

HIV, other health conditions and opportunistic infections



FAST FACTS

- If you've recently been diagnosed with HIV and have a pre-existing health condition, you should talk to your healthcare professional about any medication you're currently on as it may affect antiretroviral treatment.
- Tuberculosis (TB), hepatitis B and hepatitis C are common co-infections of HIV and you can be tested for these as part of your health monitoring routine; they can all be treated.
- If your HIV treatment isn't working, your immune system will get weaker and you may be at risk of opportunistic infections.

When you're first [diagnosed with HIV](#), it's likely that starting and adhering to your treatment will be your main health concern for a while. It's important to take time to learn about HIV and how best to manage it, as well as thinking about other aspects of your health.

Some people have HIV and another long-term health conditions, such as diabetes or epilepsy. They may also develop other conditions as they get older, such as cardiovascular disease, osteoporosis, lung disease or kidney disease

Managing HIV and other health conditions

Preventing other health conditions

Some health conditions are preventable, and there are precautions and lifestyle changes you can take to avoid developing them. For example, you might decide to cut down or stop smoking,

improve your diet or exercise more regularly to reduce your risk of developing diabetes, heart disease or cancer.

As well as [staying healthy](#) and looking after your [mental health](#), we can avoid some other infections by having vaccinations where available, or using an insecticide-treated bed net in areas where malaria is common for example.

Talking to your healthcare professional about HIV and other health conditions

When you're managing another health condition alongside HIV, communicating with the healthcare professionals treating you is important. Often, you'll see one healthcare professional for HIV and another for the other condition(s).

In some cases, drugs for another condition can interact with your [HIV treatment](#), making one or both of them less effective, so it's important that your healthcare professionals know about the drugs you're taking.

If possible, your healthcare professionals should talk to each other directly, but this isn't always possible and gaps in communication can happen. The more you learn and understand about your health, the more you can help the flow of information between those supporting you.

It can be helpful to take some notes with you to each appointment – such as the names of any drugs you are taking, and any symptoms you want to talk about.

Preventing sexually transmitted infections

Using a [condom](#) to protect yourself from [sexually transmitted infections](#) (STIs) is important for everyone's health, but it's especially important if you're living with HIV. This is because STIs not only cause illness but also increase your risk of getting HIV. This is because most STIs cause sores or lesions that make it easier for HIV to enter the body.

If you're living with HIV and also have an STI, your viral load is likely to increase because your immune system is weaker. This will make you more likely to pass on HIV if you have sex without a condom.

Common co-infections

Tuberculosis (TB)

Worldwide, [tuberculosis \(TB\)](#) is the most common co-infection among people [living with HIV](#). It can be very serious and if it's not treated, it can kill. Symptoms include a persistent cough, fever, unintended weight loss and night sweats. Your healthcare professional should test you for tuberculosis and if you have got it, you should receive treatment which cures the infection.

Hepatitis B and hepatitis C

[Hepatitis B](#) and [hepatitis C](#) are also common among people living with HIV and can be treated. Both are common among [people who inject drugs](#). There is a vaccine available for hepatitis B, which is more common in Southeast Asia and sub-Saharan Africa. Hepatitis affects the liver and can be very serious if left untreated.

Cancer

If you're a woman living with HIV, or a transgender man (a person who was assigned female at birth but who identifies as male) who still has a cervix and you're living with HIV, you have a higher risk of developing cervical cancer. If possible, you should go for cervical screening once a year to detect any changes to the cells of the cervix.

Cervical cancer is caused by the human papillomavirus (HPV), which is the most common sexually transmitted infection. This means that using condoms will also help to protect you from cervical cancer.

If you're a man who has sex with other men, and you're living with HIV, you also have a much higher risk of anal cancer than if you were HIV-negative. So, you should think about regular anal cancer screening for peace of mind.

HIV-associated neurocognitive disorders (HAND)

We know very little about how HIV affects the brain. What we do know is that, even when people living with HIV are on effective treatment, they still have an increased risk of developing neurocognitive disorders in later life.

The severity of these conditions can range from occasional memory loss to dementia. If your reflexes are slowing, or if your attention span is waning then you might want to see a neurological specialist who can conduct a range of cognitive tests to determine a diagnosis.

If you're diagnosed with HAND, it might be mild or moderate and not progress to anything more. HAND appears to be more common among people co-infected with HIV and hepatitis C.

HIV and opportunistic infections

When someone living with HIV has a weakened immune system (shown by a low CD4 count), they are at risk of 'opportunistic infections' which is when infections take the opportunity of the immune system being weak.

Common opportunistic infections associated with HIV include:

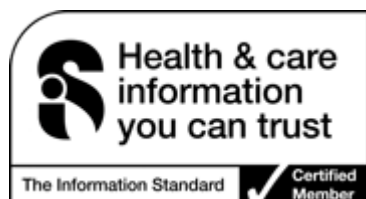
- cryptococcal meningitis
- toxoplasmosis
- PCP (a type of pneumonia)
- oesophageal candidiasis
- certain cancers, including Kaposi's sarcoma.

There are medicines available for people living with HIV who have a low CD4 count to prevent these types of infections. However, being on effective antiretroviral treatment is the most effective way to avoid these opportunistic infections.

Although HIV treatment advances now mean that AIDS-defining cancers (such as Kaposi's sarcoma) are rarely a risk, research is showing that people living with HIV have an increased risk of developing age-related or lifestyle cancers such as lung or liver cancer.

If you're feeling unsure about anything or would like to find out more about HIV and other conditions, then to talk to your healthcare professional who can guide you to further information sources and help you make sense of it all.

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