

HIV, other health conditions and opportunistic infections



FAST FACTS

- If you have recently been diagnosed with HIV and have a pre-existing health condition, you should talk to your doctor about any medication you are taking that may affect antiretroviral treatment.
- Tuberculosis and hepatitis B and C are common co-infections of HIV and can be tested for as part of your health monitoring routine. They can all be treated.
- If your HIV treatment is not working, your immune system will get weaker and you may be at risk of other opportunistic infections.

When you are first [diagnosed with HIV](#), it is likely that it will be your main health concern for a while. You need time to learn about it and how best to manage it. But having [HIV](#) is only one part of a bigger picture, and thinking about other aspects of your health is important too.

As well as [staying healthy](#) by eating well, exercising and getting enough rest, you will need to manage any other health conditions you have with your healthcare professional.

Managing other health conditions

Some people have HIV and another long-term health condition, such as diabetes or epilepsy. This is known as having a co-infection. Many people develop other conditions as they get older, such as cardiovascular disease, osteoporosis, lung disease or kidney disease.¹

It's a good idea to learn about the health conditions that may affect you. In addition to any

medication your healthcare professional gives you to treat health conditions, there may be lifestyle changes you can make to improve your health and any symptoms you have.

Talking to your healthcare professional about HIV and other health conditions

When you are managing another health condition alongside HIV, communication with the healthcare professionals treating you is important. Often, you will see one healthcare professional for HIV and another for the other condition. 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 are taking.²

If possible, the two healthcare professionals could talk to each other directly, but this is not always possible and gaps in communication can happen. The more you learn and understand, the more you can help to keep the flow of information running smoothly. It can be helpful to bring 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.

Looking after your mental health

[Looking after your health](#) is not just about looking after your physical health. Mental health is also important and mental health problems, particularly depression and anxiety, are very common, although people often find it harder to talk about them.³ Your healthcare professional should take them just as seriously as any physical health problems you experience, and offer advice and treatment if appropriate.

As well as medical help, support from friends and family can also be very helpful in coping with health conditions.

Preventing sexually transmitted infections

Using a [condom](#) to protect yourself from [sexually transmitted infections](#) (STIs) is important for everyone's health, but it is especially important if you are living with HIV. This is because STIs not only cause illness but also increase the risk of passing on HIV if you're having sex without a condom, even if blood tests show that you have an undetectable viral load.

If you are a woman living with HIV you have a higher risk of developing cervical cancer and should go for cervical screening once a year if possible. Cervical cancer is caused by some strains of 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 are a transgender man (someone assigned female at birth but who now identifies as being a man) who still has a cervix and you are living with HIV you are also at higher risk from cervical cancer and should ideally go for cervical screening once a year.

Preventing other health conditions

Certain health conditions are preventable, and there are precautions and lifestyle changes we can take to avoid developing them. For example, you might decide to stop smoking, change your diet or take more exercise to reduce your risk of developing diabetes, heart disease or cancer.

If you are a man who has sex with other men, and you are 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.

There are also actions we can take to avoid some infections, such as having vaccinations, or using an insecticide-treated bed net in areas where malaria is common.

Common co-infections

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

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

Opportunistic infections

When someone living with HIV has a weakened immune system (shown by a low CD4 count), they are at risk of other illnesses. These are known as 'opportunistic infections' because they take the opportunity of the immune system being weak.

Opportunistic infections include:

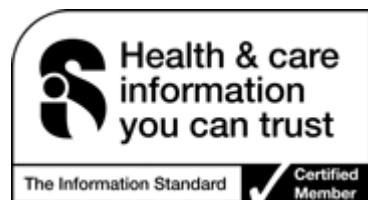
- cryptococcal meningitis
- toxoplasmosis
- PCP, a type of pneumonia
- oesophageal candidiasis
- certain cancers, including Kaposi's sarcoma.

Cotrimoxazole is a medicine used to prevent infections, and it is commonly prescribed to people living with HIV who have a low CD4 count.

WHO recommends cotrimoxazole for:⁴

- adults with HIV who have a CD4 count below 350, or who are ill because of HIV, until they are on stable HIV treatment
- all adults with HIV in areas where malaria or severe bacterial infections are common
- adults with HIV who also have active tuberculosis (TB).

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- 1. World Health Organization (2013) 'Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection'
- 2. Evans-Jones, JG., *et al* (2010) 'Recognition of risk of clinically significant drug interactions among HIV-infected patients receiving antiretroviral therapy', *Clinical Infectious Diseases*, 50:1419-21
- 3. Smart, T., NAM (2009) 'Mental health and HIV: a clinical review'

- 4. World Health Organization (2014) 'Guidelines on post-exposure prophylaxis for HIV and the use of co-trimoxazole prophylaxis for HIV-related infections among adults, adolescents and children. Recommendations for a public health approach', December 2014 supplement to the 2013 consolidated ARV guidelines

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