

# Protecting Your Heart

Lifestyle changes are important for people with HIV to lower their risk for serious heart problems. **Here's what you can do:**

**Quit smoking:** Smoking is a huge risk factor for heart attacks.

**Watch your blood pressure:** High blood pressure makes your heart work harder than usual. If you have it, talk to your doctor. Several different drug options are available.

**Monitor cholesterol:** Ask your doctor to break down your cholesterol. As your LDL ("bad") cholesterol goes up, so does your heart disease risk. Cholesterol-lowering drugs (eg, statins) may be needed. You should also maintain a healthy diet.

**Exercise regularly:** Consistent exercise can lower your risk for heart disease. It may also lower cholesterol and blood pressure levels.

**Watch your weight:** If you are overweight, you are more likely to get heart disease.

**Check your blood sugar:** If you have diabetes or high blood sugar, your risk is higher for getting heart disease. Keep blood sugar levels in check and monitor them regularly.

Source: The Well Project (<http://www.thewellproject.org>).



# Preventing Fatigue



**F**atigue, a tiredness that does not go away even when you rest, is a common problem in people living with HIV. It can make it harder to do physical activities and may affect your mind—people with fatigue sometimes find it hard to concentrate or get motivated to do things. To prevent fatigue, try to maintain a healthy lifestyle. **Here are 5 simple things you can do:**

- 1. Eat properly.** Make sure you have a well-balanced diet. It should have sufficient calories, protein, vitamins, and minerals.
- 2. Take supplements, if necessary.** Supplements may include vitamins and minerals.
- 3. Get enough sleep.** Avoid drinking a lot of caffeine or alcohol. These beverages can disturb your sleep.
- 4. Get emotional support.** Counseling, support groups, and other programs may ease some of these problems.
- 5. Get enough exercise.** Physical activity offers important health benefits and may also improve your sleep.

Source: AIDS Healthcare Foundation (<http://www.aidshealth.org>).

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# Healthy Living With HIV

## Lessons on Peripheral Neuropathy & HIV

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[www.patientedu.org/hiv](http://www.patientedu.org/hiv)

# Starting an Anti-HIV Drug

**P**eople who have recently found out that they're HIV positive will need to talk with their doctor to find out the best time to start treatment. You may not need to take anti-HIV medications right away. When deciding on the best time to take anti-HIV medications, you and your doctor will think about different things. The decision to take drugs will depend on your overall health, the amount of virus in your blood (viral load), and how well your immune system is working.

## When to Start & Why to Wait

Your doctor will most likely start you on treatment for your HIV if:

- You have severe symptoms of HIV infection or have been diagnosed with AIDS.
- Your CD4 count is 350 cells/mm<sup>3</sup> or less (especially if 200 cells/mm<sup>3</sup> or less).
- You are pregnant.
- You have HIV-related kidney disease.
- You are being treated for hepatitis B.

Anti-HIV drugs can help you stay healthy, but it might also make sense to wait to start treatment. Once you start, you may need to continue taking anti-HIV drugs for the rest of your life. The newer anti-HIV medications are easier to take, but starting treatment usually means a big adjustment in your lifestyle.

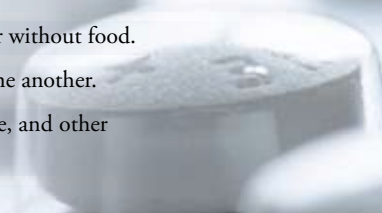
## Deciding on the Right Treatment

Taking a combination of 3 or more drugs from different classes is often recommended. However, you may be able to tailor your regimen.

Consider these factors when picking treatments:

- Your drug resistance testing results.
- The number of pills, and how often the pills must be taken.
- If pills can be taken with or without food.
- How drugs interact with one another.
- Other medications you take, and other diseases or conditions.
- Pregnancy.

Source: TheBody.com (<http://www.thebody.com/content/treat/art12790.html>).



# Lessons on Peripheral Neuropathy & HIV

*Some people living with HIV will develop a disease of the nerves called peripheral neuropathy, or PN. It's a disease that affects nearly 20 million Americans, mostly older adults.*

People with peripheral neuropathy (PN) can have symptoms that range from mild to severe. In some cases, the disease can develop without symptoms. When people first get PN, mild sensations may happen in the toes and feet or fingers and hands.

## Table What Should I Ask About at My Doctor Visit?

Do you have enough information about me and my risks for PN? What should I do if I have more than one type of risk?

What tests do you recommend I take to find out what's causing my PN? Why do they matter?

Am I taking drugs that cause PN? If so, can I have the dose changed or switch to something else?

Are there any new or experimental drugs that I could use for my PN?

What things (other than taking drugs) can I do to help my PN?

Could I do better on a different HIV regimen?



The feelings may be tingling, weakness, numbness, pinching, or stiffness. As PN gets worse, people may feel like they are cramping, burning, throbbing, or have shooting pain. In some cases, the symptoms of PN can be disabling. In its worst form, it can lead to trouble standing or walking. Some people say the pain feels like “frostbite,” “pins and needles,” or “walking on broken glass.” The symptoms are different for everyone. They can appear suddenly, come and go, or continue over time. They usually affect both sides of the body at the same time. They may also get worse at night.

There are many different types and causes of PN. They include injury, inherited diseases, and chronic conditions, such as diabetes or arthritis. Infections, medicines, a lack of vitamins, or HIV itself can also cause PN.

## Am I At Risk?

Peripheral neuropathy more often appears in later-stage HIV disease. However, other things can raise the risk of PN for people with HIV. These include:

- A history of PN.
- Higher viral loads.
- CD4 counts below 100 cells/mm<sup>3</sup>. (*An AIDS-defining condition.*)
- Use of drugs that damage nerves.
- Diabetes.
- Poor nutrition.
- Heavy use of alcohol.

Men and women get PN equally, but older adults are at higher risk. People who don't get enough vitamins—especially B12 and E—and minerals are also at higher risk. Too much vitamin B6 is another risk factor. Some drugs for HIV can also increase the risk of PN. Your doctor can help you find out which ones might raise your risk.

## Getting Diagnosed

People with HIV can have other conditions that are like PN. To be diagnosed correctly, describe your symptoms as best you can. The sooner you talk to your health provider, the better. A diagnosis of PN is based on your symptoms. No actual tests are needed, but tests will be necessary to find the cause of PN. An EMG is the most common test. Other tests may also be used, such as an EEG, MRI, CT scan, and other screenings. The goal of these tests is to find the cause so you can get the treatment that's right for you.

## Prevent PN

A healthy diet, taking effective anti-HIV drugs, and being aware of PN are important to preventing the disease. Try to get the proper daily amounts of minerals and vitamins, especially B12 and E. Don't take huge doses of some vitamins, like B6, and don't drink alcohol too much. Also, talk to your health provider. Find out if any of the drugs that you take are known to cause PN. Work with your doctor to find treatment alternatives to help prevent PN. Be sure to properly treat any other medical conditions you have too.

## Get the Treatment You Need

To treat PN, you'll need to treat the underlying causes to control symptoms. That means taking the right medicines. Prescription drugs may help you control PN symptoms, and a few new therapies have become available recently. For some, the chronic pain of PN may make you depressed, so treatment for depression may also be needed. Other ways to ease PN include making lifestyle changes, taking pain relievers, and changing or stopping the medicines that cause PN. You may need to use more than one of these strategies.

It might take a while for your symptoms to improve. It may take some time for you and your doctor to treat your PN properly, but talking about it can help (see Table).



Managing PN in people with HIV can be challenging, especially in later age and later stage disease. However, you can get control of your PN with medicines and other treatments. It's important to get advice from an HIV specialist who knows about PN to get the best results.