The Sweetest Taboo

When a spoonful of sugar makes your health go down

April 1, 2004 By David Gelman, MD

Too much glucose (The main sugar your body uses for energy) in your blood ain't so sweet for your health. Docs say HIVers, especially those on protease inhibitors, may be at higher risk than neggies for problems regulating glucose (and at five times the risk for diabetes). Here's the sweet and lowdown on some HIV-related conditions affecting how your body makes energy:

Diabetes mellitus A disease marked by high blood sugar. If it's not treated with insulin or oral medication, it can cause excessive thirst, hunger, fatigue and urination—and, eventually, heart, eye, nerve and kidney damage. Diagnosis requires a blood-glucose test in the morning before eating.

Glucose intolerance A nasty spike in blood sugar after eating. Your doc can detect it only by serving you a sweet concoction and drawing blood two hours later. If you are diagnosed with the condition, it's time to diet and exercise—and try to KO the condition before it graduates to diabetes.

Metabolic syndrome, a.k.a. "Syndrome X." This buffet of distasteful conditions—central obesity (too much fat tissue in the belly), glucose intolerance, high blood pressure and lipid problems (high triglycerides and low HDL cholesterol)—hikes your risk of heart attack. Not everyone will get the whole bunch of disorders, but the more of them you develop, the higher your heart danger. Abdominal fat gain, glucose intolerance and lipid problems can all result from HIV meds, so press your doc to check for each, even if only one seems present. Treatment addresses each malady separately—with lipid-lowering or blood-pressure meds, exercise and change of diet.

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