Body Shape Changes

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Historically, HIV disease has been associated with changes to body shape.

Prior to HIV treatments being widely available, people with advanced disease often developed what was called 'HIV wasting syndrome' which was associated with a rapidly ageing appearance and the loss of subcutaneous fat — most visible in the face. Plastic surgeons suggest that the loss of this subcutaneous fat in the face plays the biggest role in the normal ageing of the face.

In the late 1990s a number of people on treatments developed a syndrome known as 'lypodystrophy syndrome'. This syndrome was particularly associated with lipoatrophy (the loss of fat in the face and the limbs). This pronounced lipoatrophy was shown to be particularly associated with some of the treatments used to treat HIV, particularly d4T (stavudine) and less commonly AZT (zidovudine) and ddI (didanosine).

HIV treatments that are most associated with lipoatrophy of the face and limbs are now rarely used. As a result the more severe effects of lipoatrophy are rarely seen in people who commenced treatment this century.

What can you do?

Regularly have your health monitored with your GP

As we become older the number of minor and major illnesses we are at risk for increases. Having HIV both adds to the number of illnesses and to the risk of getting some illnesses. That is why regular monitoring is important — and many aspects of how you metabolise fats will be monitored for. Sudden visible changes in fat metabolism are now less likely to be related to HIV treatments but to some other underlying cause.

Change treatments — don't stop treatments

If treatments may be contributing to lipoatrophy there are usually many other HIV treatment options available. Current medical advice recommends against taking any breaks from HIV treatments.

Cosmetic treatments

Some cosmetic treatments became available and accessible well after lipoatrophy became a problem for people with HIV. Check with your doctor or local PLHIV [1]Person (or people) Living with HIV. This term is now preferred over the older PLWHA. association to see if you may now be eligible for subsidised cosmetic treatment for lipoatrophy.

A good diet and regular exercise

You'll see recommendations for a good diet and regular exercise in every good living guide. People with HIV probably have more reasons to follow these recommendations—but unfortunately changing your diet or regular exercise can't replace the lost fat. Exercise can however build body mass in some areas where fat loss has occurred.

‹ Cancer Screening [2]up [3]Changes to Bones › [4]

- ANET resources
- Lipodystrophy and lipoatrophy

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Links:
[1] http://napwa.org.au/glossary/term/689
[2] http://napwa.org.au/resource/ahead-of-time-a-practical-guide-to-growing-older-with-hiv-/medical-challenges-of-hiv/cancer
[3] http://napwa.org.au/resource/ahead-of-time-a-practical-guide-to-growing-older-with-hiv/medical-challenges-of-hiv
[4] http://napwa.org.au/resource/ahead-of-time-a-practical-guide-to-growing-older-with-hiv-/medical-challenges-of-hiv/change

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