### NUTRITIONAL ASSESSMENT FORMULAS

A complete nutritional assessment should ideally include not only a diet history, but several measurements which will provide a more sensitive and accurate assessment of a client's nutritional status. In addition, these measurements are useful indicators of changes in nutritional status.

#### **BODY SIZE**

#### Weight

A measurement of total body weight is often the only measurement available to determine changes. Weight measurements should be done routinely **at each and every visit and be recorded.** In order to ensure accuracy, the same scale should be used and calibrated regularly.

Weight graphing provides an excellent visual assessment and may provide clinical indications of changing health status.

*To convert weight in pounds to kilograms:* Divide the weight in pounds by 2.2. *To convert kilograms to pounds:* Multiply the number of kilograms by 2.2.

#### Ideal Body Weight (IBW)

This measurement is useful for comparing a person's current (actual) weight against a recommended weight based on height. The Metropolitan Life Insurance Tables (1983) are the most recent tables available.

#### IBW can also be calculated:

Male: 106 pounds + 6 X number of inches over 5 feet tall Female: 100 pounds + 5 X number of inches over 5 feet tall

In addition, a 10% plus/minus provision is also included to allow for variations in frame size providing a weight range for good health. Typically, when an individual is below their IBW range fatigue, poor energy, and nutritional risk is obviously increased.

Caution should be used in relying on IBW standards as a basis for determination of nutritional status since these standards have been developed using a healthy adult population.

#### Adjusted Body Weight

When someone is obese, that is, their body mass index (BMI) is over 30, instead of using the person's current actual body weight to calculate caloric needs, use adjusted body weight. (For BMI formula, see Page 7-6).

Adjusted body weight is calculated by using the following equation: Actual Body Weight - Ideal Body Weight x .25 + Ideal Body Weight

#### Reference Body Weight (RBW)

RBW may be used instead of ideal body weight. RBW is the midpoint of the healthy weight range in the 1995 Dietary Guidelines for Americans. Within the healthy range RBW can be adjusted upward for more highly muscled and downward for less muscled individuals.

#### Usual Body Weight (UBW)

This is the weight the client usually remembers. The client should be asked what they weighed most of their **adult** life. This is a crucial piece of information to obtain since most people have never weighed within their IBW range. In addition, weights for 6 months ago and 1 year ago should also be asked and recorded.

Expectations for weight management should be appropriately defined based on this information.

#### Height

The actual height of the client should always be measured at the first visit. Clients often report inaccurate heights which will affect determinations of IBW and potentially assessment of overall nutritional status.

Balance beam scales usually have a height measuring device. Another option is to use a measuring tape placed on the wall.

To convert inches to centimeters: Multiply inches by 2.54.

#### Instructions for Obtaining Height

Height should be measured without shoes. With the client's back against the wall or measuring board, ask him or her to stand erect and to look ahead. The outer corner of the eye and top of the ear should be in line parallel to the floor. Heels, scapula, and buttocks should touch the wall.

A right-angle headboard should be lowered to rest flat at the crown of the client's head. Height should be read to the nearest inch or .5 cm.

#### **BODY COMPOSITION**

It has been widely agreed that the ability to maintain lean body mass, or muscle tissue can and will influence the overall health of an individual infected with HIV. There is a strong correlation between loss of muscle mass and serious illness. It is therefore important to monitor changes in body composition that influence nutritional status.

#### Triceps, Skinfold and Mid-upper Arm Circumference

Triceps skinfold (TSF) thickness measures the amount of subcutaneous body fat. Approximately 50% of total body fat is subcutaneous. TSF is one of the skinfold sites found to be most reflective of body fatness. Changes in TSF are estimated to take 3-4 weeks. Formulas using mid-upper arm circumference (MAC) and TSF provide indirect assessment of the arm muscle area and arm fat area.

#### Instructions for measuring triceps skinfold:

- Do not take skinfold measurements after the person has exercised, swam, or showered since skinfold thickness will be increased due to increased blood flow to the skin.
- The caliper needle should be on zero before starting the procedure.
- The point at which the skinfold measurement is taken is the same point used for mid-arm circumference. This point is halfway between the acromion process of the scapula and the tip of the elbow. Mark this point with a felt pen or adhesive label.
- Always take skinfold measurements (not only triceps skinfold) on the right side of the body.
- The person should be sitting or standing with arms relaxed, hanging at their side.
- At the marked site on the triceps, grasp a vertical fold of the skin and underlying fat between the thumb and index finger, 1 cm above the midpoint. The skinfold should be parallel to the length of the arm. Both the thumb and the index finger should be 8 centimeters apart from the midpoint mark. Place the caliper just below the thumb and index finger.
- The hand grasping the skinfold should hold the fold while the caliper is being used to measure.
- Take the measurement 2 seconds after full pressure of the caliper is applied. Three measurements should be taken and the average value used.
- Always open the caliper prior to removing from the skinfold.
- Do not use plastic calipers. They lack adequate tension.

For resources and more information on technique, calculations, interpretation and equipment, see **References** (Section 10).

#### Use and Interpretation of Skinfold Measurements

Indirect methods of measuring subcutanious fat, total body fat and somatic proteins (skeletal protein mass) include skin fold measurements. Special equipment required includes a skinfold caliper.

Good clinical skill and judgment is a critical element in obtaining and interpreting skinfold data. The thickness of skinfolds gives an estimation of subcutaneous fat and stored energy. The most common skinfold site is over the triceps muscle. This measurement is taken with calipers on the right arm midway between the olecranon process and the acromial process (midway between the shoulder and the elbow). The most common approach to interpreting Tricep Skinfold (TSF) results are to compare them to percentile values for age and gender. In general, patients are considered to be malnourished if the TSF is at the 5th percentile or below, and to be at risk if the TSF is between the 5th and 15th percentiles.

Depletion can be a reflection of poor oral intake or nutrient deprivation. Serial measurements are useful in evaluating changes in subcutaneous fat or somatic protein mass in patients whose weight remains normal.

A major drawback to these measurements is that they are chiefly used to detect overweight; percentile tables have been established based on healthy populations. In addition, the measurements are relatively imprecise unless the same person does the measurements each time and has good technique.

#### Estimation of Somatic Protein Stores

Midarm muscle circumference (MAMC) and midarm muscle area (MAMA) may be calculated from TSF and mid-arm circumference (MAC) using the following equations:

MAMC(cm) = MAC(cm) - 0.314 X TSF(mm)

MAMA(mm<sup>2</sup>) = (MAC(cm) - 3.14 TSF(mm)<sup>2</sup>4 X 3.14\*where MAC and TSF are in mm.

The results provide an indication of muscle mass. Reference standards for age and gender are commonly available.

#### **Bioelectrical Impedance Analysis (BIA)**

The three-compartment model of body composition allows for monitoring shifts in fluids and muscle. In this model the body is divided into three parts:

- **1. Body Cell Mass (BCM):** The most metabolically active tissue compartment made up of highly functional protein stores e.g. muscle, organs and circulating cells.
- 2. Extracellular Tissue (ECT): Bone, plasma, collagen
- 3. Fat Mass: Fat stores
- When BCM is increased or decreased the changes are mostly attributed to muscle tissue changes.
- ♦ When ECT is increased or decreased it may be due to fluid shifts.
- Note BIA parameters at initial assessment and monitor changes over time to give you a more accurate estimation of the individual's muscle and fat mass. See sample BIA Screening Flow Sheet, (Page 8.7).
- Note and review BIA results on a special form for the client. See BIA Results form, (Page 7-7).

#### Evaluation of Body Cell Mass (BCM) using BIA

- Ideal body cell mass (IBCM) is estimated by multiplying an individual's ideal body weight by one of the following factors:
  - 0.42 for adult males
  - 0.32 for adult females
- Comparing the individual's current BCM to the IBCM (CBCM/IBCM) is helpful in evaluation and developing nutrition goals and appropriate interventions.
- It is generally accepted that more than one BIA test is necessary to establish a baseline, identify a trend in body composition, and provide the basis for starting or changing therapy.
- BIA is not sensitive enough alone to identify body shape changes seen in "lypodystrophy syndrome". Waist-hip and mid-arm circumference measurements are more useful.

#### **BIA Equipment**

- BIA machines are available in single or multiple frequencies. Prices range from \$600 to \$2000 for single frequency machines, and start at \$5000 for multiple frequency devices.
- Some are programmed to just read out raw data or direct measurements of impedance, resistance, reactance, and phase angle, and make available software enabling users to input their own equations.
- Some devices use proprietary equations for calculating fat, body cell mass and other components and are less flexible in the user's ability to manipulate equations

and software applications.

For more information and links about BIA and equipment, see References (Section 10).

#### Body Mass Index (BMI)

BMI is an estimation of fat versus lean in body composition. It has been demonstrated to have a relatively high correlation with estimates of body fatness. BMI assesses a person's weight status as simply being underweight, average weight or overweight based on height.

$$BMI = \frac{Weight (kg)}{Height (meters^2)} \qquad or \qquad \frac{weight (pounds) \times 703}{height (inches) \times height (inches)}$$

BMI is not a sensitive measurement for HIV. It can be a general marker for changes and should be included in assessments.

As	sessmen	t Formu	as
BL	A Screening	g Flow She	et
Name	_	-	
Height Usual V	Weight Desi	irable Weight	
Ideal Body Weight	Ideal Body	y Cell Mass	
Date			
Wt. (Ibs.)			
% UBW			
% DBW			
ВМІ			
ВСМ			
%IBCM			
Fat (lbs.)			
Total Fluid			
Note			
Clinician's Signature			Date

#### **BIA Results**

Heigl	htWeightBMI*	IBW**	_
React	tanceResistance		
		Weight in Ibs.	% IBW
	Usual Body Weight (UBW)		
	Desirable Body Weight (DBW)		
	Body Cell Mass (BCM) (reflects changes in muscle)		
	Fat		
Fluid		ble []Edema	
Asses [ ]( [ ]] [ ]]	Status: []Dehydrated []Acceptab Sement: Current body composition appears nor Requires further nutritional assessmen Recommend nutrition referral	mal t/follow-up	
Asses [ ]( [ ]] [ ]] *BM (mete W 20 Un 25	<b>Status:</b> []Dehydrated []Acceptates <b>Soment:</b> Current body composition appears nor Requires further nutritional assessmen	rmal t/follow-up (date)	(kg) by height

#### **ESTIMATION OF ENERGY REQUIREMENTS**

Estimating energy requirements usually involves the use of mathematical formulas which are used to estimate energy needs at rest, called Basal Energy Expenditure (BEE). The most common formula used is the Harris-Benedict formula. Factors which consider levels of activity and stress such as illness or trauma are added to the BEE to estimate total calorie needs. The following are commonly used formulas for estimating energy requirements.

BEE represents the amount of energy expended when the body is at complete rest. BEE varies with age, gender and body size.

Men: BEE = 66.47 + (13.75 X W) + (5 X H) - (6.76 X A)Women: BEE = 65.51 + (9.56 X W) + (1.85 X H) - (4.68 X A)W = Weight in kg A = Age in years H = Height in cm

Activity Factor: 1.3 Normal 1.2 If confined to bed

<b>Stress Factors:</b>	1.2 Maintenance - Well, feeling good
	1.5 Sick - Fever, not doing well
	1.75 Very Sick - Major illness with multiple
	Opportunistic Infections (OI)

Nonprotein Calorie Requirements = BEE X Activity Factor X Stress Factor

Recommendations for the estimation of calorie needs for people living with HIV must be individualized. The Harris Benedict Equation underestimates the energy needs of adults living with HIV by approximately 13%. Clinicians can consider adding a 1.13 stress factor when using this equation to estimate energy requirements for individuals with HIV infection.

In general, calculate a minimum daily intake of 16 calories for each pound of baseline weight before infection or wasting for men and 13-14 calories for each pound of weight in women.

#### **Estimating Protein Requirements**

Protein requirements may increase to 1-1.5 grams/kilogram/body wight. To maintain body protein stores, highter levels than normal (0.8 grams/kilogram body weight) may be required. (1 kilogram = 2.2 pounds).

#### Nutritional Side Effects of Selected Medications

The purpose for taking potent combination antiretroviral drugs is to suppress HIV replication, keeping viral load as low as possible for as long as possible. These drugs have been able to keep people healthier than before. The more you understand how to take your medications and how to control any potential side effects, the easier it will be to take your medications and the better they will work for you. Find the medications that you are taking on the HIV Medications and Nutritional Complications chart and become aware of their possible side effects and any dietary considerations you must take.

The protease inhibitor indinavir (Crixivan<sup>®</sup>) is one medication that has special dietary instructions. It must be taken on an empty stomach or with very little every 8 hours. For ideas of what to take with this medication, see "Additional Food List" for Crixivan<sup>®</sup> (indinavir sulfate) chart at the end of this chapter.

#### Daily Routine Chart for Medications and Meals

What you eat and drink with your medications, and when, do make a difference. It can make the difference whether you achieve consistently good blood levels of your medications or whether you don't and increase your risk of developing a resistance to your medication. Setting up a daily food and medication schedule to follow, as closely as you can seven days a week, will help a lot. Copy and use the Daily Routine Chart in this section to plan when to take all your medications and meals. Copy and use the next page on its back to note any concerns you have and share them with your health care team. Carry this form with you for easy reference.

x = Possible Rx = Prescription OTC = Over-the-counter	A - Appetite Los D - Diarrhea C - Constipation	A - Appetite Loss D - Diarrhea C - Constipation		-	N = Nausea V = Vomiti	N = Nausea V = Vomiting	-24	Nausea Ft = Fatigue Vomiting H = Headache Others	Ft = Fatigue H = Headache	- Contraindication Others - More concerns	- Contraindication - More concerns
Medication	Rx	OTC A	8	C N	V V	2	=	With Food	Without Food		Other Considerations
STEROIDS (INCLUDING ANABOLICS) + OTHER MEDS USED FOR WASTING	× 0 ¥			×			×				<ul> <li>Anabolics in general:</li> <li>Skin problems, e.g. acne</li> <li>Hair growth (hirsutism)</li> <li>Menstrual irregularities</li> <li>Change in libido and potency (altered desire for sex, ability to have erection and cjaculation)</li> <li>Fluid retention</li> <li>Fluid retention</li> <li>Abnormal liver enzymes/hepatitis (jaundice)</li> <li>Altered blood glucose, even diabetes</li> </ul>
Dexamethasone (Decadron®)	× (0						F ×	Take with food			Stomach upset/ulcers, indigestion, weight gain, increased urination, depression.
Testosterone Injections: Testosterone cypionate, testosterone enanthanate; (Depo-testosterone©); Patches: Testoderm©, Androderm©	×			×							Mood changes; increase in hemoglobin/ hematocrit (red blood cell count-RBC)
Nandrolone (Deca- Durabolin®)	×		×	×	×	4	1. 			Not with severe hepatic dysfunction.	Sore tongue, chills
Oxandrolone (Oxandrin®)	×		×	×	×			and a second second			Sore tongue.
Oxymetholone (Anadrol®)	×		×	×	×					Not with severe hepatic dysfunction.	Masculinization, alterations in cholesterol
Pentoxifylline (Trental®)				x	×		H	Take with food	a second and a second	Think I.V. sale of Second	GI (NVD); headache <sup>II</sup>
Recombinant human growth hormone (Serostim®)	×		×	×			×			Caution with diabetes. Do not take if active tumor present	Musculoskeletal discomfort of hands and feet; increased blood sugar, triglycerides
Thalidomide (Thalomid®)	×			×		×	×		Take on empty stomach	Can cause birth defects if taken when presmant	Drowsiness, rash, dry mouth, edema, acne, insomnia, sedation.

	A = Appetite Loss D = Diarrhea C = Constinution	te Loss ea			z >	N = Nausea V = Vomiti	N = Nausea V = Vomiting		er er	Ft = Fatigue H = Headache	<ul> <li>Contraindication</li> <li>Others - More concerns</li> </ul>	- Contraindication More concerns
Medietin	Rx 0	OTC /	A D	0	z	>	Ft.	=	With Food	Without Food	٠	Other Considerations
ANTIRETROVIRALS			H	_			-	-				
Nucleoside Analogue Reverse Transcriptase Inhibitors (NARTIs)		1										
AZT = zidovudine (Retrovir®)	×		×		×	×	×	×		Take more than I hour before meals or with low fat meal®		Nausca; headache; dysphoria; bone marrow suppression (anemia, neutropenia); rash. <sup>12</sup>
ddI = didanosine (Videx®)	×		×	×	×	*		×		Take on empty stomach	Avoid alcohol	Peripheral neuropathy; pancreatitis; avoid antacids containing magnesium or aluminum; GI (NVD); abnormal liver function tests <sup>12</sup>
ddC = zalcitabine (Hivid®)	×		×	×	×	×	*	×		Take on empty stomach	Avoid alcohol	Peripheral neuropathy; oral & esophageal ulcers; pancreatitis <sup>12</sup>
d4T = stavudine (Zerit@)	×		×	-	×	×		×			Avoid alcohol	Peripheral neuropathy; CNS changes (agitation, dysphoria); pancreatitis <sup>12</sup>
3TC = lamivudine (Epivir®)	×		×	Ļ	×	×	×	×			and the second second	Nausea; malaise
AZT +3TC (Combivir®)	×		×		×		×	×				See individual drugs above
Abacavir (Ziagen®)	×		*		×	× .		×				Rash (may be part of hypersensitivity reaction-DO NOT RECHALLENGEI); GI (NVD); headache, fangue <sup>12</sup>
Non-Nucleoside Analogue Reverse Transcriptase Inhibitors (NNRTIs)	-	1										
Delavirdine (Rescriptor®)	×		×	×	×	×	×	×		No antacids	Do not take St John's Wort	Rash; headache; nausea
Nevirapine (Viramune®)	×	1		-	×	1	1	×			Do not take St John's Wort	Rash; headache; nausea
Efavirenz (Sustiva®)	×				×		×	×			Do not take if pregnant! Do not take St John's Wort	Rash; CNS changes (vivid dreams, dizziness, euphoria, dysphoria, hallucinations) <sup>13</sup>
Nucleotide Analogue Reverse Transcriptase Inhibitors		8. j	;	1			a na filia da la calendaria da la calendaria La calendaria da la calenda					
Adefovir dipivoxil – Bis-POM-PMEA (Preveon®)	×	1		×	×	e site			l-curnitine (Carnitor)			Available through expanded access only; found non-approvable by FDA. Kidney damage (proximal renal tubular dysfunction = PRTD), decreases carnitine levels <sup>12</sup>

x = rossible Rx = Prescription OTC = Over-the-counter	A = Appente Loss D = Diarrhea C = Constipation	V = Vomiting		H = Headache	Others - More concerns	113
Medication	V	D C N V Ft	H With Food	Without Food	â	Other Considerations
Protease Inhibitors (PIs)					Oral Solution warning - see other considerations. Marked alterations in levels of other drugs, both HIV- and non-HIV- related. Must consult with pharmacist/physic ian when any new medication is taken Do not take vitamin E above that in a multiple vitamin. Do not take St John's Wort	<ul> <li>Because of potential toxicity due to the large amount of the excipient propylene glycol, AGENERASE Oral Solution is contraindicated in infants and children below the age of 4 years, pregmant women, patients with hepatic or renal failure, and patients treated with disulffram or metronidazole PIs in general:<sup>12</sup></li> <li>Lipodystrophy syndrome: fat redistribution (increased fat in waist, neck, breasts; decrease in extremities, buttocks, face); elevated glucose (or frank diabetes mellins)</li> <li>Abnormal liver function tests (increased enzymes: SGOT-ALT; SGPT-AST; alkaline phosphatase, bilinubin, GGT)</li> <li>Hair and nall changes</li> </ul>
Amprenavir (Agenerase®)	×	× × ×		Take with no more that 67 grams of fat.	Not with Rifampin. Avoid extra vitamin E above a general multiple vitamin. Caution with: Amiodarone, Lidocaine, birth control pills, Viagra, Sustiva, tricyclic antidepressants, quinodine. Do not take St John's Wort	Rash; GI (NVD); fatigue; tingling around the mouth. Each 150 mg capsule contains 109 IU vitamin E, each mL solution contains 46 IU. High doses of vitamin E may exacerbate blood coagulation defect of vitamin K deficiency caused by anticoagulation therapy or malabsorption.
Indinavir (Crixivan®)	×	x x x	×	Wait 2 hours after last meal/ snack, take med., then wait 1 hour	Avoid grapefruit Juice Must drink excess water	Kidney stones; abdominal, back or flank pain; elevated serum bilirubin (jaundice); GI upset

<ul> <li>R = Prescription</li> <li>OTC = Over-the-counter</li> </ul>	<ul> <li>A = Appente Loss</li> <li>D = Diarrhea</li> <li>C = Constibution</li> </ul>	petite. arrhea nstipati	550				V = Vomiting	<u>بو</u>	Ĩ	H = Headache	Others - More concerns	- More concerns
Medication	Rx	010	V :	a	C N	2	Ft	Ξ	With Food	Without Food	4	Other Considerations
										to eat again. May take with choice on "Additional Food List" for Crixivan	approximately 2 liters daily Do not take St John's Wort	
Nelfinavir (Viracept©)	×			×	×	×	<u></u>	x	Food increases absorption & reduces GI side discomfort		Avoid acidic food or liquid Do not take St John's Wort	Diarrhea; rash
Ritonavir (Norvir®)	×		×	×	×	×		×	Take with food	a an	Do not take St John's Wort	GI (NVD); numbness around mouth (circumoral paresthesia)
Saquinavir mesylate (Invirase©)	×			×	×				Take within 5 minutes or up to 2 hours after a full meal. High fat increases absorption.	a de la constante de la constan La constante de la constante de La constante de la constante de	Avoid alcohol Do not take St John's Wort	(dvn) id
Saquinavir (Fortovase®)	×			×		×	×	×	Take with or up to 2 hours after a full meal. High fat increases absorption.		Avoid alcohol Do not take St John's Wort	As above
OTHER MEDICATIONS USED TO RA HIV			1	- 		-	а. С					A second s
	×	1.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	×	×	×	-	1.1			Caution with renal impairment & geriatrics.	BM suppression
OTHER ANTIVIRALS	_				Η	-						
Acyclovir (Zovirax®)	x		x	x	-	x	x	x				Ensure hydration
Cidofovir (Vistide®)	×			×	Ê	×		×	After meal			Kidney toxicity; neutropenia; fever
Famiclovir (Famvir®)	×				×	-	×	×				
Foscamet (Foscavir®)	×		x	×	×	×		×			Kidney disease	Electrolyte disturbances; kidney problems; seizures <sup>12</sup>
Ganciclovir (Cytovene®)	×		x	×	Ĥ	xx		×	Take with food			Neutropenia (decreased WBC)
Valacyclovir (Valtrex®)	×			×		×					Should not be taken by people who are allergic to acvelovir.	At high doses (8000mg/day) may reduce levels of neutrophils and white blood cells.
ANTIBIOTICS /	-	L				-						

Rx - Prescription OTC - Over-the-counter		A = Appetite Loss D = Diarrhea C = Constipation	29			N = Nausen V = Vomiting	8	ű I	Ft = Fatigue H = Headache	<ul> <li>Contraindication</li> <li>Others = More concerns</li> </ul>	<ul> <li>Contraindication</li> <li>More concerns</li> </ul>
VTS	Rx	OTC	Q V	U I	2	Ft	=	With Food	Without Food	4	Other Considerations
Albendazole (Albenza®)	×				×			Take with food			Abnormal liver function tests, abdominal pain, BM suppression <sup>1</sup>
Ampicillin (Omnipen®, Unasyn®)			×		×				Take on empty stomach, ½ hour before or 2 hours after eating		Rash; heartburn; urinary tract infection in women
Amoxicillin			×	Ē	×						
Amoxicillin + clavulanic acid (Augmentin®)					<u>+</u>						
Atovaquone (Mepron®)	×		×		×		×	Take with food			Taste change; dyspepsia; abdominal pain; fever: insomnia; hypotension. <sup>10</sup>
Azithromycin (Zithromax®)	×		×		×				Take on empty stomach one hour before or after eating. Avoid magnesium or aluminum containing antacids	Caution in people with impaired liver function.	
Cephalexin (Keflex@)	×		×		$\vdash$	×	×				Rash: oral candidiasis: sore mouth/toneue
Ciprofloxacin (Cipro®)			×		×				Take on empty stomach		and the second se
Clarithromycin (Biaxin®)	×		×		×		×			Caution with alcohol.	GI (NVD); abnormal taste; headache <sup>11</sup>
Clindamycin (Cleocin®)	×		×		×			Take with food			Diarrhea (may be pseudomembranous colitis); NV; rash <sup>11</sup>
Clofazimine (Lamprene®)	×		×		×			Take with food			Skin and fluid discoloration, rash, dry eyes. 10
Dapsone	×			-	×					Do not use if deficient in enzyme G6PD	Anemia <sup>II</sup>
Dicloxacillin (Dynapen®)	×		음탄 : 1 공간		×	13. 1	24	Take with food		May reduce the effectiveness of oral contraceptives.	Stomach upset, gas, loose stools, skin rashes, redness, itching.
Erythromycin	×		*		× ×		2			Multiple drug interactions.	Abdominal pain, changes in appetite, abnormal liver function.
Ethambutol (Myambutol ®)	×		×		×		×	Take with food		Not to use with aluminum-	Decrease in visual acuity, rashes, joint pain, stomach unset abdominal nain faur-

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x = Possible Rx = Prescription OTC = Over-the-counter	A - Appetite Los D - Diarrhea C - Constipation	A - Appetite Loss D - Diarrhea C - Constipation	<u>_</u>	11.	z >	N = Nausca V = Vomiti	N = Nausca V = Vomiting		ä x	Ft = Fatigue H = Headache	- Contraindication Others - More concerns	- Contraindication - More concerns
Medication	Rx	010	1	a a	Z	>	Ρŧ	Ξ	With Food	Without Food	•	Other Considerations
				-		1					containing antacids.	dizziness, mental confusion.
odoquinol (xodoxin@)			×	-	×	×			Take with food			
Isonaizid=INH (Nydrazid®)	×				×	×		19 July 19		Take on empty stomach Ihour before or after eating; add B6 supplements	Avoid alcohol	Noninfectious hepatitis, B6 deficiency
Metronidazole (Flagyl®)	×		×	×	×	×		×	Take with food		Avoid all alcohol.	Dry mouth, metallic taste, dizziness, confusion, rash. 10
Minocycline	×							×	Take with food		Should not be taken with antacids or mineral	Dizziness, drowsiness. <sup>10</sup>
Paromomycin (Humatin®)	×		×	6	×	1. J.			Take with food		Not to use with	Abdominal cramps
Pentamidine (Nebupent®, Pentam®)	×	-	×		×	×	×			「「「「「「」」	kidney or liver disease	Metallic taste; dyspnea; hypoglycemia and hymerolycemia (disheree); hypoglycemia 2nd
Penicillin V (Pen.Vee® K)	×		×		×	×	alle ga a	S. Barris	Take with food for more consistent blood levels.		Should not be taken with fruit juice or carbonated beverages	Rash; stomach upset; black, hairy tongue, less frequently. allergic skin reactions and anaphylactic shock.
Primaguine					×	×						Anemia: abdominal asia: GI (MMI)
Pyrimethamine (Daraprim®)	×	<u>^</u>	x		×	×			Take with food		Caution with liver or kidney impairment.	Megaloblastic anemia, tongue tenderness, taste loss, abdominal cramp, bone marrow
Pyrazinamide			×		×	×		Ē	Take with food			Muscle/ioint aches: GI (NV)
Rifabutin (Mycobutin®)	×				×	×	1. 53		Take with food to reduce upset stomach	Take on empry stomach	High fat meals slow absorption	Discolored urine, stomach upset, rashes, taste changes. <sup>10</sup>
Rifampin (Rifadin©,Rimactane©)			×	- <u>1</u>	×	×		×		Take on empty stomach 1 hour before or after eating.		Discolored urine; neutropenia; rash <sup>11</sup>
Streptomycin (ONLx INJECTION)	×		×		×	×		2,57				Toxicity to kidney, nerves, cars <sup>11</sup>
Sulfadiazine(Microsulfon®)	x	0.400	() i 8 ()	8.) 17.7				×		Take on emoty	Cantion in	Fatar itahina mak akamaning ta

Rx = Prescription OTC = Over-the-counter	D = Diarrhea C = Constipation	Thea stipatio	5 g			>	V = Vomiting	ing.		H = Headache	Others - More concerns	- More concerns
	ž	OTC	<	2	U	2-	V Pt	-	With Food	I Without Food stomach		Other Consulerations dispinant bandacha
					-	-	-	_			sunlight	
Tetracycline (Achromycin®, Tetracyn®)	×		×	×		×	×			Take on empty stomach 1 hour before or 2 hours after meals.		Stomach upset, rash, hairy tongue, itching, fevers, chills, anemia, skin discoloration
Trimethoprim- sulfamethoxazole=TMP-SMX = cotrimoxazole (Bactrim@, Septra@)	×		×	1.1.3.1.3		×	×					Rash; allergic reaction (may rarely be serious Stevens-Johnson syndrome-fever, nausea, sloughing of mucous membranes of mouth); neutropenia <sup>12</sup>
ANTIFUNGALS	1		1	Ç,		-	_	-				
Amphotericin B	×		×	×		×	×	×		Take on empty stomach		Kidney toxicity, anemia, fever, altered blood pressure.
Clotrimazole (lotion, cream, solution, troches)	×	×		12.34								Topical administration may cause Itching, rashes, redness, stinging, blistering, peeling, swelling, burning.
Fluconszole (Diflucan®)	×			×		×	×	×				Nausea; rash; diarrhea <sup>11</sup>
Flucytosine	×		×	×		×	×	×			Caution in renal impairment.	Dry mouth, abdominal pain, rash confusion, anemia.
Itraconazole (Sporonox®)	x		22	×		×	×	×		p	Caution with diabetes.	Nausea <sup>11</sup>
Ketoconazole (Nizoral@)	x		1	×		×	×	×	Take with food	P	Avoid alcohol	Nauses; vomiting; itching; abdominal pain
Nystatin (Mycostatin@)	×		1	×		×	×	-				GI distress, stomach pain. 10
ANTIDEPRESSANTS / ANTIANXIETY TX	-											
Amitriptyline (Elavil®)	×			*	×	×	×	×	Take with food	q	Increased fiber may decrease, drug effect.	Dry mouth, taste changes, increase risk of dental problems, sedation, weakness, edema, rash. <sup>10</sup>
Amoxapine (Asendin®)	-					-	-	-				
Buptopion (Wellbuttin®)	×	5	×		1.2		1. 444 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1 200			Alcohol use may intensify the effoct and increases the risk of seizures.	Weight loss, restless, agitation, anxiety, insomnia, confusion, hyperactivity, feeling of elation, delusions, hallucinations, or impaired mental function.
Desipramine (Norpramin®)	×			×	×	× .	×	×	Take with food	9	Increase fiber may decrease drug effect.	Increase appetite, increase wr, dry mouth, drowsiness, blurred vision, weak, hypotension, hypertension, confusion.
Fluoxetine (Prozac®)	×	1	×	×	×	×	×	×			Avoid tryptophan supplement	Dry mouth, taste changes, dyspepsia, tremor, insomnia, drowsiness. <sup>10</sup>

Rx = Prescription D OTC = Over-the-counter C	C = Constipation	ite Los Ies ipation	, ,	e e	z >	Von	V = Vomiting		Fr = Fatigue H = Headache	<ul> <li>Contraindication</li> <li>Others = More concerns</li> </ul>	<ul> <li>Contraindication</li> <li>More concerns</li> </ul>
Medication	Rx 6	OTC	A D	c	z	٨	11	II With Food	d Without Food	•	Other Considerations
Lorazepam (Ativan®)	×	, . 				1					Drowsiness, confusion, habit-forming (1" line
Nefazodone (Serzone®)			$\vdash$								
Nortriptyline (Pamelor®)	×		×		×	×		Take with food	po		Sedation, drowsiness, <sup>10</sup>
Paroxetine (Paxil®)	×		×	×	×	×		x Take with food	8	Not with tryptophan	Dry mouth, taste changes, weakness insomnia, drowsiness, sweating, edema, hypertension,
Sertraline (Zoloft®)	×		×	×	×	×		x Take with food	po	Avoid alcohol	Dry mouth, dyspepsia, insomnia, dizziness, tremor. <sup>10</sup>
Trazodone (Desyrel®)	×			×	×	×	×	x Take with food	8	Avoid alcohol	Increase or decrease appetite, dry mouth, increase risk of dental problems, drowsiness, blurred vision. <sup>10</sup>
Venlafaxine (Effexor®)	×		× ×	×	×	- 1.		x Take with food	po	Do not use with MAO inhibitors.	Drowsiness, dry mouth, insomnia, weakness, sweating.
APPETITE STIMULANTS				_		1.5	1				
Diphenhydramine (Benadryl®)		×					1				Dry mouth, sedation, dizziness, urinary retention
Prochlorperazine (Compazine®)	×			- <u>-</u>							Abnormal movements; hypotension; dizziness <sup>11</sup>
Promethazine (Phenergan®)	×		-								Same as above
[rimethobenamide (Tigan®)	×		-								Same as above
Metoclopramide (Reglan®)	×		×	-			Η	-			Diarrhea; weakness; restlessness"
Dronabinol (Marinol®)	×						-				Drowsiness; confusion; habit-forming
Medical marijuana	×		-	_			_		The second se		Drowsiness; confusion; habit-forming
Megestrol acetate (Megace®)	×		×		×	×	*			Caution with diabetes	Changes in menstrual flow; anorexia; edema
Ondansetron (Zofran®) CHEMOTHERAPEUTIC	×		+	×			×				Constipation; diarrhea; headache; fever <sup>11</sup>
Bleomycin sulfate (Blenoxane®)	×		×		×	×				Ensure adequate fluid intake	Pulmonary toxicity; fever, rash, chills. <sup>10</sup>
Cyclophosphamide (Cytoxan®)	×	1	×		×	×	-			Not for people with depressed BM function	Bladder inflammation/bleeding; temporary hair loss; GI (NVD); BM suppression
Cytarabine (Cytosar-U®)			×						A STANDARD W		
Daunorubicin = liposomal adriamucin (DaunoXome®)	×		×	1. 	×	×	×			Risk of serious,	Congestive heart failure; BM suppression; hair

	A = Appetite Los D = Diarrhea C = Constipation	<ul> <li>Appetite Loss</li> <li>Diarrhea</li> <li>Constipation</li> </ul>	_		z >	N = Nausea V = Vomiting	ting	ČI	Ft = Patigue H = Headache	- Contraindication Others - More concerns	- Contraindication - More concerns
Medication	Rx -	OTC /	A D	0	z	N I	11	With Food	Without Food		Other Cansiderations
										defects	back pain, anorexia, <sup>1</sup>
Doxorubicin (Adriamycin®)	×	-	×		×	ĸ	×			Avoid alcohol	Dry mouth, glossitis, stomatitis, Gl ulceration, esophapitic, fever, resh. 10
Etoposide (VePesid®)			×		×	×	-		Contraction of the second s		GI (NVD): BM suppression <sup>11</sup>
Interferon-alpha (Intron-A®)	×		×		×	×	×				Abdominal pain, fever, muscle weakness dizziness, coughing, depression
Methotrexate (Reumatrex®)	×		×		×				Take two hours after meal and one hour before next meal or snack		Liver damage, lung damage, anemia reduced white blood cell counts, stomach ulcers, GI (NVD). <sup>11</sup>
Paclitaxel (Taxol®)	×				×	×				Not to combine with other neuropathy- inducine druce.	Irregular heart rhythm, hair loss, diarrhea, skin rashes, stomach irritation, seizures.
Vincristine (Oncovin®)	×		×	×		×	×			Do not use with mitorrvein-C.	Peripheral neuropathy; hair loss, reduced white blood cell counts OT OUDAU
Vinblastine (Velban®)	×	<u> </u>	×	×	×	×	×			Ensure adequate	Stomatitis, sore throat, abdominal pain,
IMMUNE BASED THERAPIES + BONE MARROW BOOSTERS											II)Per without
Cyclosporine (Cyclosporin®)	×										Gum disease, kidney & liver toxicity, high blood pressure
Erythropoletin (Procrit© , Epogen©)	×		×		×	×	×			Not for people with uncontrolled high BP or anemia Vitamin B12 supplementation may be needed	Hypertension; fever; bone or muscle pain; cough, <sup>16</sup>
Granulocyte-colony stimulating factor (G-CSF) = filgrastim (Neupogen®)	×			157		1967 - 19 1967 - 197					Bone pain
Granulocyte macrophage colony stimulating factor (GM-CSF)			×				×				Chills, elevated liver enzymes, rash, muscle pain.
Interleukin-2 (Proleukin®)			×	ŝ	×	-	<b>L</b>			Abnormal or lung	Fever, chills, malaise, fatigue (flu-like illness)

	Con	D = Diarrhea C = Constipation			>	V = Vomiting	ting		H = Headache	Others - More concerns	- More concerns
Medication	Ičχ	OIC		D C	Z	V F	Pt 11	I With Food	Without Food		Other Considerations
Intravenous immune globulin (IVIG)	×			-	×	ĸ	×		-		Fever, chills, faintness
Leucovorin calcium					×	×	-	Take with food			
Prednisone (Deltasone®))	×							Take with food		May cause salt retention, salt intake needs to be	GI (NVD, ulcers) Mood changes Hair growth (hirsutism)
ANALGESICS			$\vdash$	ŀ	t	t	+			Icsurcted.	Long term use: osteoporosis, cataracts"
OPIATES/ANTAGONISTS										Caution in persons with history of substance use.	Opiates in general: <sup>12</sup> Decreased level of consciousness; sedation; lightheadedness; disorientation; dry mouth; constipation
Codeine		T	╞	ŀ	•	╞	ŀ			Avoid alcohol	
Fentanyl (Duragesic®, Sublimaze®)	×		×	×	×	. ×	< ×			Not for mild or intermittent nein	
Hydrocodone Bitartrate	*	1	╞	×	×	×	╞				
Methadone	×		$\vdash$	×	×	×	×				
Morphine			×			$\vdash$	-	Take with food			
Oxycodone (Percodan®, Percocet®)	×			×	×	×	×				
NSAIDs (Non-steroidal anti- inflammatory agents)										Minimize/avoid alcohol because of GI side effects	<ul> <li>NSAIDS in general: <sup>12</sup></li> <li>GI irritation (pain, decreased appetite, ulcers, bleeding)</li> <li>Alleroic reactions</li> </ul>
Ibuprofen (Motrin©)	×		×	×	×	×	×	Take with food		May increase the toxicity of the anticancer drug 5-	
indomethacin (Indocin®)	×		×	×	×	×	×	Take with food			
Naproxen (Naprosyn@)		×	×	×	×	-	×	Take with food			Stomatifie
Sulindac (Clinoril@) CNS STIMULANTS	×		×	×	×	×	×	Take with food			
Methylphenidate (Ritalin®)	×		×	×	×	×	×			May cause severe rises in blood pressure if combined with	Severe low blood pressure, respiratory arrest shock, heart attack, dizziness, sedation, cramps, dry mouth, taste alterations, sweating <sup>1</sup>

HIV Medications and	ledic	E	L O	S	Ĩ		Nutritional	nal	MO	Complications	
x = Possible Rx = Prescription OTC = Over-the-counter	A = Appetite Loss D = Diarrhea C = Constituation		z>	N = Nausea V = Vomiting			Ft = Fatigue H = Headache	ethers - A	<ul> <li>Contraindication</li> <li>Others - More concerns</li> </ul>		
Medication	Rx OIC	Q V	C N	V Ft	1	With Food	Without Food	•	and and and	Other Considerations	
	-	_	-					MAO inhibitors.	12.		
Please help us kee Marcy Fenton, MS, RD, AIDS	p this updated by Project Los Angele	reporting s, Nutritio	Col Col	ors or he syright	w inform D 2000 Al	IDS Project	errors or new information: 323-993-1612 or <u>infenton@apia.org</u> . Nut Copyright © 2000 AIDS Project Los Angelet, used with permission HIV Program: 323-993-1612. 1996 revisions: 9/96. 3/97. 4/97. w/ F Sil	th permission 4/07. w/ F. Silverre	on & HIV Prog	Please help us keep this updated by reporting any errors or new information: 323-993-1612 or <u>mfenton@apin.org</u> . Nutrition & HIV Program, AIDS Project Los Angeles Copyright © 2000 AIDS Project Los Angeles, used with permission Marcy Fenton, MS, RD, AIDS Project Los Angeles, Nutrition & HIV Program: 323-993-1612, 1996 revisions: 9/96, 3/97, 4/97, w/ F. Silverman 8/08, w/ Angeles, W. P. Kana Ando	]
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<ol> <li>San Francisco AIDS Foundation: Promizing New Drugz in Development (summary sheet), 1997</li> <li>Stadtlanders: The future of HIV drugs. Lifetimer 2, update from issue 1, 1998</li> </ol>	Mation: Promising of HIV drugs. Lifeti	New Drug ner 2, upo	a in Devi	dopment issue 1, 1	(summary 998	sheet), 1997					
<ol> <li>Eldridge B: Nutritional care in HIV infection and AIDS., in Krause's Food, Nutrition &amp; Diet Therapy. 9<sup>th</sup> edition. Maha</li> <li>Arky R, et al.: Physicians' Desk Reference, 51st Edition, Medical Economics, Inc. 1997.</li> <li>Pronsky ZM &amp; Fields-Gardner C: HIV Medications Food Interactions, 1st Edition. Food-Medication Interactions, 1998.</li> </ol>	re in HIV infection / Deak Reference, 5 rdner C: HIV Medic	Ist Edition	S., in Kra n. Medic	use's Foo	od. Nutriti nies, Inc. n Edition.	on & Dier Th 1997. Food-Medic	Dier Therapy. 9th edition. Mahan and Escott-Stump editors, 1996. Medication Interactions, 1998.	nhan and Escott-Stu 08.	ump editors, 19	96.	
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#### "Additional Food List" for Crixivan® (indinavir sulfate)\* by HIV/AIDS Dietetic Practice Group of The American Dietetic Association

These snacks were selected to meet the following requirements: at or below 2 grams of fat, 5.6 grams of protein, 65 grams of carbohydrate and less than 300 calories in total.

Sabina Beesley, MS, RD, Joya Melissa, RD and Marcy Fenton, MS, RD, members of the HIV/AIDS Dietetic Practice Group of The American Dietetic Association developed this list for Merck & Co. Inc. The FDA approved it in August 1997.

Some comments and clarifications have been added and these are in italics.

Feed	Sening	Grams of Fat	Grams of Protein	Grams of Carbohydr ate	Calaries
Nabisco <sup>™</sup> Newton Cobbler Bars	3 bars	0	2.4	54	180
Fig bars and juice	2 fig bars, 1 cup juice (not grapefruit)	2.5	1.5	50	224
Cream of rice with skim milk, raisins, and brown sugar	I cup cooked cream of rice	0.4	5.6	36	168
	1/2 cup skim 2 Tbs. sugar 1 Tbs. raisins	und Der Der H Sternen			
Snack well <sup>™</sup> wheat crackers with fat free cream cheese and	8 Snack well <sup>™</sup> crackers 2 Tbs. fat free cream	0.1	6	34	161
juice	cheese 1/2 cup juice (not grapefruit)				
Pretzels and soda	1 cup pretzels (non fat) ½ can of soda or cup juice (not grapefruit juice)	2.0	4.4	59	275
Jello <sup>™</sup> with canned fruit And Nabisco <sup>™</sup> ginger snaps	I cup Jello™ ½ cup canned fruit 3 Nabisco™ ginger snaps	2.1	4	31	158
Apple sauce and Nabisco <sup>™</sup> ginger snaps	I cup apple sauce 2 Nabisco <sup>™</sup> ginger snaps	1.9	1.3	62	252
Bagel and juice	1 small bagel (no seeds or nuts) 1 cup juice (not grapefruit)	0.8	3.7	55	241
Spaghettios in tomato sauce and soda	1 cup Spaghettios 1/2 can of soda or cup juice	2.1	5.3	61	282

\* AIDS Project Los Angeles fact sheet (8/15/97, 9/3/98). Adapted from The American Dietetic Association's Additional Food List for Crixivan@ (indinavir sulfate), Merck & Co, Inc

Feed	Serving	Grams of Fat	Grams of Protein	Grams of Carbohyde ate	Calories
	(not grapefruit)			010	
Corn tortilla with steamed rice and salsa	1 corn tortilla 1/2 cup rice (prepared without butter or oil) 3 Tbsp salsa	1.5	4.1	35	169
Citrosource <sup>™</sup> or Resource <sup>™</sup> Fruit Beverage supplement	½ box = ½ cup	0	4.4	18	90
Rice cakes with jam and juice	2 rice cakes with 2 Tbs. jam 1 cup juice (not grapefruit)	.08	1.4	79	324
Tomato soup, oyster crackers, tea with milk and sugar	1 cup tomato soup(w/ water) 6 oyster crackers 1 cup tea 2 Tbs. skim milk 1 tsp. sugar	2.2	3	25	126
PowerBar <sup>™</sup> with Gatorade <sup>™</sup>	½ bar 8 oz Gatorade™	1.3	5.0	36	173
Cereal with skim milk and banana	1 cup dry cereal* 1/2 cup skim milk 1 medium banana	1-2	4-5	31-45	150-180
Spaghetti (prepared without butter or oil) with tomato sauce and juice	½ cup cooked spaghetti ½ cup tomato sauce 1 cup juice (not grapefruit)	0.9	4.9	65	279
Toast (no added butter or margarine) with jam and tea or coffee with skim milk and sugar	I slice bread 2 Tbs. jam 8 oz tea/coffee 1 tsp. sugar 2 Tbs. skim milk	1.2	3.8	57	250
Plain popcorn (fat free, no butter or oil added, air popped or microwavable) and soda	3 cups popped pop corn 1 can soda or 1 cup juice (not grapefruit)	0	3.0	53	226
English muffin (no butter or margarine) with jam and regular or herb tea with sugar	1 English muffin 1 Tbs. jam 1 cup herb or regular tea 2 tsp. Sugar	1.0	4.4	49	226
Rice (prepared without oil,	1/2 cup prepared rice	0.5	5.6	28	136

<sup>\*</sup> Cereals include those that contain less than 2 grams protein or fat per ½ cup serving. Examples include Corn Pops<sup>TM</sup>, Fruit Loops<sup>TM</sup>, Golden Grahams<sup>TM</sup>, Chex<sup>TM</sup>, Rice Puffs, Corn Flakes<sup>TM</sup> Wheaties<sup>TM</sup> Special K<sup>TM</sup>, Coccoa Puffs, Cheerios, Frosted Mini WheatsTM, Raisin Bran<sup>TM</sup>, Total<sup>TM</sup>, Shredded Wheat<sup>TM</sup>. Does not include cereal with added nuts, granola, or Cracklin Oat Bran Cereal<sup>TM</sup>.

Food	Service	Grains of For	Grams of Protein	Grains of Carbahydr	Calorie
butter or margarine) with vegetables and soy sauce	1 Tbs. Soy sauce				
Angel food cake with canned fruit or berries and coffee	1 medium slice angel food cake ½ cup berries or canned fruit 8 oz coffee 2 Tbs. Skim milk 1 tsp. Sugar	0.7	5	50	218
Fruit (not coconut or avocado)	1 cup or 1 medium	0 to 0.5	0	20 to 50	73
Miso soup with a rice ball	10 oz soup 1 plain rice ball (1/4 cup rice)	0.9	5.7	33	164
Noodles (prepared without oil, butter or margarine) and steamed vegetables	½ cup cooked noodles ¼ to ½ cup steamed vegetables	1.5	4.9	25	130
Low- or fat-free vegetable soup# and bread (no butter or margarine)	1 cup soup 1 slice bread (no nuts or seeds)	2.1	4.6	19	120
Quaker ™ lowfat chewy granola bar	l bar	2	2	22	110
Dried fruit (no coconut, nuts, seeds or banana chips)	1/2 cup dried fruit	0	2	52	220
Snack Well ™ cereal bar	1 bar	0	1	29	120
Fruit roll up	l roll up	12	0	1	50
Toast with jelly (no butter or margarine), apple juice and coffee with skim milk and sugar	I slice of bread, I Tbs. jelly I cup apple juice I cup coffee 2 Tbs. skim milk I tsp. sugar	1.1	4	57	250
Jello <sup>™</sup> Snack Cup	I snack cup	0.4	5.1	23	89
Fat free pudding cup	I pudding cup	0.4	3	21	90
Popsicle (water based only)	I each (2 fl. oz)	0	0	n	43
Cortido: Corn tortilla with cucumber, tomato, lime juice and green onion	1 corn tortilla 1 medium tomato 1 medium cucumber	1.2	4.2	30	130
	(peeled) 1 green onion 3 Tbs. lime juice				
Matzo and salsa	1 Matzo board	0	3.5	23	120

# Includes vegetarian soups, which contain less than I gram fat and less than 3 grams protein per I cup serving.

Food	Serving	Grains of Fat	Grains of Protein	Crams of Carbohydr ate	Calories
	¼ cup salsa	1.1.1.1	1960 - 1975 1967 - 1967		
Baked potato and salsa	1 medium baked potato (no skin) ¼ cup salsa	0.3	3.5	36	162
Jicama, raw	I cup	0.2	1 1 LEAS	10	46
Pita bread (white, not whole wheat)	I whole white pita	1.1	5.4	33	165
Health Valley™ Fat Free Breakfast Bar and juice	1 bar 8 oz juice (not grapefruit)	0	2	50	210
Kellogg's Rice Krispies Treats™ crispy marshmallow squares and juice	1 square = 0.78 oz 8 oz juice (not grapefruit)	2	1	45	200

I	HIV Medications and Nutritional Complications	Complic	ations
Name: Date:	DAILY ROUTINE CHART	<b>HART</b>	
 JWI	MEDICATIONS	MEALS/SNACKS	COMMENTS
am/pm			
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HIV	<b>HIV Medications and Nutritional Complications</b>
YOUR COMMENTS_	MENTS
QUESTION	QUESTIONS TO ASK YOUR TREATMENT ADVOCATE
QUESTION	QUESTIONS TO ASK YOUR REGISTERED DIETITIAN
OUESTION	QUESTIONS TO ASK YOUR PHYSICIANS
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# **The Right Foods**

A Guide to Daily Food Choices  $\int \int \int dr$ for People Living With HIV

Benefits, Safety, and Efficacy of Unconventional Remedies

	FOOD GROUP	EXAMPLES OF FOOD CHOICES
E n e r g	Complex Starches:	Whole grains: wheat, rye, corn, oat, rice, bulgur, kasha, quinoa; whole grain breads, hot and cold cereals, and other grain products like pasta, crackers, ; potatoes, winter squash.
y	Animal Protein:	Beef, chicken, fish, duck, pork, turkey, lamb, eggs, milk, cheese, egg or milk- based protein powders
G r	Plant Protein:	Dried beans (cooked): black, pinto, red, navy, lima, garbanzo, etc., green peas split peas, lentils, soy foods (soybeans, tofu, soy-based protein powders, tempeh), seeds, nuts and nut butters (peanut, sunflower, sesame, almond, Brazil nuts, etc.)
w	Animal Calcium	Milk, cottage cheese, yogurt, hard cheese, ice cream, canned salmon (with bones), canned sardines (with bones)
ь 	Vegetable Calcium:	Tofu processed with calcium, broccoli, Chinese cabbage, almonds, dried figs, greens (chard, mustard, collard), calcium fortified orange juice or soy milk
P r o	Vitamin A rich foods:	Carrots, red peppers, sweet potato, oranges, strawberries, tomatoes, spinach, pumpkin, cantaloupe, watermelon, greens (collard, arugala, turnip), winter squash
t e c	Vitamin C rich foods:	Guava, red and green bell peppers, papaya, orange and grapefruit and their juices, broccoli, Brussels sprouts, kohlrabi, strawberries, kiwi, cantaloupe, tomatoes and tomato juice, spinach, cabbage
t i D	Other Fruits & Vegetables	Apple, banana, pear, prunes, eggplant, onions, lettuce, zucchini, raisins, peaches, celery, mushrooms, turnips, radishes, asparagus,
n	Simple Sugars:	White table sugar, brown sugar, honey, molasses, corn syrup, sodas, candy
E E x n t e r r a g	Fats:	Mono-unsaturated oils: olive, canola, flaxseed, and peanut oils, olives, avocado Poly-unsaturated fats: safflower, corn, soybean, cottonseed, sesame, and sunflower oils, and in liquid or soft margarine Saturated fats and oils: butter, hard margarine, coconut and palm oils, beef fat chicken fat, bacon, pork
	Supplements:	<ul> <li>Vitamin/Mineral - A "One-a-day" type, around 100% RDA - take two each day one in the morning and one in the evening</li> <li>Vitamin E - 400 IU each day</li> <li>Vitamin C - 500-1000 mg each day</li> <li>B-complex - one each day</li> </ul>

**HIV Guide to Food Choices**