

How to prevent infections

In most people with HIV, the prolonged duration of HIV infection can seriously damage the immune system. Long-term HIV+ patients will suffer from diseases their body would have effectively fought off before. These diseases are known as opportunistic infections.

Doctors can evaluate the risks to develop opportunistic infections by measuring the count of immune cells -also known as CD4 cells or auxiliary T lymphocytes, or T cells- in the blood. It is established that adults' risk of developing a serious infection is lower when their CD4 count is superior to 200/mm3. But the accumulation and the frequent apparition of new opportunistic infections in a patient can cause a decrease in CD4 count.

Your doctor might recommend you to start taking an anti-HIV treatment to prevent the apparition of opportunistic infections, above all when your CD4 count falls below the safety levels. This type of therapy is known as primary prophylaxis and its objective is to prevent infections before they appear. But after this infection is treated, you will be advised to take a treatment preventing it to appear again. This is known as secondary prophylaxis or maintenance therapy.

The larger amount of drugs available against opportunistic infections has permitted to prolong HIV+ people's survival. For instance, such infections as PCP (a form of pneumonia caused by the organism called *Pneumocystis carinii*), which was probably the most common cause of death among people with AIDS, can now be treated with efficient drugs that can prevent further episodes for a long time. However, all infections cannot be prevented and the choice of a treatment might vary depending on your doctor.

HIV treatments can reduce viral load to very low levels and help CD4 counts to increase and the immunity to be restored. Whether or not you are under treatment, you should continue the prophylaxis that protects you from new infections, until your immunity system is strong enough to face new infections alone.

Before taking a prophylactic treatment, you have to decide whether or not it is worth it: you might want to prevent opportunistic infections from developing but do not forget that you might also suffer from the side effects of treatment. With infections such as PCP, it is highly preferable to start prophylaxis as soon as possible, whereas for other infections (CMV and MAI for instance) you really can give it a thought. All factors have to be taken into account before making your decision.

Above all it is recommended to evaluate with a CD4 count which is the real risk of developing an infection. If you develop an opportunistic infection, your doctor will probably recommend you to do a blood analysis to determine what type of organism causes the infection (toxoplasmosis or CMV

for instance). If no opportunistic infections show in the results, it is better to avoid being exposed to any of them than to have to take a treatment later.

If there is a real risk of developing an opportunistic infection, make sure to chose an efficient treatment and understand the possible side effects. However, do not forget that each person is different and it is therefore impossible to know for sure what type of side effects might appear. Most of the side effects which are caused by preventive therapies disappear shortly after treatment interruption.

Certain treatments do not require any food restrictions but others can only be taken with certain types of food and at very strict hours. You should expect to readjust your day-to-day life and accept a change in your life style. However, there is a large number of treatment options among which you can chose the one that will be best adapted to your day-to-day life.

Some patients seem to be unable to adapt themselves to any prophylactic treatments and others refuse to take any treatment because they are feeling healthy. In any case, it is important to make sure to detect any infection in time, considering that treatments are usually efficient against most of them.

Do not neglect the consequences of opportunistic infections, which are still the most common cause of death in people with AIDS. If you develop an opportunistic infection, you might lose weight and have a hard time to gain it back, which will make it easier for other infections to appear.

When should primary prophylaxis be taken

CD4 COUNT	INFECTION	EFFICIENT TREATMENTS
> 200	PCP	Seprin®, pentamidine and dapsone
> 200	Toxoplasmosis	Seprin®
> 100	MAI	Rifabutin and clarithromycin
> 100	CMV	oral ganciclovir