Starting Out Late?

New stats reveal that about one third of people who test positive for HIV in many U.S. cities do so with low CD4 counts and often with an AIDS-related complication such as an opportunistic infection (OI). New information can help the newly diagnosed get the most benefit from HIV care and treatment. Two recent developments:

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- A 189-person study unveiled this summer at the XVII International AIDS Conference suggests that for people with low CD4 counts (in the double digits) who are starting their first HIV combo, Sustiva (efavirenz, a non-nuke) may be a better choice than Kaletra (lopinavir/ritonavir, a protease inhibitor plus booster). For people who are starting HIV meds when their CD4 cell counts are higher, the two meds work equally well at suppressing HIV.
- The Department of Health and Human Services recently issued new guidelines for treating OIs—like some forms of TB and pneumonia that attack immune systems weakened by HIV. The guidelines remind providers to watch for immune reconstitution inflammatory syndrome (IRIS), a flare-up of OI symptoms that occurs when HIV meds suddenly restore damaged immune systems. IRIS symptoms are often treated differently from those of OIs.

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