

Presents a **FREE Community Forum**

AIDS Foundation of Chicago, Calor, Centro San Bonifacio, Chicago Department of Public Health, Dupage County Health Department, El Rincon Community Center, Haymarket Center, HealthCare Alternative System, Howard Brown Health Center, Project VIDA & Vital Bridges present:

New HIV Drugs for Resistance; Hepatitis C & HIV co-infection; Managing HIV & Aging

Speakers:
David Wohl, MD
Assistant Professor of Medicine, University of NC
 •Does HIV accelerate aging
 •Heart disease
 •Cancer Risk
 •Kidney disease
 •Brain Function
 •Diabetes, Hypertension, & Bone disease
 •Treatment interruption increases risk for disease
 •Lifestyle: Diet, exercise, smoking, mental/emotional well being
 •Treatment strategies for HIV Drug resistance, new HIV Drugs for patients with resistance

Eliot Godofsky, MD
Clinical Assistant Professor of Medicine University of South Florida Bach & Godofsky of Bradenton Florida
 •Epidemiology
 •What is Hepatitis C (HCV) and its impact?
 •Transmission routes of HCV & prevention
 •Stages of HCV progression
 •Special co-infection treatment issues
 •How does HIV & HCV therapy effect the liver?
 •When to begin HCV therapy?
 •Current HCV treatment
 •Treatment side effects and management
 •Update on New drugs in development



Free Breakfast!

Addiction professionals & nursing contact hours available, plus certificates of attendance.
 Breakfast & Registration Begin promptly at 8:30am
This nursing education activity was approved by NCNA an accredited approver by the American Nurses credentialing center's commission on accreditation. This educational activity has been awarded 3.5 contact hours.

Friday October 2nd, 2009, 10am-1:30pm
 University of Illinois at Chicago
 UIC Student Center-West, Chicago Room BC 2nd Floor
 828 S. Wolcott Ave. Chicago, IL 60612

Seating is limited.
To reserve your seat:
 Call: 1 (888)-266-2827
 Fax: (212) 219- 8473
 or Email- register@natap.org
 Mail to: NATAP
 580 Broadway, Suite1010
 New York, NY 10012

Please Print Clearly: 10/02/09IL

Your Name: _____

Organization: _____

Mailing Address: _____

City : _____ State: _____ Zip: _____

Work: _____ Home: _____ Fax: _____