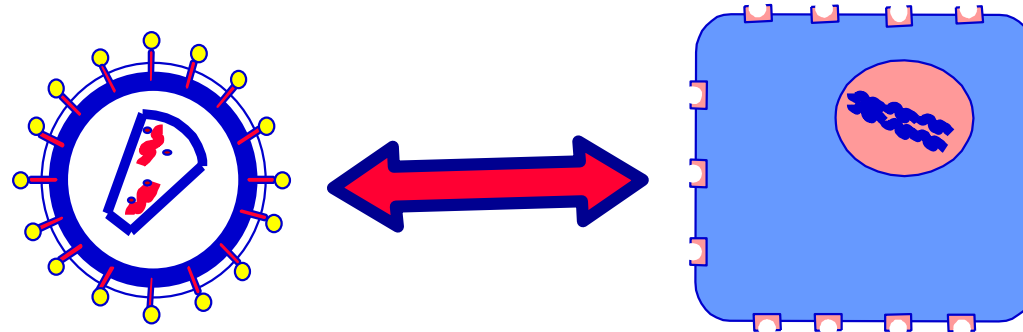


HIV Infection

A struggle between:

the *immune system*

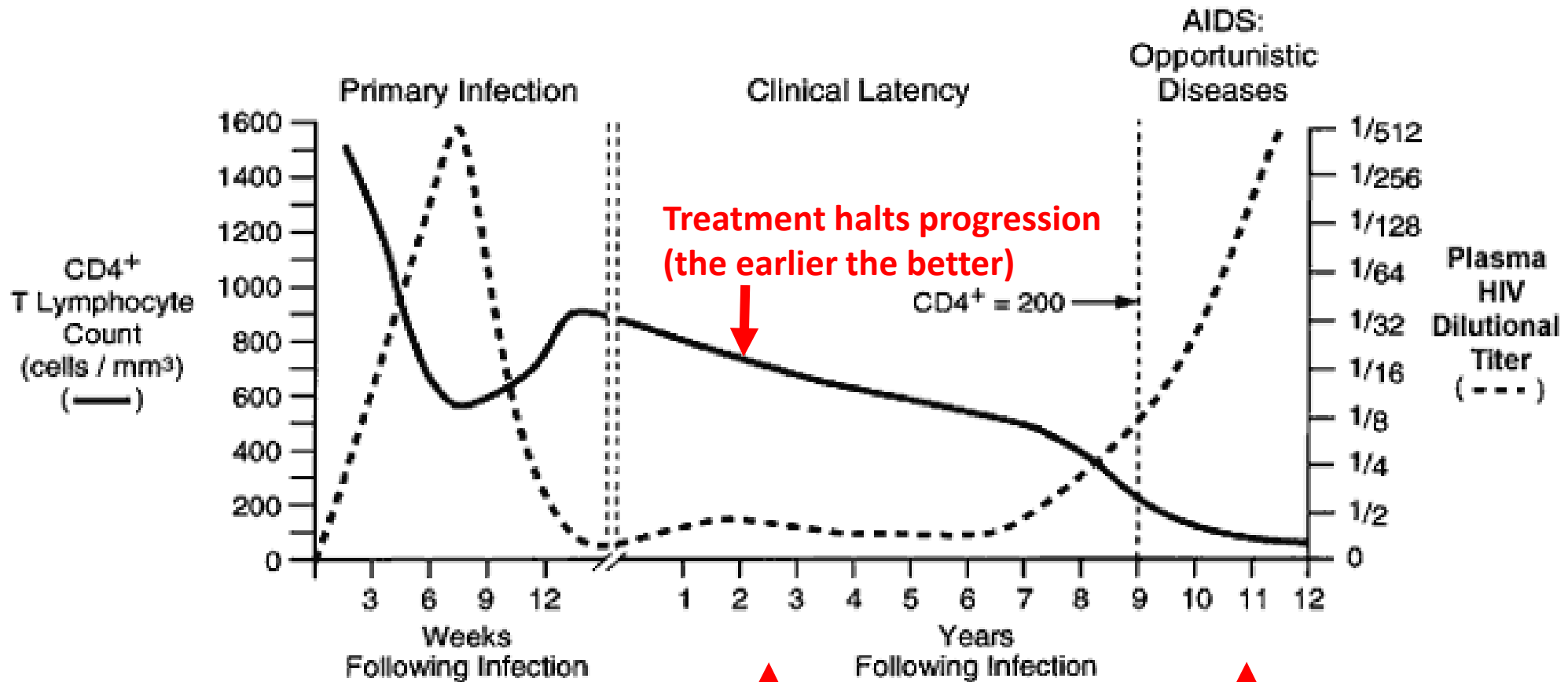
the *virus*



HIV testing

- Considerations:
 - HIV 1 ab vs HIV 2 ab
 - Antibody vs antigen
 - Time to results, linkage to care
- Home test kits: send in for results
- Rapid tests
 - Blood: antibodies, need confirmatory
 - Saliva: antibodies, need confirmatory
 - Urine: antibodies, need confirmatory
 - 4th generation: combination of p-24 antigen +HIV ab

An Example: Antiretroviral Nonadherence in HIV



Treatment halts progression (the earlier the better)

CD4+ = 200

Becomes asymptomatic

If untreated, disease progression

Acute symptoms, high risk of transmission

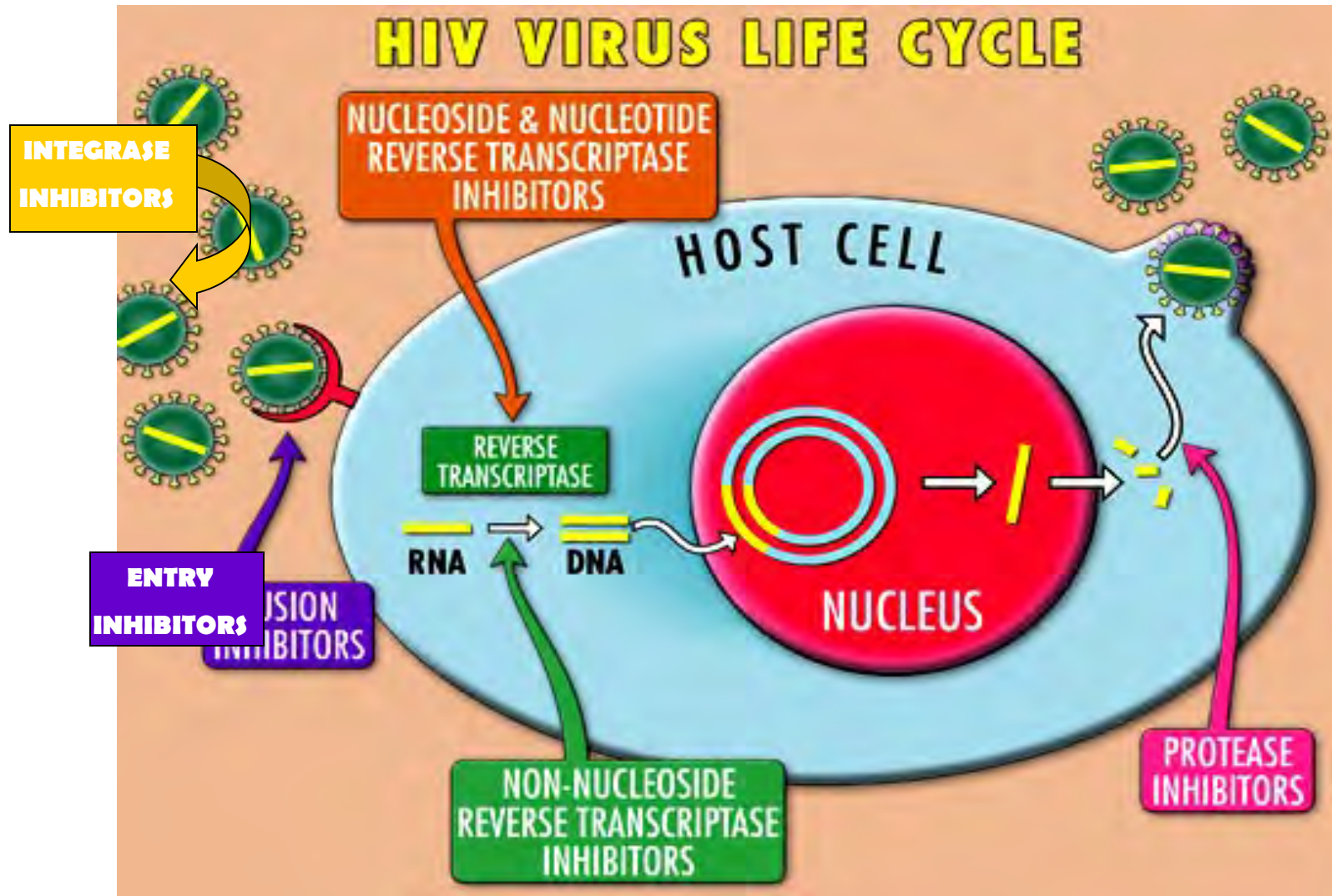
Initiating Therapy: 1-2-3 Concept

1st Regimen

2 Classes of Drugs

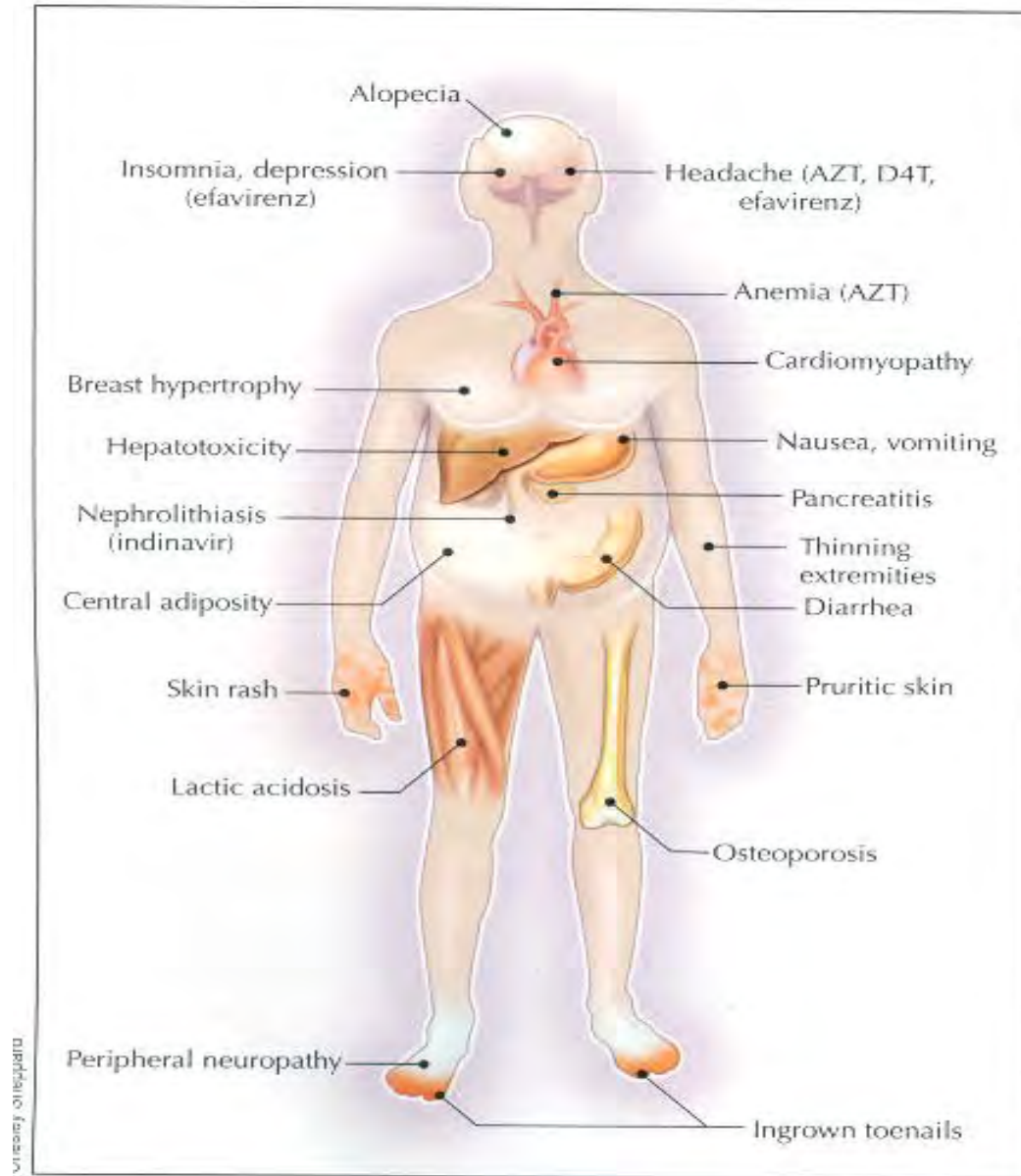
3 Drug Minimum

<http://aidsinfo.nih.gov/guidelines/html/1/adult-and-adolescent-treatment-guidelines/0>



<http://www.youtube.com/watch?v=RO8MP3wMvqg>

Adverse effects of ART



Montessori, V., Press, N., Harris, M., Akagi, L., & Montaner, J. (2004). *Adverse effects of antiretroviral therapy*. CMAJ. 170 (2): 229-38.

Adherence

- **High rates of adherence (90% or better) correlate with:**
 - viral suppression (goal is undetectable)
 - reduced rates of resistance, transmission
 - improved survival
- **Lifelong therapy** requires commitment of patient and health care team
- **Adherence** assessment and counseling should be done at every visit

Interprofessional Team-Based Care

Something qualitatively different happens – an “aliveness of the human spirit” – when providers and patients become *people working on a shared problem together*

