

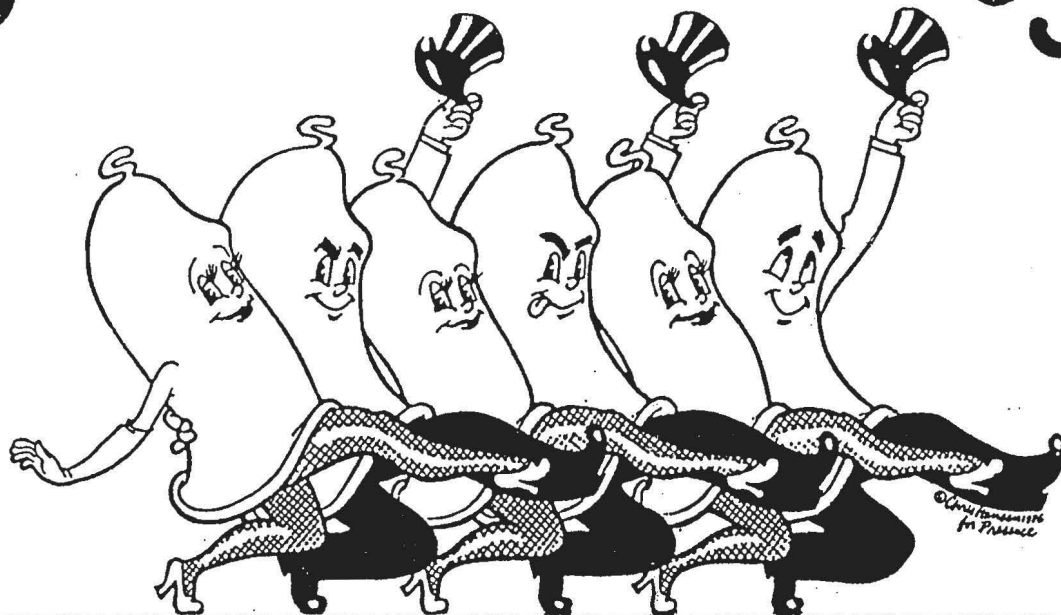
Maine AIDS Alliance

P.O. Box 973
Camden, ME 04843
(207) 236-8561

February 1991

Newsletter

Everybody's Doin' It!



NATIONAL CONDOM WEEK

February 14 – February 21
see pages 4 & 5

Maine AIDS Alliance Members

AIDS Coalition for Lincoln County
PO Box 421
Damariscotta, ME 04543

Contact: Lynn Plumb
563-8953

Community AIDS Awareness Program
PO Box 431
Rumford, ME 04276

Contact: Burt deFrees
369-0259

The Names Project/Maine
PO Box 4319
Portland ME 04101

Contact: Debb Freedman ✓
774-2198

AIDS Lodging House
c/o United Way 233 Oxford Street
Portland, ME 04101

Contact: Steve Pinkham
874-1000

Androscoggin Valley AIDS Coalition
PO Box 7977
Lewiston, ME 04243-7977

Contact: 795-4019

Down East AIDS Network
114 State Street
Ellsworth, ME 04605

Contact: Roberta Poulin
667-3506

Community Task Force on AIDS Education
PO Box 941
Naples, ME 04055

Contact: Peter Allen
787-3266

People With AIDS (PWA) Coalition of Maine
377 Cumberland Avenue
Portland, ME 04101

Contact: Tom Antonik
773-8500

Dayspring c/o KVRHA
Eight Highwood Street
Waterville, ME 04901

Contact: Toni Ervin
873-1127

Waldo County AIDS Coalition
PO Box 956
Belfast, ME 04915

Contact: Nan Stone ✓
338-1427

Eastern Maine AIDS Network Services
PO Box 2038 263 State Street
Bangor, ME 04401

Contact: John Silvernail
990-3626

The AIDS Project
22 Monument Sq. 5th Floor
Portland, ME 04101

Contact: Marjorie Love ✓
774-6877

Merrymeeting AIDS Support Services
PO Box 57
Brunswick, ME 04011-0057

Contact: Brian Allen
725-4955

St. John Valley AIDS Task Force
PO Box 431
Fort Kent, ME 04743

Contact: Joanne Fortin
834-3155 x194

- Feb. 7** First meeting of **Women's HIV Support Group**, to meet in Bangor. For location and information, call 947-0700, 667-3506 or 469-6405
- Feb. 12** **Support Group for Caregivers** This new group is sponsored by Down East AIDS Network, and will meet every other week from 7:30 - 9:00 pm. For more information, contact Roberta Poulin at 667-3506 or 469-6405.
- Feb. 14 - 21** **National Condom Week**
- March 1** **Working with the Media** An ITV training for Maine AIDS Alliance member organizations. Sponsored by MAA. Call Peaches Bass at 236-8561 for more information.
- March 15** **Puberty Education—Essential Building Blocks for Self-Esteem** in Camden. Call Mary or Lisa at Mid-Coast Family Planning, 596-8655 for more information.
- March 20** **HIV/AIDS Prevention in the 1990's for the College Campus** University of Southern Maine, Portland. The speaker will be Dr. Richard Keeling, chair of the American College Health Association. HIV/AIDS Task Force. For more information, call 780-5370.
- May 1** **Second Annual Mid-Coast Sexuality Education Symposium** in Camden. Call Mary or Lisa at Mid-Coast Family Planning for more information. 596-8655.

Announcement

Maine High Risk Insurance Organization Accepting Enrollees

The Maine High Risk Insurance Organization currently has over 200 open enrollment slots. The MHRIO is a health insurance plan initiated by the Maine Legislature. It offers health insurance to people who can't obtain sufficient coverage due to their medical conditions. The plan offers a standard indemnity policy at slightly higher premiums. In order to be eligible, a person has to be a Maine resident and be able to show evidence of rejection for insurance and non-eligibility for other health coverage programs.

Applications can be made directly to the plan administrator, Mutual of Omaha Insurance Company of Nebraska. Their number is 1-800-456-0224.

For further information, contact Deborah Curtis at Maine Bureau of Medical Services, 289-2674 or 1-800-423-4331.

Condoms

Follow these guidelines:

- Use a new condom for every act of intercourse.
- If the penis is uncircumcised, pull the foreskin back before putting the condom on.
- Put the condom on after the penis is erect (hard) and before **any** contact is made between the penis and any part of the partner's body.
- If using a spermicide, put some inside the condom tip.
- If the condom does not have a reservoir tip, pinch the tip enough to leave a half-inch space for semen to collect.
- While pinching the half-inch tip, place the condom against the penis and unroll it all the way to the base. Put more spermicide or lubricant on the outside.
- If you feel a condom break while you are having sex, stop immediately and pull out. Do not continue until you have put on a new condom and used more spermicide.
- After ejaculation and before the penis gets soft, grip the rim of the condom and carefully withdraw from your partner.
- To remove the condom from the penis, pull it off gently, being careful semen doesn't spill out.
- Wrap the used condom in a tissue and throw it in the trash where others won't handle it. Because condoms may cause problems in sewers, don't flush them down the toilet. Afterwards, wash your hands with soap and water.
- Finally, beware of drugs and alcohol! They can affect your judgment, so you may forget to use a condom. They may even affect your ability to use a condom properly.

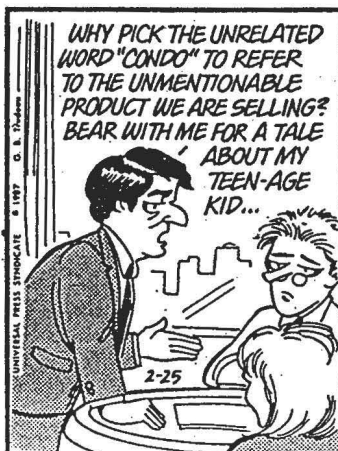
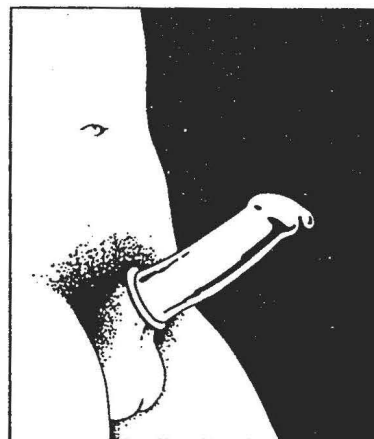
STEP 1



STEP 2



STEP 3



Are condoms from vending machines any good?

A Condom Could Save Your Life!



It depends. Vending machine condoms **may** be OK:

- If you know you are getting a latex condom,
- If they are labeled for disease prevention,
- If you know the spermicide (if any) is not outdated, and
- If the machine is not exposed to extreme temperatures and direct sunlight.

First condom for women tested in U.S.

The world's first condom for women, developed by a Danish gynecologist and his wife, is being tested in the United States, and manufacturers say it could become one of the most effective ways to reduce the risk of contracting sexually transmitted diseases, including AIDS.

The product, WPC-333, which is being produced by the Wisconsin Pharmacal Co., is expected to get the green light from the Food and Drug Administration later this year, officials say.

"WPC-333 is designed specifically for use by women who want contraception and also to reduce their chances of acquiring sexually transmitted diseases," said Mary Ann Leeper, MD, head of the development team that will introduce the contraceptive device to

the United States.

WPC-333 was developed by an international group of gynecologists and obstetricians headed by Danish gynecologist Erik Gregerson, MD, and his wife, Bente. It has already undergone acceptability trials in Europe.

The Associated Press reported in January that the Gregersons had sold the patent on the condom to a British medical firm who will begin producing it there under the trademark Femishield (*AMN*, Feb. 12, 1988). Femishield will not be marketed in the United States, however, according to a Wisconsin Pharmacal spokesman.

A British physician involved with the European trials said most couples preferred WPC-333 to other barrier contraceptives because it was easier to

use and felt better for both the man and the woman.

In addition, the disposable device is made of polyurethane, a material potentially less likely to tear or develop holes than the latex used in conventional male condoms.

Dr. Leeper said WPC-333 would be submitted to the FDA after extensive acceptability and functionality trials to be conducted beginning in March. She thinks that, once available, WPC-333 will be widely accepted by consumers.

"Women already are buying half of all male condoms sold today. Our product gives women the chance to control contraception and to reduce the chances of contracting such diseases as herpes, gonorrhea, syphilis, chlamydia, and AIDS," she said.



Condom for women
Designed to prevent STD spread.

AMERICAN MEDICAL NEWS/ MARCH 18, 1988

Condom Shopping Guide

Use this handy shopping guide as a reminder of what to look for when buying condoms, lubricants and spermicides.

Be sure to choose:

- ☒ Latex
- ☒ Disease prevention claim on package label

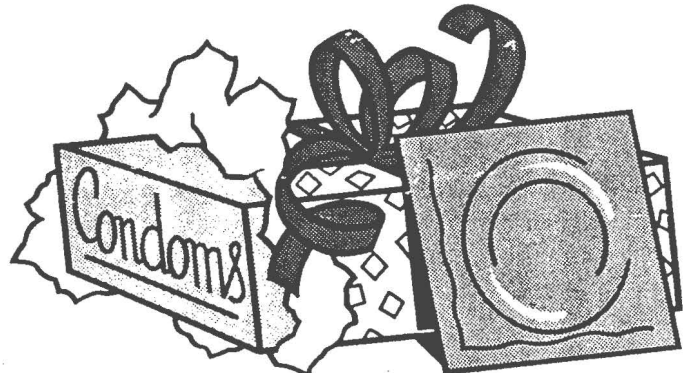
Also consider:

- ☐ With spermicide
- ☐ Separate spermicide
 - ☐ Gel
 - ☐ Cream
 - ☐ Foam
- ☐ With lubricant
- ☐ Separate lubricant (Select only *water-based* lubricants made for this purpose.)

How should condoms be stored?

You should store condoms in a cool, dry place out of direct sunlight, perhaps in a drawer or closet. If you want to keep one with you, put it in a loose pocket, wallet or purse for no more than a few hours at a time.

Extreme temperatures—especially heat—can make latex brittle or gummy (like an old balloon). So, don't keep these latex products in a hot place like a glove compartment.



Protect your love with condoms.

AIDS TREATMENT

This column is a compilation of reports from a wide variety of sources. It is not intended as an endorsement. Consult your physician before embarking on any alternative treatments. At this time there is no cure for AIDS. It would be cruel to insinuate otherwise. However, there is growing optimism within the community that this disease can be better managed and possibly controlled, greatly improving the patient's quality of life!

NUTRITION

Most PWA's are very concerned about nutrition. As we all know only too well, AIDS can wreak havoc with anyone's nutritional status with problems such as malabsorption, diarrhea, oral/esophageal inflammation, nausea/vomiting, infection, reactions to medications, and loss of appetite. Although these symptoms can occur in a wide variety of combinations and are different for each individual, the end result is often the same: severe malnutrition and profound weight loss which further damages the immune system, ruins one's quality of life, and ultimately shortens life. Friends, lovers, and family members become distraught at the sight of their loved one wasting away before their eyes. Most express an agonizing sense of helplessness and are at a loss as to what they should do. Several people have suggested that this month's column be devoted to nutrition and list resources.

I contacted Kathy Lauri, project coordinator for the Task Force On Nutritional Support In AIDS. This task force is made up of an interdisciplinary panel of experts that recently presented the first comprehensive nutritional guidelines for PWA's. These guidelines have three simple goals: 1. preserve lean body mass 2. provide adequate levels of all nutrients and 3. minimize symptoms of malabsorption.

Here are some safe and practical recommendations:

GENERAL NUTRITION: Try to eat a wide variety of foods. Carbohydrates and proteins will give you strength and energy and help you fight infection. Breakfast is important. Don't skip it. Your body needs fuel every morning to help you get through the day. To avoid complications that can be caused by bacteria that exist in the environment, make sure that you wash fruits and vegetables thoroughly. Cook meat well, and NEVER eat raw fish (sushi) or raw eggs. Use only pasteurized dairy products. Stay away from fad diets.

MOUTH PAIN OR SORES. If you have difficulty chewing or swallowing try these suggestions:

1. Eat food served at moderate temperatures (warm or cool). Avoid extremes in temperature (hot or cold).
2. Drink mild drinks such as apple juice. Avoid acidic juices or foods such as oranges, pineapples or grapefruit.
3. Stay away from spices such as chili powder, red pepper or salt when you have open mouth sores.
4. Dunk crackers, toast or cookies in milk, soup or tea to make them softer.
5. Eat moist, non-abrasive, easy to swallow foods like noodles, puddings, canned fruits, scrambled eggs, baked fish, etc.
6. Ice cream and popsicles can help to numb mouth pain.
7. A nutrition shake such as Ensure or Sustacal will help add needed calories.

DIFFICULTY SWALLOWING. Obviously you want to eat foods that will not irritate your throat:

1. Avoid coarse foods such as nuts, corn, or rice which could possibly get stuck in your throat. Eat foods that have a single texture such as mashed potatoes or oatmeal. Avoid combination foods such as stew. Similar texture foods are easier to swallow.

2. Do not eat dry or sticky foods-especially peanut butter! This can be very hard to swallow! Sometimes foods that are "slippery" can also cause a problem. For example, jello, bologna, and certain types of macaroni can slide down too fast and irritate your throat.

3. Use a straw when you drink.

4. Try tilting your head slowly backward or slightly forward when swallowing.

DULLED TASTE SENSATION. You may experience taste changes or a dry mouth as a result of medications. To improve your ability to taste food, try experimenting with different flavors, textures, or temperatures.

1. Try various flavors such as sweet, sour, and spicy.
2. Pick foods that smell good.
3. Marinate foods or add onion, garlic, herbs, or cheeses to enhance the flavor.
4. If you have a dry mouth, drink liquids with your meals and snack on hard candy, gum or ice chips.

DIARRHEA. Obviously, diarrhea can cause weight loss and dehydration.

1. Drink plenty of water and fruit juices.
2. Avoid caffeine.
3. Choose low-lactose foods such as Lactaid products.
4. Eat low-fat foods.
5. Bananas and diluted orange juice will help replace lost minerals.

6. Eat cooked fruits & vegetables without the skin, white rice, and white bread. Do not eat the very high fiber foods such as whole wheat bread, brown rice, raw fruits & vegetables, or corn.

ANOREXIA. If you have lost your desire to eat, for whatever reason, try the following:

1. Eat in a quiet, relaxed, and pleasant atmosphere.
2. Ask a friend to eat with you.
3. Try to eat several small meals a day. Pick out foods you think you might like, rather than depending on someone else to decide what you should eat.
4. Pick foods with faint odors. Strong odors (such as fish or onions) might discourage you from eating. Also, cool foods usually have less odor.
5. Always have some of your favorite snacks on hand. Sometimes sweets will help stimulate your appetite.

NAUSEA/VOMITING. Certain medications can cause nausea and vomiting. Fortunately, this situation is usually temporary, or at least transitory.

1. Drink clear, cool liquids such as apple juice or ginger ale. Try clear soups and gelatin.
2. Do not lie down for at least two hours after eating.
3. Avoid greasy fast foods. Eat low-fat, bland foods.
4. Chilled or cool foods are less likely to contribute to nausea than hot foods. Popsicles can be soothing.
5. Dry crackers or salted pretzels can help.
6. If the smell of food bothers you, ask someone else to prepare it and bring it to you in a room other than the kitchen.
7. Eat before, not after, taking any medication that is known to cause nausea.

NUTRITIONAL SUPPORT. If you are unable to take in enough nutrition through a regular diet, your doctor might suggest a supplement in the form of a blended food product (such as Vivonex) or a shake (such as Sustacal or Ensure).

Often, you will hear the terms "enteral" and "parenteral" nutrition. "Enteral" means that the nutrients are given through the digestive tract, which includes your mouth, stomach, and intestines. "Parenteral" means that the nutrients are given

through a vein. Enteral formulas can be taken by mouth or through a tube. A tube can be placed through your nose into your stomach (known as a "nasogastric" tube), or surgically placed directly into your stomach or small intestine. If you should need a nasogastric tube, a nurse can teach you how to use it so that you can administer your own nutrients without having to go into the hospital.

Parenteral nutrition - intravenous feeding - is usually used only as a last resort, when the digestive tract is no longer functioning well enough to absorb nutrients. (For more on parenteral nutrition, please refer to the AIDS TREATMENT article entitled "THE HICKMAN CATHETER" which appeared in the Feb./March edition of OPTIONS).

A list of nutrition resources is on page 7. You can send away for anything on this list; I hope the information is helpful and answers some of your questions . . .

With love and hope for us all, *Thayer T. Dietrick*

News Androscoggin Valley AIDS Coalition

1. For World AIDS Day, AVAC had an information booth and three Quilt panels at the Lewiston Mall next to Sears entrance. Passersby seemed quite interested and responsive. At 7 pm, we co-sponsored a W.A.D. Service at High Street Congregational Church in Auburn. Several persons closely touched by AIDS gave brief sharing and special music provided time for reflection and meditation.

2. October 12 - 18, AVAC (through the persistence of Steve Fleming) was able to get the Northwood Twin Cinema to run *Long Time Companion* for an entire week. They also permitted an information table in the lobby for the week. We know of several people who traveled over 40 miles to see the flick. If other members of M.A.A. are interested, Steve can tell you how he was able to get the film scheduled.

3. Two successful fund raisers have been held at the Sportsmen's Athletic Club. AVAC voted to turn all proceeds over to direct assistance to PWA's in Oxford and Androscoggin Counties, to be distributed by the case manager, Diana Carrigan, from the AIDS Project. What's most exciting is the sense of increased participation from S.A.C. members, especially dancers, female impersonators, "lip synchers" and comedians.

NUTRITIONAL INFORMATION

Task Force on Nutritional Support in AIDS

c/o Wang Associates, (212) 645-1186

19 West 21st Street, New York, NY 10010

The FDA: 1-800-458-5231

A video cassette on AIDS & nutrition

Wholistic Health Care Approaches to AIDS and ARC

AIDS Action Committee, (617) 437-6200

131 Clarendon Street, Boston, MA 02116

A Guide for Person With AIDS

AIDS Foundation Houston, (713) 623-6796

3927 Essex Lane, Houston, TX 77027

Eating Right and AIDS

NYC Dept. of Health, Div. of Health Promotion

125 Worth Street, New York, NY 10013

(212) 566-7103

****Available in Spanish**

AIDS Handbook: Information About AIDS and Available Services

Montefiore Medical Center, Patient Education Department

111 East 210th Street, Bronx, NY 10467, (212) 920-6058

About AIDS and Shooting Drugs

Channing L. Bete Company, Inc.

200 State Road, South Deerfield, MA 01373

Nutrition and AIDS and ARC

Nutrition and AIDS: Guidelines for PWAs/PWArcs

Henry J. Kaiser Family Foundation, Aris Project

595 Millich Drive, Campbell, CA 95008

Nutrition and Exercise

IBS Press, 2339 28th Street, Santa Monica, CA 90405

Nutritional Support, Aspen Publishers

1600 Research Boulevard, Rockville, MD 20850

Nutrition for Persons with HIV

Escambia AIDS Services and Education

P.O. Box 13584, Pensacola, FL 32591-3584

Alternative & Holistic Health Care for AIDS and Its Prevention

Whitman-Walker Clinic, 1407 South Street, NW

Washington, DC 20009

Good Food Choices: A Nutrition Handbook and Recipes for People With AIDS /ARC

Brigham & Women's Hospital

Dept. of Dietetics & Nutrition, (617) 732-5500

75 Francis Street, Boston, MA 02115

Nutritional Information for Persons With AIDS

University of California San Francisco, Medical Center,

Department of Nutrition and Dietetics, (415) 476-1461

505 Parnassus Avenue, Moffitt 294

San Francisco, CA 94143-0212

Drug - Nutrient Interactions in AIDS Guidebook

Nutrition and AIDS Conference Proceedings, Stanford University

2nd Annual Nutrition and AIDS Conference, Stanford University

Cutting Edge, (415) 797-9768

P.O. Box 392, Fremont, CA 94537-0392

Healing AIDS Holistically (an audio cassette tape)

Holistic Approaches to HIV (an audio cassette tape)

Listen To Learn Tape Library

P.O. Box 47155, Phoenix, AZ, 1-800-537-TAPE

HIV ANONYMOUS - A 12-Step Program for People Living with HIV Infection (an audio cassette tape)

Nutritional Aspects of HIV Infection (an audio cassette tape)

National Audio Video Transcript, Inc., 1-800-237-1224

250 West 49th Street, Suite 401, New York, NY 10019

AIDS & Nutrition Program; Try These Tips

Mount Zion Hospital and Medical Center

AIDS and Nutrition Program, (415) 775-5921

2107 Van Ness Avenue, San Francisco, CA

M.A.A.

P.O. Box 973

Camden, ME 04843

(Address Correction Requested)



First Class Mail