
COOKING

By Tim Horn

WITH THE HIV TREATMENT GUIDELINES

HIV drug therapy is a bit like baking a cake. You need the right amounts of the best and the freshest ingredients, along with a good kitchen and the right utensils.

In a way, this is how the U.S. Public Health Service (USPHS) thinks of HIV therapy. That is why they've come up with a set of guidelines, a "cookbook," to help HIV+ people and their health-care providers figure out which drugs to use and how to use them correctly. They add, however, that not every "recipe" will work for everyone, and people may even have different experiences with the same drugs.

The USPHS, a branch of the federal government that oversees a lot of health-related issues in the U.S., has published a "living" document called the *Guidelines* for the Use of Antiretroviral Agents in HIV-Infected Adults and Adolescents. The document is "living" in the sense that it is continually updated to reflect new information regarding individual drugs for the treatment of HIV. The *Guidelines* were written and are revised regularly by a panel of HIV/AIDS experts, including researchers, healthcare providers and community activists. They were first published in April of 1998 and have been updated numerous times since then.

The *Guidelines* are actually one of two major documents produced by the USPHS. The first document, the Report of the NIH to Define the Principles of Therapy of HIV Infec-

tion, was also published in April 1998. And while the Principles help to explain WHY HIV drug therapy is important, the *Guidelines* define HOW HIV drug therapy should be used.

What do they say?

The *Guidelines* basically answer four important questions regarding how best to monitor and treat HIV+ people:

When should HIV+ people begin treatment?

The *Guidelines* say that this should depend on a person's viral load and CD4 cell count and should be started before the immune system becomes seriously damaged.

What should they start treatment with?

Here, the *Guidelines* list a number of possible combinations, some of which are "Preferred Regimens," and some of which are "Alternative Regimens."


When should they switch to another therapy?

The *Guidelines* discuss how to use viral load and drug-resistance tests to help simplify this frustrating process.

What should they switch to?

Also listed are possible drugs to use after trying a specific combination in the past, along with options for people suffering from certain side effects.

Some doctors and HIV+ people practice the *Guidelines*' instructions exactly as they were written. But the authors also say that it's okay for people to individualize therapy. For example, some people may choose to delay treatment, or start therapy earlier, than what is recommended in the *Guidelines*. And don't forget that researchers are always testing new drugs and different ways to use them, lessons that may be written into the *Guidelines* in the future.

If you would like to receive a copy of the *Guidelines*, the document is free and can be requested from AIDSinfo the government's AIDS treatment information service: 1-800-HIV-0440 or www.aidsinfo.nih.gov/guidelines/. The *Guidelines* have become an important cookbook for HIV+ people and their docs. Too bad Martha Stewart didn't think of it first! 

Tim Horn is a writer and HIV treatment educator in New York City.