AIDS (Acquired Immune Deficiency Syndrome) Treatment (HAART)

There is no cure for AIDS at this time. Treatments are available that slow the disease for many years and improve the quality of life.

Antiviral therapy suppresses the growth of the HIV virus in the body. A combination of several antiretroviral agents has been highly effective in reducing the number of HIV particles in the blood stream. This treatment is called Highly Active Anti-Retroviral Therapy (HAART). Success of this treatment is measured by a blood test called the viral load. This treatment can help improve the immune system and improve T-cell counts. HAART is not a cure for HIV. People on HAART with suppressed levels of HIV can still give others the HIV virus through sex or sharing of needles. There is good evidence that if the levels of HIV remain suppressed, and the CD4 count (used to assess the immune system of patients) remains high (greater than 200), that life and quality of life can be significantly prolonged and improved.

Genetic tests can be used to determine if the virus has become resistant to a particular drug. These tests are useful in deciding the best drug combination and adjusting the drug if it starts to fail.

When HIV becomes resistant to HAART, the therapy must be changed to try and suppress the resistant strain of HIV. Different combinations of medications are tried to reduce viral load. This may not be successful, and the patient may develop AIDS.

RISK & COMPLICATIONS OF HAART

HAART is a collection of different medications. They have their own side effects. Some common side effects are:

- Feeling sick to your stomach.
- Headache.
- Weakness.
- Fat accumulation on your back and belly (*abdomen*) called a "buffalo hump,"(*lipodystrophy*).
- Malaise.

When used long-term, these medications may increase the risk of heart disease by affecting fat metabolism.

If you are on HAART you will be carefully monitored for possible side effects. In addition, routine blood tests measuring CD4 counts and HIV viral load should be taken every 3 to 4 months. The goal is to:

- Get the CD4 count as close to normal as possible.
- Suppress the HIV viral load to an undetectable level.

Other antiviral agents are being looked at. Many new drugs are in the pipeline. Growth factors that stimulate cell growth are sometimes used to treat low red blood cell count (*anemia*) and low white blood cell counts associated with AIDS. Examples of these are Epogen and G-CSF.

Medications are also used to prevent infections such as pneumonia and can keep AIDS patients healthier for longer periods of time. Infections are treated as they occur.

HIV becomes resistant in patients who do not take their medications every day. Also, certain strains of HIV mutate easily and may become resistant to HAART very quickly. **Take all medications as directed.**

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

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