

WHAT YOU SHOULD KNOW ABOUT NEWLY DIAGNOSED HIV INFECTION

In the Clinic
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What Is HIV?

HIV (human immunodeficiency virus) makes it difficult for your body to fight infection. When the immune system becomes badly damaged, HIV develops into AIDS (acquired immunodeficiency syndrome). There is no cure for HIV or AIDS, but highly effective treatment is available and, if used regularly, can permit people of all ages with HIV infection to live a normal lifespan.

Treatment of a pregnant woman with HIV infection prevents her baby from becoming infected.

HIV is passed through bodily fluids, such as blood, semen, and breast milk, in the following ways:

- By having anal and/or vaginal sex with an HIV-infected person, especially without using a condom
- By sharing needles with an HIV-infected person
- By being stuck by a needle or sharp object contaminated with HIV
- From mother to child during pregnancy, birth, or breastfeeding.

What Are the Warning Signs?

Acute HIV occurs 2 to 4 weeks after you become infected. Symptoms may be mild, and you may not even notice them. Common symptoms are similar to the flu and may include fatigue (tiredness); sore throat; swollen glands in the neck, armpits, and groin; fever; and rash.

Chronic HIV infection is the second stage, during which symptoms may not appear again for many years. When they do, they may include swollen lymph nodes, shingles, and anemia or low platelets. Vaginal yeast infections may keep coming back. However, these problems also occur in people who do not have HIV infection.

Who Should Be Tested?

Health care professionals should offer HIV testing to anyone who requests it, and everyone should be tested at least once. All pregnant women should also be offered testing, usually twice during the pregnancy. If you are at high risk for HIV infection, you should be offered testing at least once a year. People who are at high risk for getting HIV are:

- Men who have sex with men
- Men and women who have unprotected sex with many people
- Persons who currently or in the past have used injection drugs
- Men and women who pay or receive money for sex
- Men or women who receive anal sex
- People being treated for other sexually transmitted diseases (STDs)
- People who were treated for hemophilia or had blood transfusions between 1978 and 1985 in



the United States or in countries where donated blood has not been screened for HIV

- People with high-risk sex partners.

You should talk to your doctor about taking HIV preexposure prophylaxis (PrEP) if you are not infected with HIV but are at high risk. PrEP involves taking HIV medicines every day and is highly effective. Whether to use postexposure prophylaxis (PEP) should be discussed with your doctor if a high-risk exposure occurs, such as a condom breaking during sex.

How Is It Diagnosed?

HIV can be diagnosed through blood and saliva tests, most of which can detect HIV between 2 and 12 weeks after infection.

How Is It Treated?

HIV is controlled by a combination of at least 3 drugs, known as antiretroviral therapy (ART). You must take them for the rest of your life to stay healthy.

Talk to your doctor about other things you can do to help stay healthy, such as eating nutritious foods and getting all recommended immunizations.

Questions for My Doctor

- How will HIV affect my day-to-day life?
- What is the best treatment for me?
- Does the treatment have side effects?
- How can I avoid spreading HIV to others?
- How active can I be?
- Can I have sex despite the infection?
- How often should I see my doctor?
- Can HIV be prevented?
- If I think I've been exposed to HIV, what should I do?

For More Information



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MedlinePlus

<https://medlineplus.gov/hiv aids.html>

Centers for Disease Control and Prevention

www.cdc.gov/actagainst aids/basics

U.S. Department of Health and Human Services

www.aids.gov/hiv-aids-basics