This publication contains important information for couples considering marriage. To receive a marriage license in Michigan, you must be provided with written educational materials about sexually transmitted infections (STIs), human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS), and prenatal care.

In regard to HIV/STIs, pregnancy, and sex in general it is important to have open and honest communication with your partner that incorporates both risk reduction and pleasure on a regular

basis in order to protect one another.

What are STIs?

STIs are infections that are passed from one person to another during vaginal, anal, and oral sex. They're really common, and lots of people who



have them don't have any symptoms. The only way to really know your status is to be tested for HIV and STIs. Some of the many STIs include chlamydia, syphilis, gonorrhea, human papillomavirus (HPV), hepatitis C, herpes simplex virus (HSV), and HIV.

What are some signs and symptoms of STI's?

Women:

- Unusual discharge from the vagina
- Burning or pain when urinating
- Pain or cramps in the tummy area
- Bleeding between periods Sores on anus or
- · Sores on vagina, anus (butt), or mouth
- Rash on the soles of hands/feet

Men:

- Drip from the penis or stained underwear
- Burning or pain when urinating
- · Pain or swelling in testes
- mouth
- Rash on the soles of hands/feet

How can STIs and HIV be prevented?

There are more tools than ever to help prevent HIV and STIs. Limiting your number of sexual partners, never sharing needles, using condoms the right way every



time you have sex. In addition to using condoms. medications like pre-exposure prophylaxis (PrEP) can help reduce your risk of contracting HIV.

What is PrEP?

PrEP is a once-a-day pill, that when taken every day can help prevent you from becoming infected with HIV. When you add PrEP to your daily routine and combine it with other preventative measures, like using condoms and having regular HIV tests, it could help you reduce your risk of getting HIV by over 90%. PrEP does not protect you from other STIs. Only HIV-negative people can take PrEP. Consult with a medical provider to see if you might be a good candidate for PrEP.

What are my testing options?

You can be tested for HIV and STIs by your doctor, at a local health department, or community clinic. To find a testing location near you, call the Michigan HIV/ STI hotline:

1-800-872-2437, or visit: Michigan.gov/HIVSTI

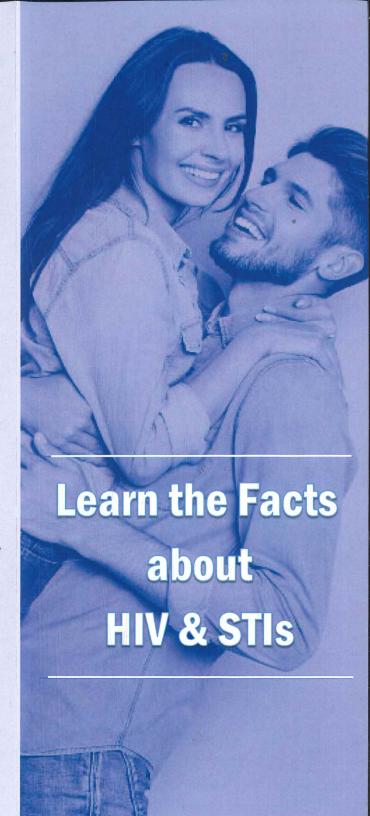
For additional information about HIV/AIDS, testing, prenatal care, and STIs call the Michigan HIV/STI hotline at 1-800-872-2437.

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How are STIs spread?

STIs are spread through sexual contact with someone who has an STI. Sexual contact includes oral, anal, and vaginal sex, as well as genital skin-to-skin contact. Other ways STIs are spread include from the mother to baby during pregnancy/delivery and through the sharing of needles when injecting drugs or other substances.

Some STIs, like HIV, chlamydia, and gonorrhea, are spread through sexual fluids, like semen and vaginal fluids. Other STIs, including HIV and hepatitis B, are also spread through blood. Genital herpes, syphilis, HPV, and HSV are most often spread through genital skin-to-skin contact.

How are STIs treated?

Some STIs, like gonorrhea, chlamydia, and syphilis, can be cured with medicine. If you are ever treated for an STI, be sure to finish all your medicine, even if you feel better. Other STI's, like HIV, HPV, and HSV cannot be cured but medicines can manage symptoms. Without treatment, STI's will not go away and can cause long lasting harm to your body.



The good news is that getting tested for STIs can be done by your own doctor, at your local health department, or other community clinic. Michigan law requires your case be kept private.

What is HIV and AIDS?

HIV stands for human immunodeficiency virus. It is the virus that can lead to acquired immunodeficiency syndrome (AIDS) if not treated. If left untreated, a person can have HIV for many years before becoming sick or developing AIDS. A person who has HIV, and does not outwardly seem sick, can still pass the infection to others. When treated, a person with HIV can live a long productive life.

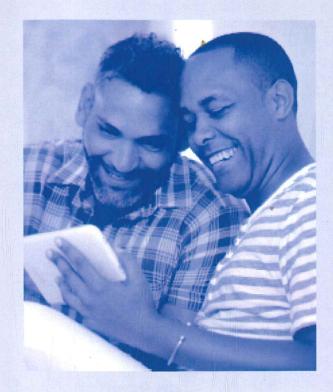
How do you get HIV?

HIV can be passed through semen (cum), pre-seminal fluids (pre-cum), vaginal fluids, rectal fluids, blood, and breast milk. The virus can get into your body through cuts or sores, through mucous membranes (like the inside of the vagina, rectum, and opening of the penis), through birth from an infected mother to her child, or through breastfeeding. You can get HIV from:

- having vaginal or anal sex
- sharing needles or syringes for shooting drugs, piercings, tattoos, etc.
- •getting stuck with a needle that has HIV-infected blood on it
- •getting HIV-infected semen (cum), or vaginal fluids into open cuts or sores on your body or mucous membranes
- •from mother to child during pregnancy, birth or breastfeeding

HIV is usually spread through having unprotected sex. Using condoms every time you have sex and not sharing needles can help protect you from HIV.

If you have another untreated STI, you could be more at-risk for getting HIV if you are exposed to it. This is due to your body's defenses being weakened by the untreated STI.



How do I know if I have HIV?

Getting an HIV test is the only way to find out if you have the virus. Most people who become infected with HIV will usually show it on a test within the first four weeks (12-14 days) from the time of infection. Knowing about your infection early and getting treatment may help you stay healthy longer.

How do babies get HIV?

Babies may be born with HIV if the mother is infected. An infected pregnant woman can give HIV to her baby while still pregnant, during birth, and/or through breastfeeding. Getting tested and, if positive, started on treatment are important steps to help prevent a woman from giving HIV to her baby. Additionally, if a woman is infected with HIV she should not breastfeed her baby. Pregnant women should be offered an HIV test in the first trimester, in the third trimester (28 weeks up to and including delivery), and again at 36 weeks or at delivery if they are at high risk.