Lifestyle Counseling

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Lifestyle Counseling

- Case study
- HIV anno 2014
- Lifestyle related risk factors
- The role of counseling
- HIV & aging
- Conclusions
Case report: Paul

- Homosexual male, born 1959
- Single
- HIV seroconversion Aug 1988
- 183 cm - 71 kg (BMI 20)
- Power training
Medication history

- 1990  AZT monotherapy
- 1993  d4T monotherapy
- 1995  AZT + ddI
- 1996  AZT + 3TC
- 1997  AZT + 3TC + amprenavir
- 1997  d4T + ddI + saquinavir/ritonavir
- 1998  d4T + ddI + ABC + EFV + hydroxyurea
- 2003  TDF + ABC + EFV
- 2007  TDF + ABC + ATV/r
- 2013  ABC/3TC + ATV/r + MVC

→ VL always undetectable       CD4 cells > 800/mm³
Clinical course

- **1998** lipodystrophy
  - body weight
  - vitamins/magnesium/brewer’s yeast
  - hypercaloric suppletion 350 kCal/day

- **1999**
  - nandrolon IM twice

- **2000** hyperlipidaemia
  - ¼ l cream/day, butter
  - silicone instillation in the face
  - sees a psychiatrist 2x/week

- **2001** syphilis

- **2003** acute hepatitis C
- 2004 diabetes type 2
- 2006 depression
  → isolation
  → ashamed about his appearance (60kg BMI 18)
  → addicted to cyber sex
- 2007 syphilis
- 2009 suicidal thoughts
- 2012 nephrotoxicity
- 2013 polyneuropathy
- 2013 syphilis
Case Report Paul: in summary

- HIV-infected patient under cART
  - cART well tolerated
  - suppressed VL
  - normal CD4-cell count

- Clinical course complicated by
  - chronic hepatitis C
    - treated with IFN + ribavirine
    - stop after 24 w as “non-responder”
  - diabetes mellitus (R/ metformin – gliclazide)
  - lipodystrophy with hypercholesterolaemia (R/ diet)
  - recurrent STD
  - depression
How well is Paul treated?
A matter of balance …

- stigm a
- safe sex
- body image
- SIDE EFFECTS
- dietary restrictio n
- VL undetectable CD4-cell count high
- "risky behaviour"

[isolation]

LIFESTYLE
HIV anno 2014

- Changing clinical profile of HIV since cART
  → a chronic disease with increased survival

- Implicating ...
  → more general health problems
    - chronic inflammation < hiv-infection
    - treatment
    - lifestyle decisions
  → more risk of multiple comorbidities at younger age

- And implicating ...
  → a shift in treatment goals
  → a shift in representation of age categories
Comorbidities

- Cardiovascular disease
- Diabetes
- Renal disease
- Bone disease

→ Lifestyle-related chronic conditions
Lifestyle

- ‘A way of life or style of living that reflects the attitudes and values of a person or group’ (dictionary)

- ‘A pattern of individual practices and personal behavioural choices that are related to elevated or reduced health risk’ (public health)

- The aggregation of decisions by individuals which affect their health, and over which they more or less have control.
Comorbidities

- Cardiovascular disease
- Diabetes
- Renal disease
- Bone disease

→ Lifestyle-related chronic conditions
→ Modifiable lifestyle related risk factors
Lifestyle related risk factors

- Cigarette smoking
- Recreational drug use
- Alcohol intake
- Reduced physical activity
- Body composition (obesity)
- Blood pressure
- Dyslipidaemia
The role of counseling

- Core element in holistic model of health care
- Determining whether lifestyle puts the individual at risk
  - adherence
  - weight
  - blood pressure
  - smoking
  - ...
- Overview of basic lifestyle modifications
- Assist patient in making well informed choices with respect to their lifestyle
- To promote health and manage disease
- Staying healthy
Staying healthy

- Mental health
  - self confidence
  - depression
  - anxiety
- Eating & drinking
  - nutrition & hiv
  - supplements
- Alcohol & drugs
- Exercise
- Sleep
- Sex
- Co-infection
- Aging
HIV & Aging

- “HIV causes accelerated aging”
  - chronic inflammation
  - immune senescence
- No one can stop the aging process
- We can make changes to our lifestyles
  - stop smoking
  - improving diet
  - exercising more
  - managing HIV
Counseling

Sex

HCV and other co-infections

Transmission

Chronic HIV infection

ART

Side effects

Adherence

Exercise, Diet, Smoking

morbidity

hiv

quality of life
Conclusions

- Hiv therapy *anno 2014* includes
  - cART
  - comorbidity control
- Comorbidity is related to *lifestyle*, which is about personal behaviour
- Counseling is a way to assist the patient in making *well informed choices* with the aim
  - to promote health
  - to manage disease
- The ultimate *goal* is
  - to live long
  - in good health
  - with good quality of life
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