

## A Qualitative Study about HIV Infection, Treatment and Impact among HIV Infected MSM

Vilai Chinveschakitvanich

Institute of Health Research, Chulalongkorn University, Bangkok, THAILAND

### Abstract

A longitudinal qualitative data about HIV exposure, health problem, self-care, antiretroviral therapy (ART) and impact among 33 HIV infected men who have sex with men (MSM) were collected since 2000. The methods used were informal interview and personal counseling in both visit and call. All 33 cases reported that they have infected HIV by unsafe sex practice. Mostly, about 55% (18 cases) knew their HIV status after having some health problems and needed to check for HIV infection to find out the rational cause of disease. About 30% (10 cases) checked HIV because of their necessity such as having an operation, donating blood, applying for a job, requesting from their sponsors etc. There were only 5 cases having HIV tested because they or their partners had unsafe sex practice.

However, only 14 cases decided to have ART. There were more than one reasons of going on ART for each patient. The main reasons were their belief in antiretroviral drugs (ARVs) efficacy of saving their lives (50%), getting free of charge drugs (43%), followed by suggestion from the doctor and having AIDS related symptoms (36% and 29%) respectively. All patients were informed that they must take drugs correctly and continuing for all the rest of their lives. Moreover, they might have some side effect after taking drugs, and finally they should prepare to afford a high cost of treatment process.

After monitoring the patients on ARVs, it was found that about 20% or three cases took drugs incorrectly. The first case took drug with a meal while the second case stopped using every 3-4 days. The last case has combined taking two times into one time in the morning. They have slightly changed the drug instruction because they wanted to continue taking drugs and reduce the side effect which interrupted their daily life. Nevertheless, two from fourteen cases discarded using drugs after going on ARVs for 4 and 8 years respectively. One has reported that each dosage reminded him of his HIV infection and created stress whereas another one could not afford the high cost.

This study has shown substantial understanding factors related HIV exposure, ART decision making and impact that PLWHAs have faced. It would be beneficial for policy makers' plan for prevention and scale enlargement of subsidy ARV treatment. The sufficient pre-preparation for treatment, providing patients' clear knowledge and care counseling, is necessity for the effective ARV treatment.