



Bayani magani



DDI

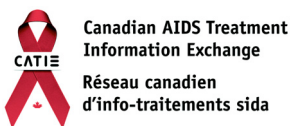
DDI

Don me za'a ban DDL don ciwo na?

1. DDL (ko kuma didanosine, videx, videx-EC) kwayar magani ne da akan gauraya da wadansu magunguna don cutar kanjamau
2. DDL kan tsaida wani sashen kitse mai suna “reverse transcriptase” dalili wannan yana bangaren magungunan de ake kira “reverse transcriptase inhibitors” (ko kuma RTIs). Kanjamau na bukatan wannan sashen kitsen don yaduwa. Sabosa haka indan magani ya tsaida wannan sashen kitsen, sai kwayoyin kanjamau su dena yaduwa.
3. Shan wannan magani na rage yawan kwayoyin kanjamau a jiki. Yana kuma rage kamuwa da cututukan da masu kanjamau kan kamu da su, ya kuma kara lafiyar jiki. Zai kuma kara garkuwar jiki.

Yaya zan sha wannan maganin?

- 1 Akwai ire iren DDL na taunawa, kowanne kuwa da karfin sa. Yawan kwayoyin da za'a ba mutum ya dangana ga nauyin jikinsa.
- 2 DDL akan sha ne sa'anda ba'a ci abinci ba wato awa guda kafin a ci abinci ko kuma awa biyu bayan an ci abinci. Abinci na rage karfin maganin.
3. Akwai hanyoyi uku na shan DDL



www.catie.ca



www.apaa.ca

A yi Shawara na musamman jiyya ta asibiti tare da sanin kwararre likita mai dimbin sanin dangin ciwace ciwace kwayoyin kanjamo da jiyar su

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4. Ka tauna maganin da kyau, sai ka dan sha ruwa kadan. Kada a hadiye kwayan gaba daya.
5. A farfashe kwayan sa'anan a hada da dan ruwa kadan in ya narke sai a sha
6. A narkar da kwayan cikin kofin ruwa sa'anan a shanye cikin awa guda
7. A farfashe kwayan sa'anan a hada da dan ruwa kadan in ya narke sai a sha
8. A narka da kwayan cikin kofin ruwa sa'anan a shanye cikin awa guda
9. Idan ba kwaya bane, ana iya sha haka
10. Kada a hada DDL da yayan itace domin saukin sha, suna hana ta aiki. Dole a sha da ruwa ko madara kawai.
11. Ka goge hakora da wuri bayan shan maganin nan do nana hakora rubewa
12. A ajiye DDL a wurin da babu yawan zafi ko yawan sanyi kada a ajiyeta wurin wanka ko wurin dafuwa
13. Kada a ajiye ta inda yara na iya tabawa.

Indan na manta in sha sa'anda ya kamata fa?

1. Nan take (sa'anda ka tuna) sai ka sha. Amma indan ya rage kamar awa biyu ne ka sha wani, kada ka damu.
2. Bincike ya nuna cewa indan muna bukatan magungunan kanjamau su yi aiki, dole a sha su yadda ya kamata

Wayane matsaloli ne mutum na iya fuskanta bayan ya sha DDL

muhinman matsalolin sune-

1. Zafi a tafin hannu da kafa
2. Ciwon ciki da zai kai har baya da amai

Wasu matsaloli sun hada da-

1. Ciwon kai, jiri da rudewa
2. Zawo ko rashin kashi



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3. Amai ko jin amai
4. Rashin barci
5. Kuraje a jiki
6. Bushewar baki, ciwo a baki ko canji wajen jin dnadano
7. Ciwon mahadin kasusuwa
8. Canjawan yanayin jini da hanta
9. Wasu (lokaci lokaci) ya kan kawo masu raguwar garkuwar jiki (wanda zai iya sa mutum ya kamu da wasu kwayoyin cuta

Wayanan nan matsaloli in an gane su na wuri sai a tsaida shan maganin ko a rage su. Indan ka lura da alamun matsalolin nan sai ka sanar da likita nan take. Kada ka dauki mataki kafin ka nemi shawarar likita.

Ina iya shan DDL da wasu magunguna?

1. Yana yiuwa amma ka sanar da likita lukunan
2. Kana iya rage maganin in zaka sha da wasu magunguna kamar tenoforir. Ka sanar da likita in zakayi haka
3. Kada a hada DDL da DDC
4. In zaka sha DDL da ketoeonazole ka basu awa biyu tsakani da kuma tetracycline. Ka bada lokaci kamar awa guda tsakanin DDL da delavirdine ko indinavir
5. Ka sanar da likita in za ka sha pentamadine ko ganciclovir

Ina shan DDL da giya ko kwayoyin maye?

1. Kada a sha giya in ana shan DDL
2. Ka rika ziyarci likita don duba yanayin jinni da hanta da koda
3. DDL baya kasha kwayoyin kanjamau. Baya kuma hana ba wani ciwon. Saboda haka ayi amfani da kororon roba wajen jimai

Ka tabatar kana da DDL kowane lokaci



Labari mai muhimmanci:

Masu yada labarai ta jiyar cuta mai karya garkuwar jiki a kasar Canada da suna CATIE tare da wata kungiya ta Afirka wato APAA, masu aiki akan wanan cuta suna da nufi mai kyau ta wurin hanyar yada labarai zuwa ga masu zama da cuta kwayoyin kanjamo ko cuta mai karya garkuwar jiki, da musamman masu hanyar kula da kansu tare da taimakon ma' aikatan kungiyar da ke jiyar masu wanan cuta.

Labarai da a ka samu ta wurin CATIE ko APAA ba kamar shawaran likita ba ne. CATIE/APAA basu bada goyon baya na musamman jiyar amma masu amfani da mu su yi kokari ta wurin samu shawara da ga wurare masu yawa. Muna kuma karfafa wa masu amfani da mu, su nemi shawara da ga kwararre likita kafin su dauki wani shawara ko amfani da kowane magani.

Ba mu da tabbacin cewa labarai da ga wurin CATIE ko APAA daidai ne. Harka ce mai hadari idan aka dogara da labarai da ga wurin CATIE ko APAA kawai. Ba za a rike daya a cikin CATIE ko APAA ko ma' aikatan su, shugabannin ko daraktoci, masu taimakon su da laifin diyar akan amfani da labarai da suka yada.

Ra ayin da suke a cikin labarai wanda CATIE ko APAA ta buga na wanda suka wallafa ne, kuma ba ra ayin ko manufa minista mai kula da lafiyan Canada ba ne. Wannan website ya kunshi hadi na waddansu websites. APAA ba ta sarrafa websites da ta hadi ba, APAA ba ta dauki nauyi kayan cikin kowane website da ta hadi tare da website da ta kuma kunshi kowane hadi, ko karuwar da aka yi wa waddanan hadi ta websites. Websites da suka hadi da namu ba su nan a farasanci ko turanci. APAA ta yi tanadi na wannan hadi ta websites domin sauki, ama kunshi ta kowane hadi bai nuna a fakaice APAA ta goyi bayan wannan hadi ta websites ko suna tare da afaretan wadannan websites ba.

Ba mu da tabbacin cewa labarai da ga websites da suka hadi da wannan daidai ne. Kuma harka ce mai hadari idan aka dogara da labarai da ga nan, a kuma dauki nauyin kallo da yarda da bayani ta farabati da sharrada ta amfani a websites da suka hadi da wannan. Idan za a yi kowane bayani ko bincike akan batun websites da suka hadi da wannan, sai a tuntuɓi afaretan su

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