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DEAR READER

Everyone has trouble sleeping at one time or another. Anxiety the night before an important presentation or exam, stress about personal or financial matters, or even too much television or caffeine before bed can cause trouble sleeping. But insomnia is a different phenomenon, involving a disturbance in the sleep cycle that lasts over a period of time. This disturbance itself can induce stress, further masking the original cause(s) of sleeplessness.

Insomnia in the HIV-infected population is often unrecognized. It can cause frustration and can even potentially further weaken the immune system. What causes insomnia? Stress from living with HIV, side effects from medications, and disease symptoms (for example, neuropathy, wasting or opportunistic infections) can all contribute to insomnia—indeed, independently or in combination. Other life factors like drug or alcohol use, depression, anxiety, etc. can also contribute to insomnia. This issue’s article on insomnia and HIV offers a clinical psychiatrist’s look at this frustrating disorder. With all the concern about viral load levels, CD4 T cell counts and drug side effects, it is easy to forget the mental health needs of HIV-infected persons. Most physicians would agree that mental health is an important determinant of a patient’s physical health.

On a separate note, I would like to take this opportunity to thank the readers, subscribers and supporters of RITA! and The Center for AIDS. This time of year is critical for planning upcoming issues and programs. Please fill out the postage-paid readership survey at the back of this issue to indicate what you like or dislike about the publication, or what you would like to see covered in future issues.

To better serve our constituents, the current format of RITA! will be divided into 2 separate publications beginning in 2001. The first publication, published 3 times a year, will be a patient-oriented newsletter with treatment updates, drug warnings, and otherwise important information written for the layman. The second publication, published semi-annually, will retain the current look of RITA! but will be arranged by theme, focusing on advocacy, research and policy issues. Current subscribers will automatically receive the patient newsletter, but those wishing to receive the research-oriented publication must request it. (This can be done easily in this issue’s readership survey). As always, publication content can be accessed on the Web from The CFA website [centerforaids.org].

Also, please consider an end-of-year donation or subscription renewal for RITA! as denoted on the center-fold envelope. The requested individual subscription rate is currently $20 per year. Many organizations and HIV-infected individuals receive RITA! at no cost, which increases our overall postage and shipping expenses. Any gift will be greatly appreciated, as always, and will help us continue our work.

Very truly yours,
The Center for AIDS:
Hope & Remembrance Project

Thomas Gegeny, MS, ELS
Editor
RITA! reports on the latest information on HIV/AIDS research and treatments. The statements and opinions expressed herein do not imply recommendations or endorsement. Always consult your doctor before taking any drug or altering a prescribed drug regimen.

Free access to RITA! is available online (1999-present) at centerforaids.org/rita. The printed publication is also free of charge for people with HIV/AIDS and the agencies that serve the HIV/AIDS infected and affected population. It is available at The Center for AIDS information center, various Houston AIDS service organizations, physician offices, health clinics, and some area libraries and retailers, or by mail.

RITA! is printed quarterly. It is distributed widely in the US and sent to more than a dozen countries. The publication is indexed by the National Library of Medicine in AIDSLINE and is included in several other free and commercial databases.

Letters to the editor, pertaining to material published in RITA!, are encouraged and may be sent by mail or e-mail as indicated below. Letters will be published at the editor’s discretion, and may be modified or edited as deemed necessary or appropriate.