

When to start

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There is no set rule on when to start HIV treatments, if you feel generally lacking in energy, are suffering fevers, rashes or swollen glands you can consider HIV treatment at any CD4 count. However, you do not need to make any decisions straight away.

The current treatment guidelines (as of 2008) recommend commencement of treatment whenever:

- There is a history of an AIDS defining illness or severe symptoms of HIV disease, regardless of CD4 count;
- The CD4 count drops below 350; and
- Women with HIV who are pregnant (in order to reduce the risk of transmission).

The [viral load](#) [1]A measurement of the quantity of HIV RNA in the blood. Viral load blood test results are expressed as the number of copies (of HIV) per milliliter of blood plasma. might also be taken into consideration when planning treatment decisions. If the viral load is greater than 100,000, this might prompt your doctor to recommend treatment earlier. Though an unexplained and significant upward trend in viral load over a number of tests may be a stronger indicator that you should consider changing or starting treatments than a single, detectable result in isolation.

In addition, some authorities are starting to recommend treatment at CD4 counts higher than 350, but there is not enough evidence yet to broadly recommend this.

You may have plenty of time to consider your options before rushing in. It's advisable to have a good think about whether or not you want to start because once you start treatments, it is important to take all the doses of the drugs as HIV can become [resistant](#) [2]HIV which has mutated and is less susceptible to the effects of one or more anti-HIV drugs is said to be resistant. to the treatment if you miss doses frequently.

Starting [antiviral](#) [3]A medication or substance which is active against one or more viruses. May include anti-HIV drugs, but these are more accurately termed antiretrovirals. therapy is a serious commitment because it generally means taking treatments for the rest of your life. Taking treatments long term may affect your quality of life, particularly if you develop side effects or find daily pill taking burdensome.

It's important to realise that starting treatment is your decision and something you should consider with regard to your lifestyle, general health and whether or not you feel ready for treatment. Some of the things you might like to consider when deciding on whether or not to start treatments and what treatments to take include:

Your lifestyle

There may be aspects of your lifestyle to consider before deciding on treatments. If you travel a lot for instance, it may not be practical if your particular treatments require refrigeration. Or if you like to skip breakfast, it might not suit you to take treatments that need to be taken in the morning with food. Quality of life is important and you should try to make sure that you can fit a treatments regimen into your lifestyle.

Storage of the drugs

If you have young children or live with people who don't know about your HIV status, this may be a consideration. Alternatively, if you need to store your drugs at work and you are worried about people finding out; you might want to consider this when making a decision about treatment combinations that may suit your lifestyle.

At what stage of HIV disease you are diagnosed

In the mid 1990's the approach to treat HIV infection was 'Hit Early, Hit Hard'. At around the turn of the century, this approach changed to treating people who were well, since that time, there has been limited evidence to show the benefits of people starting treatments for people with recent HIV infection or for people who are well.

Remember, no one is really certain when the best time to start HIV treatment is. Any treatment decision needs to be discussed fully with your doctor, taking into account not only CD4 (and viral load) but most importantly, your ability to integrate [combination therapy](#) [4] Highly Active AntiRetroviral Therapy ??? aggressive treatment of HIV infection using several different drugs together. into the way you live.

[◀ Treating HIV](#) [5] [up](#) [5] [Side effects ▶](#) [6]

- [starting treatments](#)

Links:

[1] <http://www.napwa.org.au/glossary/term/416>

[2] <http://www.napwa.org.au/glossary/term/109>

[3] <http://www.napwa.org.au/glossary/term/123>

[4] <http://www.napwa.org.au/glossary/term/96>

[5] <http://www.napwa.org.au/resource/next-steps/treating-hiv>

[6] <http://www.napwa.org.au/resource/next-steps/side-effects>