

# Positive Views

Making a Difference Together—Spring 2010



AIDS Committee of Guelph and Wellington County, (519) 763-2255

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## New Women's Community Development Program

**T**he AIDS Committee is pleased to announce the creation of a new Women's Community Development Program. The program will aim to build and enhance local community capacity within our community to respond to women's HIV and AIDS prevention needs and to improve the quality of life for women living with or affected by HIV and AIDS.

Providing women with HIV prevention initiatives and programming is vital for our community. Each year in Ontario, approximately 300 women test positive for HIV. Roughly 15% of all those diagnosed with HIV in Ontario are female, and women now make up an increasingly large proportion of new HIV cases in Ontario (Ontario HIV Epidemiologic Monitoring Unit 2009).

Women's health needs vary greatly from those of men. The primary HIV risk factor for women today is heterosexual sex. During heterosexual sex women are at an increased risk for contracting HIV due to the larger amount of mucous membrane exposed in the vagina. In addition, women have increased vulnerability to opportunistic infections and do not always show symptoms for HIV infection. Therefore early detection and prevention messaging targeted specifically to women is needed.

As a result of this new program, we are aiming to reduce HIV transmission among women, as heterosexual women are now considered to be an at risk group for HIV infection in Canada. In addition, Ontario

has the highest number of HIV cases among women of all ages in comparison to all other provinces and territories. By enhancing community capacity to address HIV and AIDS and women, we are hoping our program will allow local community agencies to feel confident in providing HIV prevention messaging and support for their clients to prevent transmission from occurring.

Over the course of the next several months, the AIDS Committee will be creating new relationships throughout Guelph and Wellington with local organizations that serve women, or those that offer women specific programming. In creating these partnerships, we hope to not only respond to women's growing needs in the area of HIV and AIDS, but allow us as a community to work together to strengthen our partnerships and commitment to improving the health of women.



**A TASTE  
FOR LIFE**

**APRIL 28<sup>th</sup>, 2010**



A Benefit Fundraiser for The AIDS Committee of Guelph and Wellington County,  
The Bracelet of Hope Campaign and The Masai Centre for Local, Regional and  
Global Health

**Saturday, May 29th, 2010**

The Delta Hotel and Conference Centre  
50 Stone Road West, Guelph ON



## What symptoms affect women with HIV?

Women with HIV infection can experience most of the symptoms that men with HIV do. In addition, there are some HIV/AIDS-related conditions that affect only women. These can include menstrual problems, vaginal infections and more frequent diseases of the cervix, such as abnormal-growths on the cervix (cervical dysplasia) and cervical cancer.

Women may also experience different effects from HIV medications than men do. In addition, there are unique concerns about pregnancy and child care that affect HIV-positive women.

### Menstrual problems

- Women with HIV may experience changes in their periods. Women may develop irregular cycles, heavier or lighter bleeding, or they may stop menstruating.
- In addition, women with HIV may experience more severe symptoms of PMS (premenstrual syndrome).

These changes may or may not be directly related to HIV infection. Many other factors, such as long-term stress, severe weight loss, long-term substance use, pregnancy, other chronic illnesses or regular use of some medications can also cause changes in menstrual periods. If you are having any of these problems, they should be checked out by your family doctor and/or a gynecologist (a doctor who specializes in women's reproductive health).

### Vaginal infections

Vaginal infections, especially yeast infections, are common in HIV-positive women. Because of the weakened immune system, some of these infections may keep coming back and may require more aggressive treatment than usual.

### Cervical dysplasia

Cervical dysplasia, an abnormal growth or change in the cells of the cervix, occurs more frequently in HIV-positive women than in HIV-negative



Canadian AIDS Treatment  
Information Exchange

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*Plain and simple facts*

# WOMENS HEALTH

women. This is a pre-cancerous condition that, if left untreated, may develop into cervical cancer. Fortunately, cervical dysplasia and cervical cancers are preventable. Having regular Pap smears to screen for these conditions will enable you to get treatment early.

### Effects of HIV drugs

Using an effective combination of anti-HIV medications can help reduce the amount of virus in your body (your viral load) and improve your body's ability to fight infections by strengthening your immune system. This will often lower the risk of developing infections and symptoms that are related to HIV, including menstrual problems, recurrent vaginal infections and cervical dysplasia.

On the other hand, women may experience different side effects to some of the anti-HIV medications than men, and may require different doses. Some women who take prote-

ase inhibitors notice changes to their body shape, especially breast enlargement and an increase in waist size. In addition, some anti-HIV medications may affect birth control pills. Make sure to discuss with your physician the effects of all the prescription and non-prescription drugs you are taking, including birth control pills, supplements and herbs.

### Pregnancy concerns

Being HIV positive does not mean you cannot have children. It also does not mean your baby will definitely be HIV positive. There are treatments that can be taken during pregnancy and/or at delivery that can reduce the risk of your baby becoming infected by the HIV virus. Please make sure to discuss your concerns with your doctor and midwife. HIV can be spread from mother to child through breast milk, so breast-feeding is not recommended in HIV-positive women.



Tom Hammond, ACG's Executive Director was chosen to be a Torch Bearer for the Vancouver 2010 Olympics. Tom's commitment to making Canada an even better place to live is to continue to challenge HIV Stigma in our community and in our country.

The Positive Side, FALL/WINTER 2001, Volume 5 Issue 4

**BONE IS THE MAJOR STRUCTURAL SYSTEM** that provides support for our bodies and acts as a reservoir for important minerals. This living dynamic tissue goes through a constant process of tearing down and rebuilding. In this cycle, minerals move in and out of bones, and when bones lose more minerals than are put into them, they become thin and prone to fracture or break. Many factors affect this process, including nutrition, hormones, medications and disease.

Unfortunately, the bones of people with HIV/AIDS (PHAs) seem to be getting thinner. Research has shown that PHAs, especially those with low CD4 counts, can have low levels of osteocalcin, the primary hormone responsible for building new bone. Usually when PHAs have low levels of this hormone, they also tend to have low levels of vitamin D<sub>3</sub>, the activated form of vitamin D. Though the precise cause of bone loss in PHAs is not clear, it appears as though both HIV infection and HAART (highly active antiretroviral therapy) play a contributing role.

Whatever the cause, it is becoming increasingly clear that PHAs are at high risk of developing osteopenia — loss of bone mineral density (BMD) — and osteoporosis, the more severe form of the disease. But don't go breaking your bones — there are ways to pamper and protect them.

### Tips for better bones

**Stay well nourished.** Get enough calories and protein to maintain lean body mass and weight in the ideal range. Staying strong and healthy supports the skeleton better. Thin people tend to have thinner bones.

**Calcium.** It's the major mineral that the body uses to build bones. The average adult needs 1,000 mg per day, but PHAs, particularly those taking HAART, may need up to 1,500 mg per day. Go for the higher amount if you have AIDS, are menopausal, aren't particularly physically active, or if you're recovering from a period of illness. There is a variety of calcium supplements on the market. Calcium carbonate is the most common type and the least expensive, but calcium citrate tends to be easier to tolerate. Bone meal or dolomite may contain heavy metals such as lead. Be sure to take supplements with food, spread the dose over 2-3 meals, and drink plenty of water. Do not exceed 1,500 mg per day without medical advice. Calcium supplements may have the added benefit of decreasing diarrhea.

**Vitamin D.** In order to function properly, this nutrient — needed to help the body absorb and use calcium — must be activated in the liver and kidney to a form called vitamin D<sub>3</sub>. PHAs tend to have lower levels of vitamin D<sub>3</sub>, but there is no evidence that this is due to a vitamin D deficiency; it is more likely due to problems activating it in the liver. It is possible to get the activated form of vitamin D as a supplement but it may not be practical. The recommended dose of vitamin D for enhanced calcium absorption is 400-800 IU (international units) per day. Note: Vitamin D can be toxic at doses greater than 1,200 IU per day.

**Magnesium.** This nutrient helps build bones and tends to work together with calcium, but there is lack of agreement as to whether magnesium supplements are required to be taken with calcium supplements. However, evidence suggests that magnesium is a commonly deficient mineral in HIV disease, generally making it beneficial to include magnesium in a supplement regimen. Usually people take about three times as much calcium as they do magnesium. Note: Do not

continued on the next page....

## Bone appétit



### Sources of calcium in food



sardines

**300 mg:** 1 cup milk, fortified soy milk or fortified juice; ¾ cup plain yogurt



beans & nuts

**250 mg:** 1 ounce cheese; 2 cheese slices; ¾ cup fruit yogurt; ½ can salmon or sardines with bones



dairy & soy

**150 mg:** 1 cup baked beans, soy beans or white beans; ½ cup pudding or iced milk; 3 ounces tofu made with calcium

**75 mg:** ½ cup bok choy or kale; 1 cup chick peas; ½ cup ice cream; ¼ cup almonds



broccoli

**50 mg:** 1 cup lima beans, kidney beans or lentils; ¾ cup broccoli; 2 tbsp tahini; 2 slices whole wheat bread

## GOOD TO THE Bone

take high doses of magnesium if you have chronic diarrhea because it is a stool softener.

**Zinc.** According to animal studies, zinc may play a role in building bones by improving the positive effect that vitamin D and estrogen have on BMD. A safe and adequate dose of zinc is 50 mg daily.

**Antioxidants.** High levels of oxidized or rancid fatty substances in the blood may suppress the formation of new bone cells. Vitamins E and C are antioxidants that have been shown to decrease the oxidation of cholesterol and lipoproteins (fats in the blood). A safe and reasonable dose of vitamin C is 500 mg once or twice daily. Between 400 and 800 IU/day is a safe dose range of vitamin E.

**Other minerals.** Other nutrients involved in bone metabolism include phosphorus, manganese, copper, boron and silicon. Be sure to take a multivitamin that includes these minerals; it is not necessary to take these nutrients separately.

### Make no bones about it

**Treat malabsorption.** If you have chronic diarrhea, see a doctor to have it investigated and treated. Malabsorption of nutrients decreases the amount of building blocks available to build bone.

**Just do it.** Weight-bearing exercise is necessary for minerals to be taken into bone. This includes activities such as walking, running and weight training (not cycling or swimming). The importance of exercise to build muscle, protect the heart and maintain strong bones cannot be overstated. People who have limited mobility due to illness, pain or neuropathy are at very high risk of developing thinner bones and need to ensure that all other risk factors are addressed. If you're not sure how to get started, ask your doctor for a referral to a physiotherapist.

### A bone to pick

**Cut down on smoking and drinking.** Smokers tend to have lower bone mass; heavy drinking increases the risk of osteoporosis.

**Cut down on caffeine and salt.** Foods high in salt cause calcium to be lost from the body. Caffeine causes bone loss, even as little as two cups a day.

### More ways to build them bones

**Know your estrogen / testosterone levels.** These hormones have a major anabolic effect on bone. Menopausal women may want to consider estrogen replacement therapy to protect bones. Hypogonadal men (having low testosterone) may benefit from testosterone replacement therapy. Talk

about it with your physician.

**Know your BMD.** To find out about your bone mineral density, doctors can order a special X-ray scan called DEXA. There is usually a fairly long waiting list but the test is covered by provincial health insurance.

Feeling singled out with a big to-do list? Living with HIV is not the only risk factor for loss of BMD. Some factors that increase the risk of developing osteoporosis are beyond your control, such as getting older, family history, and being female, white or Asian. Other conditions such as diabetes, inflammatory bowel disease, menopause, amenorrhea (no periods), low testosterone levels in men, malabsorption, and use of drugs like corticosteroids also increase the risk of losing minerals from the bone.

A registered dietitian can assess your nutritional risk factors for osteoporosis and help you make food and supplement choices that will enhance the health of your bones.

Remember, this isn't just one more thing to worry about. Think of it as a pro-active step toward better health. There just ain't no bones about it.

*Diana Peabody, RD, is a clinical dietitian at the Oak Tree Clinic, which is a part of the Children's & Women's Health Centre of British Columbia.*

## AIDS Committee of Guelph and Wellington County & AIDS Committee of Cambridge, Kitchener, Waterloo & Area

... invites you to attend a workshop with:



The Ontario HIV & Substance Use Training Program (OHSUTP) provides training to substance use, mental health and allied service providers in Ontario, in order to increase knowledge of HIV/AIDS and to promote skills development.

OHSUTP workshops are offered across the province. We are accredited with the Canadian Addiction Counsellors Certification Federation (CACC) for continuing education credits.

Visit us at [www.ohsutp.ca](http://www.ohsutp.ca) to find out more.

**Workshop Topics:** There will be a variety of training materials including PowerPoint presentations, exercises, videos, group discussion and case studies.

- HIV/AIDS 201
- Hepatitis C and HIV Co-infection
- Harm Reduction
- Stigma and Discrimination
- Disclosure and Legal Issues
- Counselling Issues
- Substances 101

[To see full workshop details and a complete agenda, click this box.](#)

#### Date and Time:

Monday, May 10 – 9:00 to 5:00  
Tuesday, May 11 – 9:00 to 5:00

This is a two day workshop; you are expected to attend to both days.



**Location:** Langs Farm Village Association  
887 Langs Drive, Door 3  
Cambridge, ON

#### Refreshments and Lunch:

Lunch and refreshments are \$30 per person and covers both days. Please bring your payment on the first morning, payable to AIDS Committee of Cambridge, Kitchener, Waterloo & Area (ACKWAA)

**Registration and Sign-up:** The workshop is open to all social service providers in the Cambridge, Kitchener and Guelph areas though there is a limit of 50 participants.

1. You will need to register with the [OHSUTP website](#). This is to ensure that the email address submitted is valid and allows you to cancel out of a workshop if necessary.
2. Once you have received confirmation of registration, you can sign up for the workshop. Go to the [Upcoming Workshops](#) section and click on the one scheduled for your region.
3. You can then print the materials for your workshop. Simply click on My Workshops, then click View Agenda and then click View and Print All Topics

*Want to know more? Trouble registering? Contact OHSUTP at 1-866-591-0347 (toll free)*



# Abercrombie Place

## Need Housing?

We have 1 Room Available.

Abercrombie is a shared living arrangement based on a supportive housing model.

If you're interested please contact:  
**Gary Roche**  
housing@aidsguelph.org  
or (519) 515-0699



# A TASTE FOR LIFE

## APRIL 28<sup>th</sup>, 2010

Helping a great cause has never been so EASY or TASTED so Good!

As the memories of the 2009 holiday season fade, our focus turns to the exciting year of events coming your way in 2010. The 2<sup>nd</sup> annual "A Taste For Life" dining out experience will soon be upon us. This year's event is scheduled for **Wednesday April 28<sup>th</sup>, 2010**. We would like to again give a big thanks to all who attended this event last year and enjoyed an evening of culinary delights while supporting a worthwhile cause. We would be amiss not to mention the great support and generous donation we received from our three wonderful host establishments:

- ▶ **BabelFish Bistro—826-6709,**
- ▶ **Manhattan's Pizza Bistro and Jazz Club—767-2440**
- ▶ **NV Lounge—827-1064.**

These three great restaurants will again be part of this year's line up along with these additions:

- ▶ **Borealis Grille & Bar—341-9752**
- ▶ **Carden Street Café—837-2830**
- ▶ **Kelsey's—826-0120**
- ▶ **With The Grain 827-0008—(Lunch 12-4)**
- ▶ **Woolwich Arrow Pub—836-2875**



This past February, ACG partnered with the Univ. of Guelph for Project Serve Canada. A group of motivated students came together during Reading Week to be educated and trained to give HIV 101's to highschool students, this year we reached well over 500! Pictured here are B.J. Caldwell, ACG's Educator, and the Project Serve Team 2010.

**DOES YOUR ORGANIZATION SERVE WOMEN?**

**EVERY YEAR APPROX. 300 WOMEN IN ONTARIO TEST POSITIVE FOR HIV**

**HOW MANY OF THEM WILL WALK THROUGH YOUR DOORS?**

**TO LEARN MORE VISIT [WWW.AIDSGUELPH.ORG](http://WWW.AIDSGUELPH.ORG)**



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# THE 10 Commandments FOR

Lark Lands, The Positive Side,  
FALL/WINTER 2001, Volume 5 Issue 4

# LIVING LONG & WELL WITH HIV

# 1

## Commandment #1: Manage your disease. Do the work.

*Avoid the Humpty Dumpty Syndrome.* We can't keep waiting for people to fall apart so we can try to patch them back together. There are two parts to this commandment:

1. Don't wait to start managing this disease. Begin now.
2. Understand what it really means to manage a disease. It's hard work that never ends, but it's worth it when the payoff is a disease so well managed that you are living well with it, not just longer.

## Commandment #2: Eat what's good for you.

If you don't have the nutrients, you can't build the CD4 cells, T cells or any other immune cells. You've got to have:

- good levels of protein
- good levels of unrefined complex carbohydrates (brown rice instead of white; whole-grain breads, crackers, cookies and pasta instead of those made with nutrient-poor white flour)
- lots of fresh fruits and vegetables, moderate amounts of only the good kinds of fats (mono-unsaturated fats like olive oil and natural fats like butter; avoid the partially hydrogenated oils widely found in margarines, shortenings and many baked goods and snack foods. Read the labels!)

Wash all that down with lots of healthful liquids (water, juices, teas and the like, not chemical and sugar-loaded junk drinks). That's the way you give your body the building blocks it needs to keep up the immense battle against HIV. Always make sure the food you eat and the water you drink is safe.

# 3

## Commandment #3: Do everything necessary to help your body digest, absorb and use food properly.

Even if you're eating the right things, it won't do you any good if you don't have good digestion and the ability to use the nutrients. Many people need to improve how their bodies handle food by supplementing with pancreatic enzymes, vegetable enzymes, hydrochloric acid, acidophilus, L-carnitine and L-glutamine.

# 2

## Commandment #4: Supplement your good diet with nutrients that will help you have slower disease progression and a lot fewer symptoms along the way; always include optimal levels of antioxidants.

Research has shown that supplying the right level of nutrients in the body is associated with reduced disease progression and improvement in long-term survival. In addition, nutrients and enzymes can reduce, eliminate or contribute to eliminating many drug side effects and other symptoms such as fatigue, skin problems, diarrhea, neuropathy, digestive problems, memory or other mental problems, wasting and others.

# 4

# 5

## Commandment #5: Protect your body in every way possible from the damage that infections cause and give your body what it needs to repair itself when damage does occur.

*Continued on the next page*

## HIV & Nutrition



**Do you have questions about your diet?  
Learn about HIV & Nutrition from a registered dietician**

**Where:** Guelph Community Health Centre. Community Room  
**When:** Thurs, March 25, 6:30-8:30pm

Please register with Megan DePutter at 519-763-2255 ext. 161  
Or email [positiveprevention@aidsguelph.org](mailto:positiveprevention@aidsguelph.org)

**Dinner will be served**

**Open to all people living with HIV and AIDS**

First, use the best available treatments; then supply the particular nutrients that the body can use to repair itself. In particular, repair the intestines with zinc, vitamin A, vitamin B<sub>6</sub>, vitamin E, bioflavonoids, vitamin C and, especially, L-glutamine. If necessary, use doses of up to 30 to 40 grams of L-glutamine per day until repair is effected, followed by lower doses (5 to 10 grams daily) for maintenance. You can't absorb nutrients or drugs if you don't keep your intestines healthy, for which glutamine is crucial.

**Commandment #6: Do prophylaxis, where appropriate, add to your pharmaceutical prophylactic regimen the nutrients and natural therapeutics that help protect you from infections and that help you fight them when you get them.**

6

Important nutrients for protection from infections: L-glutamine (intestinal, lung, oral and cervicovaginal infections), acidophilus (*Candida* overgrowth and other intestinal infections), oregano extract (*Candida* overgrowth), folic acid (anal or cervical cancer), and a good level of nutrients in general. Remember: Your body's response to any infectious agent or abnormal cell is absolutely dependent on the nutrients needed for a good immune response.

7

**Commandment #7: When appropriate, take the best available antiretrovirals in the best possible combinations and, while you do it, protect your body from their side effects.**

When you reach the point at which HAART (highly active antiretroviral therapy) is appropriate, it is terribly important to remember that you must have good nutritional status for the body to use drugs effectively. By maintaining the optimal nutrient levels that promote strong immune function, your body will be better able to work with the drugs to suppress the virus and slow disease progression. When the virus is suppressed, optimal nutrients will also help in the restoration of lost immune function since nutrients are the building blocks for immune cells. Always remember that virtually every known nutrient is related to some aspect of immune function.

Last, but definitely not least, nutrients may help protect you from drug side effects:

- for liver-toxic drugs (indicated by increases in your liver function tests): alpha-lipoic acid, NAC, vitamin C, L-glutamine, L-carnitine, silymarin (milk thistle extract)
- for the toxicity to mitochondria (your cells' energy factories) caused by nucleoside analogues (which may, in turn, cause or contribute to neuropathy,

muscle aches, some aspects of lipodystrophy, and lactic acidosis): carnitine, coenzyme Q<sub>10</sub>, the B vitamin riboflavin, a plentiful supply of all the important antioxidants (alpha-lipoic acid, N-acetylcysteine, vitamin E, vitamin C, carotenoids and selenium)

- for drugs that cause neuropathy: alpha-lipoic acid, L-acetyl-carnitine, gamma-linolenic acid (GLA), magnesium, B vitamins (including B<sub>6</sub>, B<sub>12</sub>, thiamine, biotin, choline, inositol)
- for bone-marrow suppression: B<sub>12</sub>,
- vitamin E
- for kidney-stressing drugs (such as indinavir/Crixivan): Drink lots of fluids!

In addition, to help your body process drugs, supply the nutrients that your body will require when breaking them down. For AZT, that means B<sub>1</sub>, B<sub>3</sub>, B<sub>6</sub>, B<sub>12</sub> and magnesium. For ddI, you need molybdenum (a microtrace mineral), riboflavin and iron.

8

**Commandment #8: Handle the hormone problems of this disease.**

For both men and women, maintaining testosterone and using, where appropriate, recombinant human growth hormone (Serostim) may help prevent the loss of the body cell mass (muscle and organ tissue) that keeps you alive, while helping you look, function and feel better. Women may also need female hormone replacement to prevent worsening of PMS, perimenopausal or menopausal symptoms.

**Commandment #9: Exercise.**

Just do it. You need to build up the muscles with progressive resistance exercise like weight training. That's what gives you a body with plenty of the lean tissue that you need for survival.

9

10

**Commandment #10: Program the mind toward healing.**

The power of the mind to boost the body toward healing is amazing. And the power of hope is one of the best tools you can have for long-term survival. Bob Publicover, incredibly long-term (two decades and counting) survivor, says it best: "*Never give up, never give up, never give up.*"

To discuss your personal needs, naturopathic doctors can be located through your provincial naturopathic association, or see your medical practitioner.

Lark Lands, a medical journalist and longtime AIDS treatment educator and advocate, was a pioneer in bringing attention to the need for a total integrated approach to HIV disease. She has presented keynote addresses to many large AIDS conferences in North America and is the science editor of POZ magazine. For her fact sheets and treatment information summaries, go to [www.larklands.net](http://www.larklands.net).

## Support Services Updates!

Things at ACG have been very busy with holiday events, support groups, and workshops over the past few months and there is much more to come.

We continue to enjoy our monthly movie nights here at ACG and invite you to become involved in our many other activities planned throughout the remainder of year. Some of the activities within support services are listed below.

Mondays—Newly Diagnosed Support Group  
7- 8:30PM  
**Call to Register**

Every last Tuesday afternoon of the month we offer Massage Therapy  
**Appointment Necessary**

Every last Tuesday evening of the month is Movie Night from 6-8 PM  
**Call to Register**

Over the next few months we will be completing the planning for our annual Client Education Dinner in Guelph as well as other events and workshops available to clients.

Please keep informed by reading our newsletter and visiting our website at :  
[www.aidsquelp.org](http://www.aidsquelp.org)

**Brian Woolsey  
Support Services**

(519) 763-2255 ext. 126  
[support@aidsquelp.org](mailto:support@aidsquelp.org)

## HIV / AIDS Testing.

1st & 3rd Wednesday of every month

Confidential and Anonymous.

Hepatitis B (open to all)  
Hepatitis A Vaccinations for Men who have Sex with Men (MSM) and Injection Drug Users (IDU's)

Testing is also done for Hepatitis B / C and Syphilis.

Please Note: Testing for STI's are done under a medical record and therefore are Confidential but *NOT* Anonymous. A Health Card is not required.

Testing is courtesy of Wellington-Dufferin-Guelph Public Health Unit.



### DOLLARS & SENSE

Learn to plan for a rainy day!

Thurs., March 25<sup>th</sup>, 2010  
ACG Boardroom 10am-12pm

#### TO REGISTER:

Call Gary at 519-515-0699

Email: [housing@aidsquelp.org](mailto:housing@aidsquelp.org)

\* Lunch will be provided following the workshop



## IMPORTANT

We are conducting a community-based research study to understand the relationship between employment and health for people living with HIV. If you are HIV positive, over 18 and live in Ontario, we would like to talk to you.

Participants will complete 3 questionnaires over two years.

Financial compensation is provided. Your identity will be kept strictly confidential.

Our Local Research Assistant is Eno  
To participate, please call 1-866-332-2501  
in Toronto: 416-969-4881



## Prime Care Pharmacy Arboretum

Your Health is  
Our Prime Concern



519-837-4594

281 Stone Road, East (in Arbor Medical Centre)  
Open Monday thru Friday, 9:00 a.m. – 6:00 p.m.

ACG is funded through Ontario Ministry of Health & Long Term Care, The Public Health Agency of Canada, The United Way and The Ontario Trillium Foundation. Private and Public Donations.

Charitable Status Number: BN 10668 9821 RR0001



PUBLIC HEALTH  
AGENCY OF CANADA

