

Women and Access to Treatment: Part 2



HIV/AIDS Treatment Access Advocacy
Workshop Series



Canadian Treatment Action Council



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Workshop Overview

1. Access to Treatments
2. Lipid Abnormalities
3. Research



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Women and Access to Treatments



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Access to Treatments

What are HIV treatments?

Why are women less likely to be on treatment for HIV?

What are some treatment barriers to accessing other treatments?

What needs to change?



Access to Treatment

What are HIV treatments?

- Highly Active Anti-Retroviral Therapy (HAART)
 - Complementary and Alternative Medicines (CAM)



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Access to Treatment

What are HIV treatments?

Examples include yoga or exercise; massage or acupuncture; vitamins, herbs and nutrition; traditional medicine (such as Aboriginal or Chinese); other healing modalities such as journaling and meditation.



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Access to Treatments

Some barriers to treatments

- Economic barriers mean that women are less likely to access therapies that cost money
- Low adherence rates: Complex lifestyles, role of “caretaker,” depression, travel required for appointments and to pick up medications
- Access to culturally-appropriate treatment and therapies not always available or accessible



Access to Treatments

Why are women are less likely to be on HIV-meds than men?

- Lack of access to information in a women-friendly format
- Cost and complexity of reimbursement systems
- Experience with, and fear of, side effects and toxicities, such as lipodystrophy and gastrointestinal problems



Access to Treatments

There are numerous side effects and toxicities of drug therapy.

Some affect women differently than men.

Some are unique to women.



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Access to Treatments

What are some side effects that women experience?

Anemia

Skin rash

Diarrhea

Nausea

Depression



Access to Treatments

What are some toxicities that women experience?

Bone problems

Risk for heart problems

Risk for renal failure

Abnormal hormonal issues



Access to Treatments

What are some infections that women experience?

HPV

Cervical cancer

Anal cancer



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Access to Treatments

What needs to change?

- Access to affordable treatments regardless of financial status
- Access to women-specific and user-friendly treatment information
- More women-specific research
- What else?



Women and Lipid Abnormalities



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Lipid Abnormalities

What are some lipid abnormalities?

What are the issues unique to women?

How do lipid abnormalities impact treatment?

What needs to change?



Lipid Abnormalities

What is lipodystrophy?

LIPO = Fat
DYSTROPHY = Change

Lipodystrophy is a term for separate, and possibly related, changes.



Lipid Abnormalities

Factors that may influence the development of lipodystrophy:

- Type of treatment or medication
- HIV
- CD4 count when beginning treatment
- Time on treatment
- Age
- Race
- Gender



Lipid Abnormalities

Physiological and metabolic effects can include:

- Fat accumulates in different places in a woman's body than in a man's body
- Women with lipodystrophy often have higher levels of testosterone
- Heart disease, stroke and hypertension
- Liver problems



Lipid Abnormalities

Psycho-social effects can include:

- Body image/ self esteem
- Unintended/non-consensual disclosure
- Impacts relations and sexual activity
- Inhibits treatment options
- Affects starting and staying on treatment
- Depression and/or suicide



Lipid Abnormalities

What needs to change?

- Broader health care provider education and sensitization
- Information on starting or switching to less toxic regimens
- Access to better medications
- Access to reparative therapies
- Access to reliable information about CAM
- More women-specific research

• What else?

C T A C

C C S A T

Women and Access to Research



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Access to Research

What is research and what information is available?

What role do clinical trials play?

What research do women need access to?

What needs to change?



Access to Research

What is **Research**?

A study in humans to determine the safety and efficacy of new therapies

A behavioral study about treatment impact
(such as lipodystrophy)



Access to Research

Trial design barriers

- Weight restrictions
- Pregnancy
- Type of contraception used
- Exclusion of substance user/restrictions

Trial implementation barriers

- Trial site hours of operation
- Lack of child care and travel allowances
- Lack of outreach to women
- Travel requirements

**What are some other
barriers to trials?**



Access to Research

There is little or no women-specific research available on:

- How drugs are absorbed, distributed, metabolized and excreted (ADME) throughout the body
- Dosing (by size): How much of a drug a women needs for it to be effective and safe
- How drugs affect hormones and reproductive cycles (and vice versa)



Access to Research

Research on Pregnancy and HIV

Emphasis has been on mother-to-child transmission (MTC), but the mothers themselves have been ignored in research (“Save the baby” mentality).

How does this affect pregnant women and women who are looking to become pregnant?



Access to Research

What needs to change?

- More women-specific trials and data
- Disaggregated data
- More women in existing trials, as a condition of trial approval
- Education for researchers and health professionals to increase women's participation in trials
- Practical assistance for women
- What else?



Contact us

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