

The Other Important Lab Tests

By Liz Highleyman

Most HIV+ people know they need regular lab tests including complete blood count (CBC), viral load and CD4 cell counts. *But the following lab tests are also important for your health:*

Liver Function

HIV medications can be hard on your liver. Liver function tests show how well your liver is working. These include the liver enzymes ALT (SGPT), AST (SGOT), GGT and alkaline phosphatase (AP). Another test, prothrombin time (PT), measures if the liver is making enough proteins for blood clotting.

Bilirubin

A high bilirubin level can be a sign of liver or gall bladder problems. People taking the protease inhibitor Reyataz should have their bilirubin level checked regularly (although having a high level when taking this drug does not necessarily mean there is a problem).

Kidney Function

Some medicines, like Viread, can cause kidney problems. Lab tests for kidney function include creatinine, urinalysis, blood urea nitrogen (BUN) and uric acid.

Amylase

HIV drugs like ddI can cause inflammation of the pancreas (pancreatitis). A high level of an enzyme called amylase can be a sign of pancreas problems.

Lactic Acid

Certain HIV drugs (especially ddI and d4T) can cause elevated lactic acid, also called lactic acidosis. This condition is rare but can be serious. See your doctor if you develop nausea, stomach pain or shortness of breath while taking these drugs.

Glucose

Some HIV drugs can cause insulin resistance, which can lead to high blood sugar and diabetes. It is hard to measure insulin directly. Instead, your doctor will

measure your fasting glucose and glucose tolerance.

Lipid Levels

Some HIV drugs increase the level of lipids (fats) in the blood, which can cause heart problems. Monitor your cholesterol and triglyceride levels.

Hormone Levels


Testosterone levels are often low in HIV+ men and women. This can cause decreased sex drive, fatigue and depression. Tests for testosterone and other hormones like estrogen are available.

DEXA and BIA (not blood tests)

Some HIV+ people have low bone mineral density (osteopenia or osteoporosis). This means your bones may break more easily. A DEXA test uses X-rays to measure the density of bones like your hip and spine. Some doctors recommend a baseline bone density test when you first test HIV+ or before you start treatment.

Body fat changes (lipodystrophy) are another side effect of some HIV medications. The DEXA test and another called BIA show how much fat you have compared to lean muscle tissue.

Many lab tests can be done at the same time as your viral load and CD4 cell tests – every three to six months. Some tests should be done more often when you start a new drug. Other tests are done only if you have symptoms or if your doctor thinks there might be a problem. Ask your doctor about the best testing schedule for you and report new or worsening symptoms.

See also: Understanding Your Lab Results at www.criany.org/treatment/treatment_edu_lab_results.html 

Liz Highleyman is a medical writer in San Francisco.

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