New HIV Care Guidelines Urge Focus on Other Health Matters

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Considering antiretrovirals have greatly expanded the life spans of people with HIV to almost normal levels, the HIV Medicine Association of the Infectious Diseases Society of America (IDSA) has urged clinicians to focus energies outside of the virus. Preventative care, including screening for high cholesterol, diabetes and osteoporosis, should become a focus, according to the HIVMA. An update of the organization's 2009 guidelines, the new roadmap for the primary care of people with HIV will appear in the January edition of Clinical Infectious Diseases and is currently available online.

"In many HIV practices now, 80 percent of patients with HIV infection have the virus under control and live long, full lives. This means that HIV specialists need to provide the full spectrum of primary care to these patients, and primary care physicians need a better grasp of the impact HIV care has on routine health care," Judith A. Aberg, MD, lead author of the guidelines and director of the Division of Infectious Diseases and Immunology at the New York University School of Medicine, said in a release. "Doctors need to tell their HIV-infected patients, 'Your HIV disease is controlled, and we need to think about the rest of you.' As with primary care in general, it's about prevention."

For those who have control of the virus, the new guidelines state blood monitoring can decline in frequency from quarterly to every six to 12 months.

The guidelines recommend clinicians remain vigilant for common health conditions such as high cholesterol and triglycerides; they should also push for screening of diabetes, osteoporosis and colon cancer. People with HIV should be vaccinated against pneumococcal infection, the flu, chicken pox and hepatitis A and B viruses. Women should receive annual screening for trichomoniasis, and anyone at risk should undergo yearly testing for gonorrhea and chlamydia.

Physicians should also make it a practice to engage patients in non-judgmental dialogues about sexual risk-taking and any illicit drug use. They should also ascertain how their patients are coping with living with HIV and whether they have an effective emotional support network.

To read the IDSA release, click here.

To read the care guidelines, click here.

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