

Older Residents with HIV Infections

The **Human Immunodeficiency Virus (HIV)** is a virus that kills the cells of the immune system. It is the virus that causes AIDS (Acquired Immune Deficiency Syndrome).

You've probably heard a lot about HIV in young gay people, yet this infection can affect people of any age. About 10% of all people diagnosed with AIDS in the U.S. are age 50 and older. So, you may find nursing home residents who are infected with HIV.

This lesson will review some facts about HIV and the care residents with HIV require.

About the Virus

HIV affects the body in serious ways. The virus kills important blood cells in the immune system known as T cells or lymphocytes. Without a good army of these disease-fighting cells, the body becomes highly susceptible to infections.

Over the years, as HIV continues to weaken the body's immune system, the disease of AIDS develops. There are drugs that can help to treat HIV which can prevent AIDS from developing. However, these drugs are very expensive and cause many serious side effects. What's more, people

who are HIV positive will need to take these drugs for the rest of their lives in order to prevent AIDS. This emphasizes the importance of *avoiding* infection with HIV in the first place.

How is HIV Spread?

To avoid contracting HIV infection it is important to understand how it is spread. *In order to catch HIV, the blood, semen, or vaginal secretions of an infected person must enter your bloodstream.* (See box on page 3.) This should tell you that you can contract HIV by having sex with an infected person without using a condom or by being pricked with a needle that has been in contact with an infected person. Blood transfusions and organ donations from infected people used to be a problem, but now these products are tested for HIV. However, people who received transfusions or donated organs in the past, may have received products that came from HIV positive people. Infected mothers can spread the virus to their infants during pregnancy, delivery, or breastfeeding.

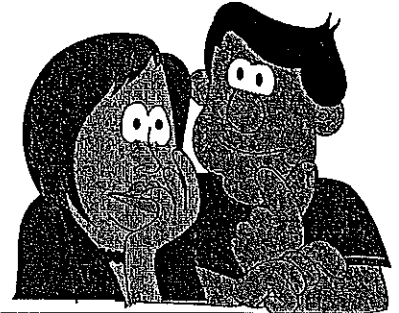
Aids is
the most
advanced
stage of
HIV
infection

How HIV is spread:

- vaginal or anal sex without using a condom
- sharing needles or syringes
- transfusions, blood products, or organ transplants between 1978-1985 (most countries now test for HIV)
- tattoos or body piercings with a contaminated needle
- mother to infant during pregnancy, delivery, or breast feeding

How HIV is not spread:

- touching or being near an infected person
- sitting on a toilet seat
- sneezing
- coughing
- insect bites



Symptoms

The manner in which HIV affects different people can vary. However, there are some general ways that the infection progresses.

Within the first few weeks of being infected with the virus, people will get symptoms that resemble the flu, such as:

- low-grade fever
- headache
- sore throat
- low energy
- nausea
- rash

These symptoms can last for several months.

About 2 months after the infection is contracted, the blood will test positive for the HIV antibody. A test done within a few days of having exposure to HIV will be too early to show that a person is infected.

After the flu-like symptoms are gone, an HIV infected person may not have any symptoms for years. He or she will feel generally normal. In some cases, unexplained fever, headache, night sweats, and some nerve problems may develop. Because the infected person doesn't

feel sick, he or she may continue to engage in practices that spread the infection to others, such as having unprotected sex.

Years after the HIV has invaded the body, symptoms may again appear. These symptoms include:

- persistent fever
- drenching night sweats
- headaches
- fatigue
- chronic diarrhea
- thrush (fungus infection of the mouth)
- persistent vaginal yeast infections
- shingles (herpes zoster)
- lymph node swelling
- neurologic symptoms such as palsies, meningitis, pain

Usually, about 10 years after the initial infection, AIDS develops.

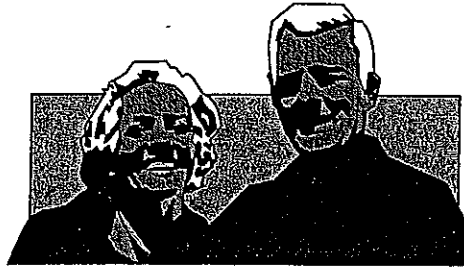
AIDS



AIDS is the serious, advanced stage of HIV infection. In order to be diagnosed with AIDS, HIV infected people must meet certain criteria.

This is described in the box below.

At one time, people lived about 2 years after being diagnosed with AIDS. However, advances in the treatment cause many people to live many years with the disease.



HIV/AIDS in Older People

About one in ten Americans diagnosed with AIDS is over age 50—and, the number is on the rise.

There are several reasons why HIV is a special problem among the elderly. The first issue involves prevention. Some older adults may believe that they needn't worry about using a condom when they have sex because there is no risk of pregnancy. They may not understand how HIV is spread, or believe that it is a problem that only younger people face. Further, their physicians and caregivers may not address this topic with them. Their unprotected sex puts

them at risk for being infected.

Once infected, older adults may be less likely to have HIV infections diagnosed early. They often mistake their symptoms as part of growing old or the flu. Even if they suspect that it could be HIV-related, they may be embarrassed to be tested.

Unfortunately, for many older adults who are HIV positive, their infections tend to be in an advanced stage before they are diagnosed. It most likely will be in this late stage that you will have contact with them within the long-term care facility.

Opportunistic infections occur because the immune system isn't functioning normally

AIDS is diagnosed when a person with HIV infection develops at least one of the following conditions:

- decrease in CD4+ lymphocyte count
- development of at least one *opportunistic infection* (e.g., pneumonia, septicemia)
- development of at least one *opportunistic cancer* (e.g., invasive cervical cancer, Kaposi's sarcoma)
- wasting syndrome (loss of at least 10% of body weight)
- development of dementia

Caregiving Challenges

Older residents who have HIV/AIDS will need the same basic care of any resident. However, there are some special issues that can create challenges.

AIDS Dementia Complex

HIV can invade the brain and cause dementia symptoms that resemble Alzheimer's disease. It is important that all residents who have dementias be tested for HIV so that caregivers understand infection risks.

Opportunistic Infections

HIV/AIDS causes a weakening of the immune system. As the immune system protects the body from infection, when it is weakened, immunity from infection is

Symptoms of Infection

- fever
- fatigue
- weight loss
- nausea
- loss of appetite
- difficulty swallowing
- abdominal pain
- diarrhea
- stomach pain
- night sweats
- cough
- difficulty breathing
- shortness of breath
- bloody sputum
- painful rash
- fluid-filled blisters
- tingling or pain in hands and feet

Because you know residents well, you could detect symptoms of infections before anyone else

decreased and infections can easily develop. The box above lists some of the signs of infection that you would want to be alert to and report promptly.

Because you know residents' behaviors very well, you could be the first person who picks up a slight change that could indicate an infection. For example, you may notice an occasional dry cough or that the resident seems to be sweating more at night. Other people who are less familiar with the resident could miss these clues to infections, however, you may understand that these are changes in the resident's status.

You also would want to make sure that you strictly follow infection prevention measures. These residents have a very high risk for infection and do not need to be exposed to germs by caregivers. Wash your hands frequently and follow the precautions you have been taught to prevent the spread of infection.

Nutrition

A good nutritional state can offer protection from infection. Residents with HIV/AIDS may become fatigued eating so spare their energy by helping them as needed. If you notice that they are not eating well

due to a sore mouth, indigestion, or pain report this immediately. Closely monitor intake and output of food and fluids.

Emotional Support

As you can imagine, residents with HIV/AIDS may have many feelings related to their diagnosis. They may feel ashamed that they engaged in a behavior that led to this infection. Other people may avoid them due to fear of catching the disease. These residents may be familiar with the devastating effects of this infection from hearing about them through the media.

Emotional support is a crucial part of the care of these residents. Provide a listening ear. Avoid making judgments or offering your personal opinion. Encourage them to participate in activities that can distract their minds and provide enjoyment.

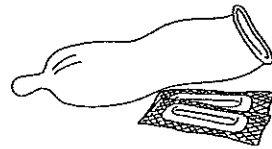
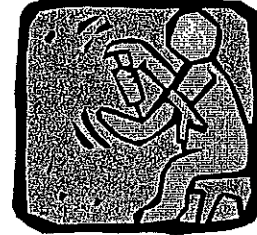
As the disease progresses, spiritual support will be an essential part of end-of-life care. Find out if the resident would like to have a visit from clergy or other individuals who provide spiritual support.

Assure you protect the resident's rights and provide the care that keeps the resident safe, comfort, and free of preventable complications.



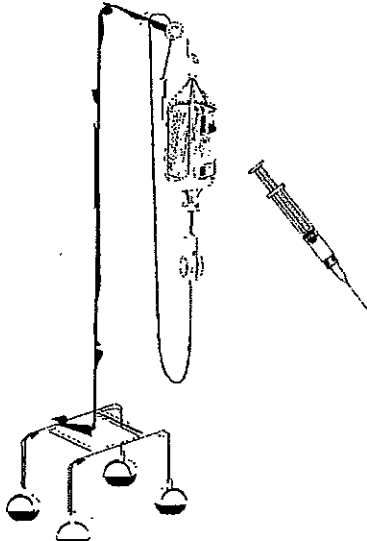
Be HIV Wise!

Don't use IV drugs and encourage others to do the same



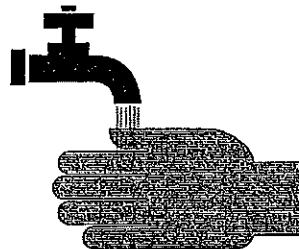
Don't have sex without using a condom unless you are certain your partner is infection-free

Get tested and ask your sexual partner to be tested



Be careful not to stick yourself with used needles

Strictly follow precautions for preventing the spread of infection



What do you know about: Sex and Older Adults?



Just how much do you know about sex in late life? Take this short true or false quiz and see:

1. Orgasms are unlikely to occur in person over age 75.
2. Older men become erect more quickly and easily than younger men.
3. Older women have a higher risk than younger women of developing urinary tract infections as a result of having intercourse.
4. Antidepressants and antihypertensives can cause erectile dysfunction in men.
5. The best predictor of an active sex life in old age is an active sex life in younger life.

Now, let's see how you did.

Etc...

1. Orgasms are unlikely to occur in person over age 75.

False. This is not a normal outcome of aging. It can take longer for an orgasm to occur and there may not be an orgasm with every sexual activity, but this response is not lost. There are some changes that do occur with age, however, such as increased time required to become excited, decreased number of vaginal contractions during orgasm, and diminished libido (sexual interest).

2. Older men become erect more quickly and easily than younger men.

False. Usually, the opposite is true. Older men need more time and direct stimulation to become erect. Older men tend to maintain their erections for a longer period of time before ejaculations, and the force and volume of their ejaculations are reduced.

3. Older women have a higher risk than younger women of developing urinary tract infections as a result of having intercourse.

True. Older women have more fragile tissue along their urethra and less fatty tissue to protect their urinary meatus. Therefore, their urinary meatus can become easily irritated during intercourse. Sometimes, position changes can reduce this problem.

4. Antidepressants and antihypertensives can cause erectile dysfunction in men.

These drugs can interfere with erections. There are many drugs commonly used by the elderly that can interfere with sexual function in both men and women. When sexual dysfunction occurs, drugs should be reviewed for their responsibility.

5. The best predictor of an active sex life in old age is an active sex life in younger life.

True. The term "use it or lose it" is not an exaggeration when it comes to sexual function in late life. Keep yourself and your partner healthy and continue to enjoy this aspect of your life.

Name: _____

Date: _____

Older Residents with HIV Infections Test Questions

1. AIDS is the infection that causes HIV
 - a. True
 - b. False
 2. Within the first few weeks of being infected with HIV, a person will have symptoms that resemble:
 - a. food poisoning
 - b. vaginal infection
 - c. flu
 - d. migraines
- Three ways that HIV can be spread are:
- 3.
 - 4.
 - 5.
6. An *opportunistic infection* refers to an infection that:
 - a. occurs because the immune system isn't able to protect the body
 - b. offers special protection from other diseases
 - c. can be easily treated
 7. Less than 1 in 100 people who are infected with HIV are over age 50
 - a. True
 - b. False
 8. Miss Clark, a resident in your facility, is HIV positive. She tells you she had been widowed for 20 years and then developed a sexual relationship with a gentleman 5 years ago. This man was the first man she had sex with since her husband's death. She tells you that she feels guilty that this sex outside of marriage caused her to contract this disease. Your best response is to:
 - a. Leave her alone to think about this
 - b. Tell her, "Don't feel guilty. You most likely became infected from your husband."
 - c. Allow her to express her feelings and listen without judgment
 9. The dementia that can occur with AIDS resembles that of Alzheimer's disease.
 - a. True
 - b. False
 10. There are drugs that can help people with HIV from developing AIDS.
 - a. True
 - b. False