In Trouble for Trouble

May 9, 2008 By Paul Dalton

I have been called to task for making ?sweeping generalizations,? and ?obvious misstatements,? regarding my post titled, ?Trouble in Paradise.? Let me take each issue separately.

Sweeping generalizations:
I didn?t intend to put forth the idea that those two situations were typical, or even common throughout Montana. Over the years I have been going to Montana, I have heard a range of stories regarding medical care, and few of them were troubling. Most of the folks I have spoken with are getting fine care from what I can tell. Also, I am fully aware that I am more likely to hear the weird and bad stories than the good. After all, if you are doing well, getting good care, on the right meds and so on, you are much less likely to talk to me about your situation.

If I gave the impression- which it seems that I did- that either 1) those cases were typical, or 2) that Montanans with HIV get substandard care, I apologize. It wasn?t my intent, and I take the feedback to heart. Oh, and I would love to come to the clinic next time I am in Montana- which looks like September.

Obvious misstatement:
This referred to the guy who was having a difficult time taking Sustiva and Combivir and who told me his doctor had switched him to Combivir alone. The point made here is that, if someone were starting a treatment interruption they would indeed stop taking the Sustiva for some period of time before stopping their Combivir, to prevent the development of resistance. This was not the case with the guy who spoke to me- I asked the question, and he said that they had not discussed treatment interruptions at all.

Perhaps I could have- should have put that detail in.

So maybe I can chalk this up to being a newbie in the blogosphere. For the past 4 years I have been writing HIV treatment information for Project Inform. We write in a certain way, and take care to try and ensure both completeness and accuracy in our materials. I confess that I do not take the same kind of care when blogging, and possibly this illustrates that I should.

Now, what I wanted to write about today:
HIV and the Mortgage Crisis.

We received a call on our Hotline this week from a man who was forced to choose between paying his

mortgage and getting his meds. He chose to pay his mortgage, but still got behind. He has fallen into that trap of having too much money on paper to qualify for things like his state?s ADAP program, but not having enough to really cover his medical and living expenses.

I have been waiting for this kind of call. The current ?economic downturn? was bound to hit folks with HIV. The idea that someone, in the richest country in the history of history, would have to choose between his housing and his health illustrates the madness of our health care system. Sicko indeed.

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