
HIV/AIDS

What is HIV/AIDS?

Human immunodeficiency virus (HIV) is a virus that attacks and weakens the immune system, putting a person at risk for developing certain illnesses, infections, and cancers. HIV can be passed from person to person through the exchange of body fluids such as, semen, vaginal fluids, and breast milk, as well as blood transfusions given before March 1985 in the United States. (1985 is the year HIV testing and screening began on all donated blood). Transmission can happen after sexual contact, when IV drug users share needles and syringes, or from mother to baby either at birth or during breastfeeding. Transmission may also occur when an infected caregiver does not take proper precautions, such as wearing gloves. A person may have HIV infection and not appear to be sick for many years, but can still pass the virus to others. AIDS (Acquired immunodeficiency syndrome) is the disease caused by the HIV infection. AIDS develops after HIV has progressed to an advanced stage.

What are the signs and symptoms?

HIV/AIDS has three stages with different symptoms for each stage.

- Stage 1: Recently infected people may show some or all of the following symptoms between 1 and 4 weeks after being infected by HIV: fever, tiredness, sore throat, muscle ache, rash, headache, stomach or intestinal problems, swollen lymph glands.
- Stage 2: The length of time for this stage is 10 years from initial infection (Porth, 2011). There are usually no symptoms, except swollen lymph glands, but the person can still infect others during this stage. The person may be susceptible to pneumocystic pneumonia during this stage.
- Stage 3: In this stage, the HIV infection has transitioned to AIDS. The immune system is weakened, increasing the risk of developing serious infections and certain cancers. Common infections include pneumonia, tuberculosis, candidiasis (yeast infection), and severe diarrhea. Cancers include Kaposi sarcoma, non-Hodgkin lymphoma, and cervical cancer.

These symptoms may be confused with other illnesses. The only way to know if a person has been infected with HIV is by a blood test. A small amount of blood is collected and sent to a laboratory for HIV testing. The healthcare provider will discuss the results to determine the individual plan of care.

What can be done for HIV/AIDS?

- Although there is no cure for HIV/AIDS, there are medications that can manage the HIV infection and symptoms for many years. The medications that manage HIV/AIDS are called antiretroviral medications (ARVs). Side effects or symptoms from ARVs are listed below
- It is important to take antiretroviral medications exactly as prescribed in order to manage the disease. A person can live for many years with well-managed HIV
- Antibiotics may also be given to prevent infections
- The HIV infected person, all family members, and caregivers should practice universal infection precautions: such as hand washing after direct contact, use of protective barriers such as gloves, for direct contact with blood and other body fluids, and appropriate safe collection and disposal of needles

What to report to the hospice/palliative care team?

- Cough, shortness of breath, coughing up blood
- Fever or night sweats
- Rash or lesions on the skin or in the mouth
- Diarrhea, vomiting, abdominal pain, rectal or oral bleeding
- Trouble seeing, difficulty concentrating, headache, confusion
- Uncontrolled movements of the body
- Weakness in the limbs, loss of sensation, trouble walking or moving
- Decreased appetite, weight loss
- Pain or discomfort
- Sadness, depression, worry, anxiety, or spiritual distress

Conclusion

HIV/AIDS is a serious illness and its course can be managed by the healthcare team. It is important to report all changes in condition to the healthcare team, and to carefully follow their recommendations to ensure the best possible quality of life.

Other HPNA Teaching Sheets on are available at www.HPNA.org.

Reference

Berry P, *Core Curriculum for the Generalist Hospice and Palliative Nurse. 3rd Ed.* Dubuque, IA: Kendall/Hunt Publishing Company; 2010: 130-132.

Porth Carol, *Essentials of Pathophysiology. 3rd Ed.* New York, NY: Wolters Kluwer/Lippincott William & Wilkins; 2011: 364-373.

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