us make our community a better educated and less stigmatized place to live and work for all people! Go Legacy Campaign!!!





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THE OTHER IMPORTANT LAB TESTS

By Liz Highleyman

Most HIV+ people know they need regular lab tests including complete blood count (CBC), viral load and CD4 cell counts. But the following lab tests are also important for your health:

Liver Function

HIV medications can be hard on your liver. Liver function tests show how well your liver is working. These include the liver enzymes ALT (SGPT), AST (SGOT), GGT and alkaline phosphatase (AP). Another test, prothrombin time (PT), measures if the liver is making enough proteins for blood clotting.

Bilirubin

A high bilirubin level can be a sign of liver or gall bladder problems. People taking the protease inhibitor Reyataz should have their bilirubin level checked regularly (although having a high level when taking this drug does not necessarily mean there is a problem).

Kidney Function

Some medicines, like Viread, can cause

kidney problems. Lab tests for kidney function include creatinine, urinalysis, blood urea nitrogen (BUN) and uric acid.

Amylase

HIV drugs like ddI can cause inflammation of the pancreas (pancreatitis). A high level of an enzyme called amylase can be a sign of pancreas problems.

Lactic Acid

Certain HIV drugs (especially ddI and d4T) can cause elevated lactic acid, also called lactic acidosis. This condition is rare but can be serious. See your doctor if you develop nausea, stomach pain or shortness of breath while taking these drugs.

Glucose

Some HIV drugs can cause insulin resistance, which can lead to high blood sugar and diabetes. It is hard to measure insulin directly. Instead, your doctor will measure your fasting glucose and glucose tolerance.

Lipid Levels

Some HIV drugs increase the level of lipids (fats) in the blood, which can cause heart problems. Monitor your cholesterol and

triglyceride levels.

Hormone Levels

Testosterone levels are often low in HIV+ men and women. This can cause decreased sex drive, fatigue and depression. Tests for testosterone and other hormones like estrogen are available.

DEXA and BIA (not blood tests)

Some HIV+ people have low bone mineral density (osteopenia or osteoporosis). This means your bones may break more easily. A DEXA test uses X-rays to measure the density of bones like your hip and spine. Some doctors recommend a baseline bone density test when you first test HIV+ or before you start treatment.

Body fat changes (lipodystrophy) are another side effect of some HIV medications. The DEXA test and another called BIA show how much fat you have compared to lean muscle tissue.

Many lab tests can be done at the same time as your viral load and CD4 cell tests - every three to six months. Some tests should be done more often when you start a new drug. Other tests are done only if you have symptoms or if your doctor thinks there might be a problem. Ask your doctor about the best testing schedule for you and report new or worsening symptoms.

See also: Understanding Your Lab Results at www.criany.org/treatment/treatment_edu_lab_results.html

Liz Highleyman is a medical writer in San Francisco.

UPCOMING EVENTS	
<u>JANUARY</u>	<u>FEBRUARY</u>
1 Happy New Year	6 New To Care Support Group 3pm (A)
2 Office Closed	7 National Black HIV/AIDS Awareness Day
8 Support Group 5pm (E)	13 New To Care Support Group 3pm (A)
15 Martin Luther King Birthday	14 Happy Valentines Day
15 Office Closed	20 New To Care Support Group 3pm (A)
16 CAC Meeting (?)	21 Bingo (E)
19 Support Group 5pm (A)	
23 New To Care Support Group 3pm (A)	
24 Bingo (E)	
30 New To Care Support Group 3pm (A)	