Letters—October/November 2010

Your Feedback

September 27, 2010

Resurrecting the Spirit

In "Resurrection From Rwanda" (July/August 2010), Consolee Nishimwe shared how she overcame the trauma of being diagnosed HIV positive after a rape during the Rwandan genocide.

I'm very inspired and strengthened by Consolee Nishimwe's amazing story of great courage, strength and healing. Consolee is indeed a woman of humility, positive energy and great determination despite the trauma she has endured.

Sheila Gonzalez
New York City

Coming Up Short

In "Shortchanged?" (July/August 2010), we discussed potential ways health care reform could fix prescription drug coverage shortages for people living with HIV/AIDS.

This is scary stuff. [If I'm] shortchanged, I don't know where I would go other than to my care provider and ask for a case worker and/or a social worker. Like so many others, I live on Social Security Disability Insurance (SSDI) as I'm dually diagnosed with bipolar disorder. I also maintain a small part-time job. While I don't have to deal with the "doughnut hole" gap in Medicare coverage, many Americans do, and many [other] Americans don't take medications [because they] are [too] expensive. I take three pills now. If I had to pay out of pocket, the cost of one of them would negate my monthly stipend from SSDI.

The second issue is the AIDS Drug Assistance Program waiting lists and how people are dying from no access to medications. I called my New Jersey [congressional] delegates and urged them to address both the doughnut hole and the ADAP problem.

Stephen Puibello
Cliffside Park, N.J.

Pain Game Over

“Pain, Pain, Go Away” (July/August 2010) explored the challenges chronic pain presents for people living with HIV.

As a long-term survivor of HIV/AIDS and chronic pain, I was beginning to question the logic of continuing to take my HIV medications. The article’s last sentence, “Don’t get desperate and let it be the be-–-all, end–all in your life,” was a timely godsend. The article left me wanting more, however. We need more research and discussion on this issue. We need more funding and advocacy, and we need better pain management medicines accessible via ADAP.

Alex Garbera
West Haven, CT

I realize a lot of people abuse the need for pain medications. But there are those of us who actually do suffer with severe, chronic pain. It’s pain that makes [an otherwise] wonderful life not worth living. My pride forces me not to talk about it or let it show, but it’s so hard! I would never have believed that I could or would suffer from this kind of pain at age 54.

George (Last Name Withheld)
South Carolina

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http://beta.docker.poz.com/article/Letters-HIV-Feedback-19153-6669