

What is Drug Resistance and Does It Impact Me?



CMEO Podcast Transcript

Christina M. Madison, PharmD, FCCP, AAHIVP:

Hello and welcome to the CME Outfitter webisode titled, "What is Drug Resistance and Does It Impact Me?" Hi, I'm Dr. Christina Madison, a clinical pharmacist for over 20 years who's been caring for those affected and infected with an HIV-positive status, as well as I am the founder and CEO of the Public Health Pharmacist and a clinical consultant for the National Clinical Consultation Center. And I'm going to turn it over to my colleague, Daniel Garza, to introduce himself.

Daniel G. Garza:

I'm Daniel G. Garza. I'm an advocate for HIV, anal cancer, and mental health. I've been living with HIV for the last almost 25 years and advocating almost as long, and it's a pleasure to be here. Nice to see you, Doctor.

Christina M. Madison, PharmD, FCCP, AAHIVP:

Welcome. Thank you so much for joining us for today's webisode. So this is the second webisode of a series. And Daniel and I are going to be talking about HIV drug resistance, how it occurs, and what steps you can take in order to help prevent it. So let's talk a little bit about what drug resistance is. The first thing that I like to talk about with my patients is the importance of making sure that you stay adherent to your medication therapies.

What is drug resistance? Drug resistance is when the medications that we take to get your virus to undetectable stop working. And that's because the virus can outsmart the medications and it can change or mutate in order for the medications to no longer work to stop their viral replication. So what do you think patients need to know about drug resistance, Daniel, as someone who has been living with a positive status?

Daniel G. Garza:

Sure. So number one, the importance of obviously of taking the medications from the time that, for instance, in my case, when I was diagnosed and didn't know my T-cell count and where my resistance was, if I was undetectable or not. The importance of finding out, number one, what medications you're taking. I think it's always important to know what you're taking, what it's supposed to do, asking those questions, getting informed and educated, what it's really doing in your body. And then third, finding out how those medications work in the outside world. I think sometimes we miss that part is other things that you can eat, other medications you can't take, how it's really going to affect your body. And I'm very big on the energy, so how it's going to affect you mentally, physically, and spiritually. I think knowing all that information will help you to stay on your medications longer and really follow them as you're supposed to.

Christina M. Madison, PharmD, FCCP, AAHIVP:

Yes, I think that's such a great way of thinking about that. So one of the things that you brought up that I just want to touch on briefly is taking into consideration the whole person, their lived experience and their lifestyle. So I'm not going to want to recommend a medication for someone who may have shift work or may not know

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when they're going to have a chance to eat if the medication has a food requirement. Because again, that can cause the medication to not be as effective and ultimately lead to drug resistance later on.

There's really two ways that drug resistance can occur. The first is if you stop taking your medications as directed. Some medications are more susceptible to this than others based on the class of medications that you're taking. Some medications have what we call a high barrier to resistance, meaning it's more forgiving. And that means that if you miss a dose here or there, it won't impact whether or not the medications work. But there are some medications where it's extremely important that you take them as directed. Because even just missing a dose here or there can actually lead to the virus developing a mutation that causes the medication not to work. And so again, the real reason why we want to talk about this is because we don't want folks to have a limited set of choices when it comes to the medications that they can take. Because ultimately, if you have drug resistance to one medication, it may not just be one drug. It could be an entire class of medications, which really limits what meds you can take in the future. Daniel, did you want to comment on this?

Daniel G. Garza:

Yes, because there's something that you said that just, boing, my antenna went up. It's lifestyle and conversations with your doctor. Doctors can only prescribe based on the knowledge that they have about the person, the patient, the client. So if I'm not completely honest with my doctor about my lifestyle, am I my parent? Do I have kids? Do I work nights? You said some people have two jobs, three jobs. And particularly coming from the Latino background where most folks in my community just take the doctor's word as law and don't question it, if I work two jobs, if I work nights, if I have kids, if people in my house do not know my status and I have medications to take, all these are really important when we talk about medications and resistance. So walking into my doctor's office, I have to know that I can trust the doctor and really speak honestly so that they can do the best to help me out. And it takes a real partnership. It's a dance that you have to do with your doctor and find that balance. Does that make sense?

Christina M. Madison, PharmD, FCCP, AAHIVP:

Oh, yes. I love that, the dancing analogy. And also just really want to reemphasize the importance of being your true authentic self to your healthcare provider. Because if we don't have all of the information, we can't help to make the shared clinical decision about what medications might work best for you and for your lifestyle.

How do we prevent drug resistance? And I think you already alluded to this, Daniel. But are there some ways that you've been told to help with... It becomes overwhelming having to take a medication every day. Not everyone has the luxury of being on an injectable long-acting medication. So it does take a lot of effort to make sure that you're staying on time with your appointments and everything that goes along with having a positive status.

Daniel G. Garza:

Yes. Well first off, having a condition, whatever condition you have.

Christina M. Madison, PharmD, FCCP, AAHIVP:

Yes, you're right. Any chronic medical condition, not just having an HIV-positive status.

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Daniel G. Garza:

Yes, it's a career. It's a job that you have to-

Christina M. Madison, PharmD, FCCP, AAHIVP:

It is.

Daniel G. Garza:

... take care of yourself. It's a responsibility that the moment that diagnosis is given to you, whether you like it or not, it's a responsibility that you have now with yourself, not with anybody else, it's with me. Because it's me not taking my medication does not affect my doctor, it doesn't affect the nurses or the people around me, well, not directly. It affects me.

Christina M. Madison, PharmD, FCCP, AAHIVP:

It does affect us because we are here for your success.

Daniel G. Garza:

And that's why I said-

Christina M. Madison, PharmD, FCCP, AAHIVP:

So I do want to make sure you know we are working for your success.

Daniel G. Garza:

Yes, that's why I was specifying not directly, because me taking the medication is for me, but they want to make sure that you're okay. But it is a responsibility and a job. And this is where that communication part comes in.

And I'll share a little bit about my story. I am now 17 years clean and sober, and that party lifestyle affected the way I take medications. And it was intrusive for me at that moment. But not being honest with my doctors made those medications not work for me anymore. And not being honest, walking into that doctor's office and them asking me the very specific questions, "What are you doing that they're not working?" And me not saying the whole truth caused that resistance. So how I change that now is it's part of my meal. So I know that, as I'm going to have lunch, taking that first bite includes taking my medication. It's not something separate in my life. It's something that I've included in my life, which I think, for me, makes it easier.

Christina M. Madison, PharmD, FCCP, AAHIVP:

Yes, I completely agree. I think it really is about lifestyle change and integrating it into your current schedule, what's already going on in your life. Because this is a lifestyle change, it's not just having to take a medication. It really is going to be part of your regular routine.

And so I love the fact that you disclosed the fact that you were having some challenges with substance use, because I do think that that's super important. Because as a provider, we don't want you to not tell us those information. Because there are certain illicit substances that actually will speed up the viral replication of the

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HIV virus, like methamphetamines and other medications. And so we definitely want you to disclose that so that we can make sure that you're on a medication that's more forgiving.

And so there are some of the tools in our toolbox and some of our antiretroviral medications that are able to overcome some of those issues that you may be experiencing if you are someone who's currently suffering from substance use disorder, or if you do have a relapse. That's the other thing too, I love the fact that you said that you had been 17 years clean and sober, but there are some instances where there are folks that may have a relapse or something may happen, there's a life event. We experience trauma at any given time. And so wanting to make sure that your provider knows that so that if there is a blip in your viral load or if you do have a change in your labs, we understand why that's happening and we can correct course and make additions or changes to your current medication regimen in order to overcome some of those challenges.

Daniel G. Garza:

And then there's, you just talked, there's things that happen in life. I'm also-

Christina M. Madison, PharmD, FCCP, AAHIVP:

Yes, life happens.

Daniel G. Garza:

Yes. I'm an anal cancer survivor. And for folks who are watching who have been through cancer, while you're going through chemo, you can't take other medications at times. So during my time I wasn't allowed to be on my HIV meds. So there had to be a constant communication between my doctors to make sure that my numbers were okay, that I wasn't falling too much, my immune system had to be checked constantly. So those are moments where now this is the moment where you're like, "Okay, I'm at the care of my doctors and my healthcare team. I need them to take over to make sure that I'm okay." But had I not been honest about the things that I was going through, they would not know to communicate with each other. And I think this is where self-advocacy really steps in to make sure that I'm getting the medications that I need, that people are taking care of me and watching over me when I'm not able to do it for myself.

Christina M. Madison, PharmD, FCCP, AAHIVP:

Yes, I often tell patients that I talk to, to write down a list of questions before they go to their appointment so that they make sure that they get all their questions answered. Or if it's something that is more emergent that they can always go and chat with their pharmacist because they're going to be very aware of what medications you're on if you're using the same pharmacy to pick up all of your medications.

The other thing, too, that I just wanted to point out as far as ways to make sure that you don't have resistance develop, in addition to taking your medication as directed, is making sure that your healthcare provider knows everything that you take by mouth on a regular basis. So that means supplements, vitamins, any herbal remedies. I have a lot of folks that practice Eastern medicine and may have teas and tinctures and things that they take. We need to know that information because it may interact with your antiretrovirals. And we definitely don't want to have a situation where your medicines for your positive status are not working the best way that they can. Because ultimately, we want to make sure that whatever regimen you're on is easy to take as

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well as safe and effective. So if you're experiencing a lot of side effects from your medication, that's not acceptable either. So even if you're able to get to undetectable, but you feel crappy, that's not a good thing either. So we definitely want you to be on a regimen that is well tolerated in addition to being highly effective.

Daniel G. Garza:

Yes. And I want to underline something you said, a big shout-out to all the pharmacists out there. I had the same pharmacist for about 15 years and he had walked through me, since I moved to California, through cancer, through everything. Folks, be good friends with your pharmacist because they have everything you've taken. They have a list of everything they'll know, and they're there to answer your questions when your doctor may not be available. So create that family of healthcare professionals to help you to make sure that you stay on your medications, that if something doesn't feel right, you have somebody to go to and say, "I started taking these medications, this is what I'm doing," and they can walk you through side effects.

Christina M. Madison, PharmD, FCCP, AAHIVP:

Yes, I think it's super important to make sure that... Really it does take a village, and everyone working together as an interdisciplinary team is how we're going to be able to overcome things like the potential risk for drug resistance, as well as just being part of the community. We talk about advocating for ourselves and making sure that we have a very close-knit circle. And I do think that having peers that have maybe gone through something similar, which is something that I love about what you do, like you definitely provide that resource to folks that may not have that same lived experience and are facing something that they've never had to deal with before.

And it's so much easier if you're able to talk with somebody who's either been through it or something similar so that you can understand what to expect and maybe even take some advice about ways that you can manage the situation so that you aren't having a situation where you feel like you're not informed and you feel like you're very nervous or anxious about what's going to happen to you or not understanding the full information about the care that you're receiving.

Daniel G. Garza:

I feel like the ultimate goal in this scenario is that I get better. Everybody's coming around so that I get better. And then sometimes it's my turn to be part of that circle to make sure that somebody else gets better. But if I don't speak up, if I'm not open and if I don't take my medications, then it's not going to work. And I need to, as a client patient, I need to take on this responsibility and realize that all these people are investing their time and energy in me and that I need to do my part.

Christina M. Madison, PharmD, FCCP, AAHIVP:

I really just want to thank you for your time today, Daniel. It was such a pleasure speaking with you.

Daniel G. Garza:

No, thank you for all the work that you do. And I will say thank you to you and I know that you'll pass it on to all the other healthcare professionals.

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Christina M. Madison, PharmD, FCCP, AAHIVP:

I also just want to take a moment to say thank you to all the viewers for watching. You can find more information and resources at the CME Outfitter HIV Patient Education hub. Our other webisodes in this series where we discuss talking to your healthcare provider about pregnancy and about the chronic illnesses that occur with age in patients with HIV are also there as well. So take care and we will see you in the next webisode.