



HIV – related illnesses

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Introduction

- All healthcare workers needs to know how to diagnose HIV related illnesses and stage HIV disease
 - In-depth interview of the patient and good clinical examination is needed
- The WHO, HIV/AIDS staging is essential in both facilities with full or with limited laboratory diagnostic facilities
 - To determine eligibility for preventive therapies and ART
- TB and Malaria increase the HIV viral burden and thus accelerate disease progression

Brief Overview of HIV Related Illnesses Including Opportunistic Infections

HIV related illnesses include:

- Opportunistic infections
 - Infections caused by organisms that would not cause a disease in a person with a well-functioning immune system
- Other HIV related skin manifestations, neuropsychiatric conditions and cancers

People with HIV/AIDS are susceptible to OIs due to:

- Suppression of their immune system
- Poor nutritional status
- Psychological stress, which can influence the immune system

Prevention of OIs and other conditions

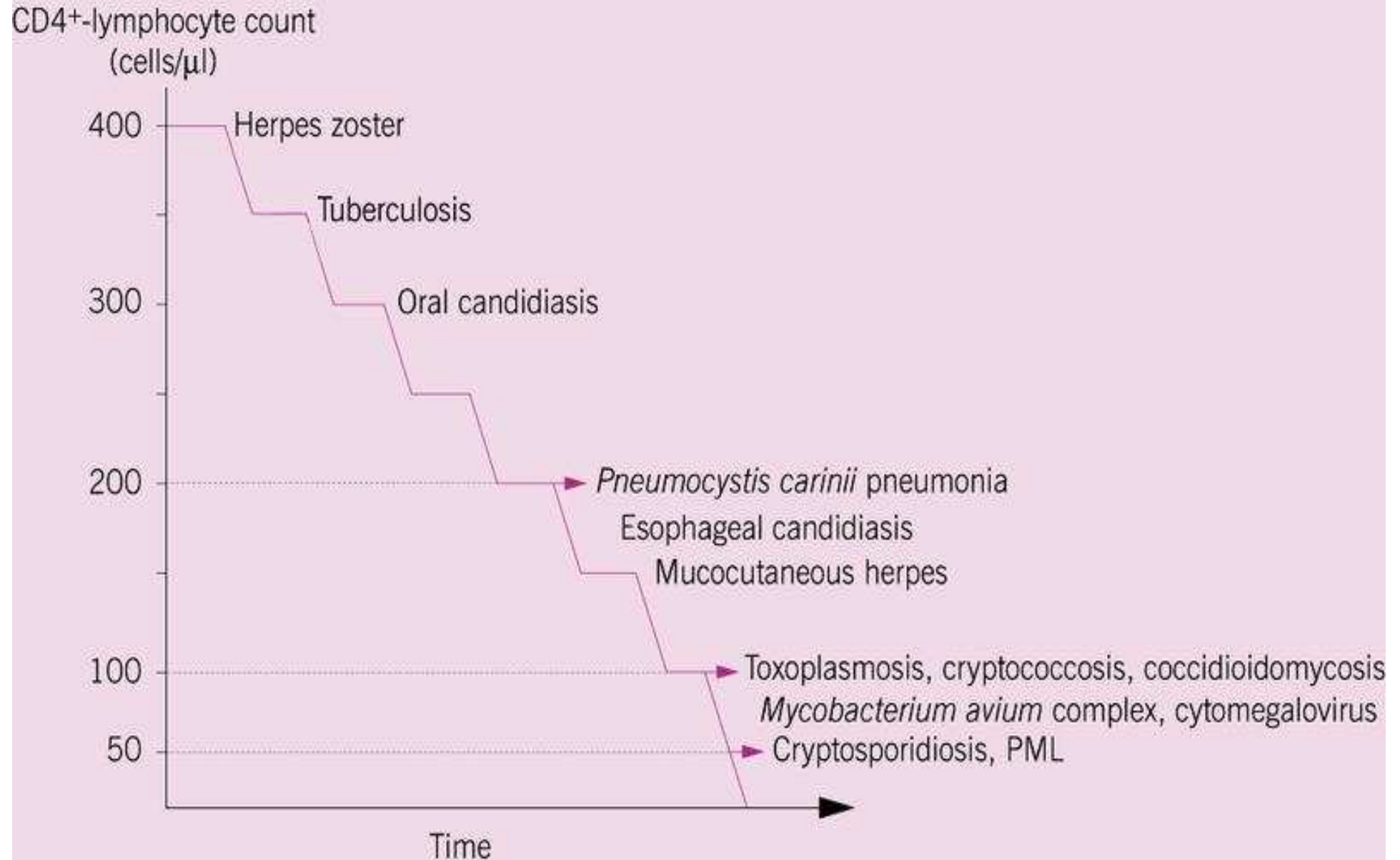
- Safe food and clean water preparation
 - Meats and poultry, cooked thoroughly
 - Use of clean/boiled drinking water
 - Wash Fruits and vegetables, with clean water
- Maintenance of personal hygiene
 - Wash hands with soap after toilets, before meals, and before cooking
 - Be careful when handling animal faeces
- Use of insecticide treated bed nets (ITN)
- Cotrimoxazole prophylaxis for eligible PLHAs



Brief Overview-OIs

- Many people with HIV/AIDS first learn that they are HIV infected when they are diagnosed with an OI
 - Bacterial, viral, fungal or protozoa
- The natural history of HIV involves a progressive destruction of the immune system (CD4 T lymphocytes)
- As the immune system weakens, the risk of infections increases

ASSOCIATION BETWEEN OPPORTUNISTIC INFECTIONS AND CD4⁺-LYMPHOCYTE COUNT



Common Clinical Presentations Among HIV Infected Adults in Tanzania

- Repeated episodes of fever
- Cough and dyspnoea
- Oropharyngeal and oesophageal candidiasis
- Vaginal white discharge (candidiasis)
- Weight loss and body wasting
- Diarrhoea
- Persistent generalized lymphadenopathy
- Skin rashes, sores and generalized pruritis
- Altered mental status and persistent headache

Most Common HIV Related Illnesses and Opportunistic Infections in Tanzania (Adults)

- TB (pulmonary / extra-pulmonary)
- Respiratory / diarrhoeal infections
- Oropharyngeal / esophageal candidiasis
- Cryptococcal meningitis
- Herpes zoster and skin affections
- Neurological disorders, mood affections and dementia
- Kaposi's sarcoma and other malignancies

Common Clinical Presentations in HIV infected Children in Tanzania

- Weight loss and failure to thrive
- Respiratory symptoms / chronic cough
- Skin problems
- Persistent diarrhoea
- Oral candidiasis
- Lymphadenopathy

HIV-TB Interaction

- Tuberculosis is the most common cause of death in people with HIV
 - Lifetime risk of developing active TB is 50%
- HIV infection increases the likelihood of TB either
 - New infection
 - reactivation
- HIV-related TB can present with typical or atypical clinical and/or radiological features.
 - Atypical presentation usually occur at late stage disease
 - Can be sputum smear negative
- Extra pulmonary TB is common with increasing immune deficiency

Prevention of TB among PLHAs

- Encourage collaboration between HIV care and TB programs
- Patient education
- Community education
- Suspect TB in all patients (use the TB screening tool for all PLHAs)
- Isoniazid preventive therapy
 - Doubts about implementation in resource limited settings



WHO Clinical Staging System

- Four stages (1 – 4) using clinical criteria
- Different criteria for children and adults/adolescents
- Use of staging
 - Baseline evaluation
 - Eligibility for Cotrimoxazole
 - Eligibility for ART
 - Monitoring of disease progression
 - Determining treatment failure in absence of or in addition to laboratory findings