ASSIGNMENT 5

1. **Explain why people living with HIV do not necessarily have AIDS**?

HIV is a virus that can lead to immune system deterioration. The term “HIV” stands for human immunodeficiency virus. Only humans can contract it, and it attacks the immune system. As a result, the immune system is unable to work as effectively as it should. Our immune systems can completely clear many viruses our bodies, but that’s not the case with HIV. Medications can control HIV very successfully by interrupting its viral life cycle, however.

AIDS is a condition While HIV is a virus that may cause an infection, AIDS (which is short for acquired immunodeficiency syndrome) is a condition. Contracting HIV can lead to the development of AIDS.AIDS, or stage 3 HIV, develops when HIV has caused serious damage to the immune system. It is a complex condition with symptoms that vary from person to person. Symptoms of stage 3 HIV are related to the infections a person may develop as a result of having a damaged immune system that can’t fight them as well. Known collectively as opportunistic infections, they include [tuberculosis](https://www.healthline.com/health/tuberculosis), [pneumonia](https://www.healthline.com/health/pneumonia), and others.

HIV doesn’t always progress to stage 3.HIV is a virus, and AIDS is the condition the virus may cause. An HIV infection doesn’t necessarily progress to stage 3. In fact, many people with HIV live for years without developing AIDS. While a person can have an HIV infection without having AIDS, anyone diagnosed with AIDS has already contracted HIV.

HIV can be transmitted from person to person. Because HIV is a virus, it can be transmitted between people just like many other viruses. AIDS, on the other hand, is a condition a person acquires only after they’ve contracted HIV.

HIV doesn’t always produce symptoms. HIV usually causes flu-like symptoms about two to four weeks after transmission. The immune system can’t completely eliminate HIV, but it can control it for a long time. During this latency period, which can last for years, a person with HIV may experience no symptoms at all. Without antiretroviral therapy, however, that person may develop AIDS and as a result will experience many symptoms associated with the condition.

HIV is a virus able to attack and weaken the human immune system. AIDS refers to an HIV infection that, over time has progressed such that the immune system is weakened to the point of compromise. This results in a susceptibility to infections and complications that would normally be prevented by a healthy immune system. Secondarily, once several of these infections or symptoms begin to occur together – an individual is considered to have developed AIDS. A person with AIDS is always infected with HIV, given that it is HIV (the virus) that causes the progression towards the state of AIDS. In contrast, just because you have HIV does not imply that you have AIDS (you are not likely in the advanced stages of infection).

HIV can generally be kept under control with appropriate medication. When the virus is suppressed, people may never become immune deficient. They may never develop AIDS.

1. **In your community, what are the myths associated with HIV infection?**

In the communities where we stay, people tend to have misconceptions about HIV infection. Below are the myths associated with HIV infection; Some people think that they can get HIV by being around people who are HIV-positive and yet HIV isn't spread through touch, tears, sweat, [saliva](https://www.webmd.com/oral-health/what-is-saliva), or urine. They think they can catch it by breathing the same air, Touching a toilet seat or door knob or handle, Drinking from a water fountain, Hugging, [kissing](https://www.webmd.com/sex-relationships/rm-quiz-kiss), or shaking hands, Sharing eating utensils, Using [exercise equipment](https://www.webmd.com/fitness-exercise/features/all-bout-exercise-machines) at a gym.

Mosquitoes spread HIV. Because the virus is passed through [blood](https://www.webmd.com/a-to-z-guides/rm-quiz-blood-basics), people have worried that they could get it from biting or bloodsucking insects. Several studies show that it doesn't happen even in areas with lots of [mosquitoes](https://www.webmd.com/skin-problems-and-treatments/illnesses-mosquito-bites) and cases of HIV. When bugs bite, they don't inject the blood of the person or animal they bit before you. Also, HIV lives for only a short time inside them.

You can't get HIV from oral sex. It's true that oral [sex](https://www.webmd.com/sex-relationships/default.htm) is less risky than some other types of [sex](https://www.webmd.com/sex-relationships/rm-quiz-sex-fact-fiction). The rate of transmission is 0 to 4 cases in 10,000 acts. But you can get HIV by having oral sex with either a man or a woman who is HIV-positive. Always use a latex barrier during oral sex.

## People think they can tell if their partners are HIV-positive. You can be HIV-positive and not have any symptoms for years. The only way for you or your partner to know if you're positive is to get tested.

## Some people don't feel the need to worry about getting HIV, because they think the Drugs will keep them well. Antiretroviral drugs, also called ART, do improve the lives of many people who are HIV-positive and help them [live longer](https://www.webmd.com/healthy-aging/ss/slideshow-longer-life-secrets). But many of these drugs are expensive and have serious side effects. Nothing yet cures HIV. And drug-resistant strains of HIV can make treatment harder. Prevention is cheaper and easier than managing a life-long condition and the problems it brings.

## That being HIV positive means your life is over. In the early years when the disease was epidemic, the death rate from AIDS was extremely high. But today's drugs allow HIV-positive people -- and even those with AIDS -- to live much longer, normal, and productive lives.

## If a person is getting treatment, he/she can't spread the virus. When [HIV treatments](https://www.webmd.com/hiv-aids/understanding-aids-hiv-treatment) work well, they can lower the amount of virus in your blood to a level that doesn't show up in blood tests. This is called an undetectable viral load. However, this doesn't mean zero viral load, and there can be intermittent increases in the virus level. So while you are less contagious with an undetectable viral load, the risk of spreading HIV is not zero.

## That if both partners are HIV-positive, they don't have to practice safe sex. Wearing [condoms](https://www.webmd.com/sex/birth-control/birth-control-condoms) or using dental dams can protect you both from other, possibly drug-resistant, strains of HIV. People in monogamous relationships don't need to be tested for HIV. However, According to Centers for Disease Control, all sexually active people ages 13 to 64 years should be routinely tested for HIV at least once in their lifetimes.

## If a person is in a monogamous relationship, I don't need to use protection. Even if you plan to be faithful to each other, one or both of you may have been exposed to HIV in the past. "If one of you is infected and is not on treatment, there's a risk you'll pass it to your partner. Because people are living longer with HIV and AIDS, there’s no need to be concerned about getting it. Although there are treatments, there still isn't a cure. And, there may be health consequences to both the disease and its treatments. Only rich people can afford HIV/AIDS treatment. This is actually not true because in some countries like Uganda, HIV Drugs are free of charge.

1. **Describe the relationship between HIV/AIDS and nutrition?**

Nutritional care and support for people living with HIV/AIDS is an important way to reduce human suffering and to regenerate societies that are damaged by the epidemic. They help to ease the burden of the disease and to alleviate the overall impact of malnutrition. Below is description of a relationship between HIV/AIDS and nutrition; Healthy nutrition plays a central role in the management of HIV/AIDS, especially those symptoms – e.g. diarrhea, anorexia, sore mouth, fever, and muscle wasting – directly associated with the disease. Adequate dietary intake enhances the therapeutic effect of medicines, boosts the immune system (thus helping to fight against the disease and to maintain body weight), prolongs the progression of HIV infection to AIDS, increases longevity and promotes healthy living. A balanced diet is a positive way of responding to the illness. Food is certainly not a “magic bullet”, nor will it stop people from dying of AIDS; but good food, well prepared, will nevertheless help people to live better, longer and more comfortable lives. Any immune impairment as a result of HIV/AIDS leads to malnutrition, and malnutrition leads to immune impairment, worsens the effect of HIV and contributes to more rapid progression to AIDS. The HIV virus attacks the immune system. In the early stages of infection a person shows no visible signs of illness but later many of the signs of AIDS will become apparent, including weight loss, fever, diarrhea and opportunistic infections (such as sore throat and tuberculosis). Good nutritional status is very important from the time a person is infected with HIV. Nutrition education at this early stage gives the person a chance to build up healthy eating habits and to take action to improve food security in the home, particulaly as regards the cultivation, storage and cooking of food. Good nutrition is also vital to help maintain the health and quality of life of the person suffering from AIDS. Infection with HIV damages the immune system, which leads to other infections such as fever and diarrhea. These infections can lower food intake because they both reduce appetite and interfere with the body's ability to absorb food. As a result, the person becomes malnourished, loses weight and is weakened. One of the possible signs of the onset of clinical AIDS is a weight loss of about 6-7 kg for an average adult. When a person is already underweight, a further weight loss can have serious effects. A healthy and balanced diet, early treatment of infection and proper nutritional recovery after infection can reduce this weight loss and reduce the impact of future infection. A person may be receiving treatment for the opportunistic infections and also perhaps combination therapy for HIV; these treatments and medicines may influence eating and nutrition. Good nutrition will reinforce the effect of the drugs taken.When nutritional needs are not met, recovery from an illness will take longer. During this period the family will have the burden of caring for the sick person, paying for health care and absorbing the loss of earnings while the ill person is unable to work. In addition, good nutrition can help to extend the period when the person with HIV/AIDS is well and working.

1. **Describe the dietary advice you would give to a mother on the following?**
2. **Nutrition**

Food helps in controlling blood sugar. High blood sugar levels due to consuming high amounts of sugar and processed carbohydrates can lead to cravings, fatigue, neurological damage, mood disorders, hormonal balances and more to mothers. Therefore Simple and processed carbohydrates have to be replaced by complex carbohydrates.

Lack of good quality protein is one of the major factors leading to various diseases, weight gain as well as various fatigue syndromes. Good quality protein in the diet aids in reducing inflammation, autoimmune diseases, infertility, hypothyroidism, fibromyalgia, and so on. Proteins are the building blocks of the body and chronic protein deficiency is a major source of various diseases. Therefore a mother’s diet should include protein rich food like Eggs, Chicken, Salmon, Greek Yoghurt, Lentils, Legumes, low-fat dairy, whey protein drinks may also be recommended in pure vegetarians.

Minerals and trace elements; You only need tiny amounts of these vital substances. With a few exceptions, a balanced diet will mean you get enough of them with your daily meals. The following ones are the most important:

* Calcium and phosphorus: Important for mother and child to build and maintain bones and teeth. The source: dairy products, dark green leafy vegetables, nuts, grains, beans.
* Potassium: The substance that controls the body’s water balance, or rather the elimination of water from tissue. Ideal providers: bananas and apricots, fresh or dried.
* Iron: Without this magnetic element, there would be a serious deficit in our blood: iron is responsible for the formation of hemoglobin, the red coloring in blood vessels. However, we can only obtain iron from our food. The best sources are meat, nuts, whole meal bread, kale, oatmeal and millet.

A mother’s kidneys need more fluid for healthy operation. A mother needs at least two liters a day, including half a litre of milk. Be wary of sugary drinks: lemonades, cola and a lot of fruit juice-based drinks pack a lot of calories which are not good for a mother’s body. A mother should stay away from fad diets and calorie counting, and focus more on getting enough of the good stuff and limiting the junk. You need to get plenty of calories, but most of those calories should come from whole foods.

A mother should eat **Vitamin B6-rich foods at least on a daily basis. These include;** Meat, poultry, fatty fish, whole grains, fortified cereals, soybeans, avocados, baked potato with skin, bananas, and peanuts.

**Good quality fats like** Avocados, Nuts, seeds ( flax seeds, hemp, melon, pumpkin seeds ), Salmon, olive oil should be part of a mother’s nutrition instead of unhealthy fats. It is of paramount importance to eat clean and green and to say no to junk food and not to be fooled by advertisements. Each woman has the power within herself to build her own health and to learn to use food as the means to give herself and her family a boost of health.

1. **Pregnancy**

 To know their HIV status. If they are confirmed as HIV-infected, to gather correct information on the need to use comprehensive PMTCT services.

 To seek early and periodic antenatal and postnatal care, and deliver in a health facility

 Regarding their decision on the mode of infant feeding if HIV-infected; and

 To practice safer sex to avoid re-infection with new strains during pregnancy or lactation as this increase the risk of HIV transmission to the baby.

 Foetal growth and lactation impose high nutritional demands on the mother.

 HIV infection and related OIs impose additional energy and nutrient needs.

 The nutritional status of an HIV-infected woman before, during and after pregnancy may influence her own health and the risk of transmitting HIV to her infant.

 Pregnancy and HIV infection worsen nutritional deficits and increase vulnerability to several health dangers that are associated with pregnancy, for example: HIV-infected pregnant and lactating women have a higher risk of malnutrition and mortality.

 Anaemic pregnant women who are HIV-infected are six times more likely to die in the year after delivery than a woman with adequate iron, and also more likely to transmit HIV infection to their infant.

 Malnourished, lactating mothers may have difficulty producing enough breast milk.

1. **Breastfeeding**

**Get adequate fluids**; Drink enough liquids. Most mothers do notice they are thirstier when breastfeeding. Drink plenty of liquids, such as juice, water and milk, to quench your thirst. Liquids can be in any form, but limit your intake of any that contain caffeine. It is not necessary to force fluids beyond your thirst, but it is a good idea to drink something whenever you feel thirsty. Grab something to drink while breastfeeding, or keep a glass of liquid near your favorite breastfeeding spot.

**Choose a variety of foods, and take in enough** **calories**; Your own appetite is usually the best guide for how much you should eat. In general, mothers are hungrier during the first several months of breastfeeding, and you should not ignore feelings of hunger when producing milk for your baby.

**Spicy or “gassy” foods.;** Spicy or gas-producing foods are common in the diets of many cultures, and these kinds of foods do not bother most babies. A few babies will develop gas or act colicky when their mothers eat certain foods. However, there is no one food or food group that creates problems for all babies. Unless you notice that your baby reacts within six hours every time you eat a certain food, there is no need to avoid any particular foods.

**Vegetarian diets**; Vegetarian or mostly vegetarian diets have been the mainstay of many cultures for centuries, and the breast milk of vegetarians is usually as nutritionally appropriate as that of other mothers. While you’re breastfeeding, you will want to be sure that your diet includes complete proteins, so eat a wide variety of foods.   
Women who are eating vegan or macrobiotic diets may produce milk that is deficient in vitamin B12. These mothers often require supplements of vitamin B12 so their breast milk will contain a sufficient amount.

**Coffee, tea or sodas**; Drinking caffeinated beverages may make your baby jittery or irritable and can make him or her to find in difficulty sleeping, especially if you drink too much caffeine or drink it very quickly. Drink mainly caffeine-free beverages when breastfeeding. If you cannot give up your caffeine, limit your intake to about two eight-ounce servings per day.

**Alcohol**: It is best to avoid drinking alcoholic beverages while breastfeeding or pumping for milk. Alcohol does enter the milk supply and can affect your baby. If you do have an alcoholic drink while breastfeeding, you may need to pump and discard the milk.

**Smoking/tobacco use**: It is best to avoid tobacco use when breastfeeding or pumping. Nicotine and its byproducts pass into milk, and tobacco use may cause a baby to have a more rapid heartbeat, restlessness, vomiting or diarrhea. In addition to its possible effects on the baby, tobacco use can interfere with milk let-down and it may reduce the amount of milk you produce.

[**Water**](https://food.ndtv.com/recipe-puy-lentil-green-onion-crumble-674991) **isn't technically food**. But it ensures a regular supply of milk. It is advised to drink at least 8 glasses of water a day. Breastfeeding mothers are advised to keep a bottle of water nearby, even if they are not thirsty, as they it is difficult to get up once they start nursing. [Garlic](https://food.ndtv.com/recipe-garlic-chilli-prawns-99171) is a common thing found in the vegetable compartment of our fridge. Adding garlic to your food not only increases the deliciousness of your dish but also increases the milk supply.

1. **Explain the challenges a HIV positive mother may encounter in feeding her infant?**

Being an HIV positive breast feeding mother challenges the women’s adherence to exclusive breastfeeding, fearing that it would be tantamount to giving away one’s HIV status, as it is against the community norms of infant feeding which involves giving water, traditional medicines and foods.

Disclosure of HIV status to family is also a major challenge which negatively impacts on the women’s ability to follow through with exclusive breastfeeding. The women, despite the knowledge received from the health workers, end up mix feeding their babies and not adhering to their ART medication due to fear that their families would find out their status.

Pressure to mix-feed; breastfeeding women are sometimes pressurized by their in-laws, family members and some neighbors to mix-feed their babies.

Social economic-factors such as poverty; To some people, formula is expensive and can present health dangers to infants if unclean water is used to prepare it. Replacement feeding can also be a source of stigma in places with high HIV prevalence, as it can single women out as potentially being HIV-positive in their community if they do not follow culturally accepted breastfeeding practices.

1. **Explain the importance of periodic nutrition assessment in the nutritional management of HIV and AIDS?**

Below are the importance of nutrition assessment in the nutritional management of HIV and AIDS. In patients with HIV infection/AIDS, in addition to the antiretroviral therapy, nutritional assessment is needed to maintain optimum nutrition during the symptomatic period, to prevent further deterioration of nutritional status during acute episodes of infections and to improve nutritional status during the stable symptom free period.

 Identifying clients with specific nutrition needs (nutritional care/support, dietary/nutrient supplements, medical treatment, referral for further assessment)

 To measure changes in nutritional status to inform optimal approaches, motivate clients to continue practices, and understand program impacts.

 To catch nutritional problems and infections early for quick action to prevent from them worsening

To improve your overall quality of life by providing [nutrients](https://www.webmd.com/webmd/consumer_assets/controlled_content/healthwise/special/major_nutrients_in_food-topic_overview_special_aa162807-sec.xml) your body needs

To keeps the immune system stronger so you can better fight disease.

Helps manage [HIV symptoms](https://www.webmd.com/hiv-aids/understanding-aids-hiv-symptoms) and complications.

Process medications and help manage their side effects.

Nutrition assessment also helps people with HIV maintain a healthy weight and absorb HIV medicines.

References