

Caring From the Heart AIDS and the Caregiver

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Caring From The Heart

AIDS and the Caregiver

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NOTICE TO THE READER

Though the guidelines contained in this text are based on consultations with health care professionals, they should not be considered absolute recommendations. The instructor and readers should follow employer, local, state, and federal guidelines concerning health care practices. These guidelines change, and it is the reader's responsibility to be aware of these changes and of the policies and procedures of her or his health care facility/agency.

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Introduction - For Your Information

Many of the opportunistic infections associated with AIDS cause both physical and emotional discomfort. The complex and frightening nature of the disease process leaves the client needing accurate information, emotional support, and physical comfort. Many health care providers are not adequately trained or have never cared for a person with AIDS. They will be concerned and frightened, and this is natural for them to feel this way without preparation.

As health care providers deliver this care, they are frequently confronted with the client's ability to cope with the disease, the symptoms of the disease, and many times, the effects of the treatments.

Many AIDS clients keep well informed about HIV and AIDS as well as the most current HIV and AIDS statistics and research. These clients have probably read multiple sources of information and have listened to multiple sources of media that focus on AIDS. They will expect a high level of interest and knowledge regarding

the disease from their health care providers. However, there are others who are poorly informed and have limited access to accurate information. They will expect answers to their questions. For all these reasons, health care providers must be well informed regarding the disease and its processes and be prepared to answer and explain all procedures dealing with the delivery of care. A current information base must be maintained. The quality of this information can affect and influence the client's emotional and physical well being.

The person with AIDS requires more than just treatment of the disease itself. Caregivers must focus on the quality of their clients' lives, helping them to live their lives to the fullest. Caring for the client with AIDS really should be "caring from the heart."

This SourceBook addresses the needs of the person with AIDS on many different levels. Each section of the book can be taught as a separate in-service.

Overview of Contents

Section 1	The Disease Process of AIDS	1
Section 2	General Care Guidelines	67
Section 3	Providing Proper Nutrition for the Person with AIDS	111
Section 4	Psychological Aspects of Living with AIDS	179
Section 5	Pets and the Person with AIDS	217
Section 6	Grief, Death, and Dying	225
Section 7	Learning to Cope: a Caregiver's Life Line	235
Assessmen	t 1 The Disease Process of AIDS	239
Assessmen	t 2 General Care Guidelines	242
Assessmen	t 3 Providing Proper Nutrition	245
Assessmen	t 4 Psychological Aspects of AIDS	249
Answer Key	rs —	253
Appendix A Current HIV/AIDS Statistics		257
Appendix B Glossary for the Instructor		258
Appendix C	Glossary for the Student	262
Appendix D Resource Information		264
About the Author: Charles A. Illian, RN, BSN		

Section 1: The Disease Process of AIDS

Learning Objective 1: Define the stages of HIV-1 infection	2	Learning Objective 4: Understand standard precautions	38
Transparencies: Overview of the Stages of HIV Infection Stages of HIV Infection (Part 1) (6) Stages of HIV Infection (Part 2) (7) The Lymph System (8) Incubation and Infectious Periods (9)	n (5)	Transparencies: Body Substances (41) Wash Your Hands (42) Gloves (43) Wear Masks, Eye Shields, and Gowns Equipment and Linen (45)	
Handouts: The Stages of HIV-1 Infection (10)		Needles and Other Sharp Equipment (46 Resuscitation Devices (47) Handouts:)
Learning Objective 2: Describe the transmission of HIV	12	Standard Precautions and AIDS (48)	
Transparencies: HIV Transmission (15)		Learning Objective 5: List high risk behaviors	49
Sexual Transmission (16) Exposure to Blood, Body Fluids (17) Occupational Exposure (18) Cause of Injury (19) Body Fluid Causing Transmission (20) Perinatal Exposure (21)		Transparencies: How to Stop the Spread of HIV (51) What are High Risk Behaviors? (52) Handouts: High Risk Behaviors (53)	
Shared Items (22) Activities with AIDS Client (23)		Learning Objective 6: Describe HIV testing	54
Handouts: HIV Transmission (24) Occupational Exposure (25) Percentage of Household Members (2 Learning Objective 3: Recognize common myths about HIV and AIDS		Transparencies: HIV Testing (56) What is Seroconversion? (57) ELISA (58) False Positives and Western Blot (59) Handouts: HIV Testing (60)	
Transparencies: Shaking Hands, Hugging, Kissing (29) Using the Telephone (30) Common Objects (31) Food Preparation (32) Toilets (33) Mosquitos and Other Insects (34) Breathing the Same Air (35)		Learning Objective 7: List HIV and AIDS statistics Transparencies: World Trends (62) Areas with the Highest Incidence of HIV/AIDS (63)	61
Handouts: Myths about HIV and AIDS (36)		Cumulative U.S. AIDS Cases (64) Handouts: HIV/AIDS Statistics (65)	

Define the stages of HIV-1 infection

Estimated Time: 1 hour

Tools: Transparency 1-1 Overview of the Stages of HIV Infection

Transparency 1-2 Stages of HIV Infection (Part 1) Transparency 1-3 Stages of HIV Infection (Part 2)

Transparency 1-4 The Lymph System

Transparency 1-5 Incubation and Infectious Periods

Handout 1-1 The Stages of HIV-1 Infection

Learning Activity: Lecture

Display Transparency 1-1 Overview of the Stages of HIV Infection HIV infection can be divided into four distinct stages:

Stage 1: The Early Acute Stage (18 months average) **Stage 2:** Latent-Asymptomatic (7 ½ years average)

Stage 3: LAS or Lymphadenopathy syndrome (1-2 years average) **Stage 4:** AIDS (2-3 years average, but may increase due to new drugs)

Definition: The **window period** is the time from exposure to HIV to when the HIV antibodies appear in the blood. The common test for this is called ELISA.

Display Transparency 1-2 Stages of HIV Infection (Part 1)

The Early Acute Stage

- Normal CD-4+ cell count
- Very high level of HIV-1 Virus in the blood
- Very high level of p-24 in the blood
- Infected person very communicable to others at this stage
- No outward signs or symptoms of infection

Definition: CD-4+ cells are specialized cells that stimulate the immune system and tell it to fight disease. The CD-4+'s themselves do not fight the disease. CD-4+'s are also known as T-4 cells, T-helpers, T-4 helpers, and T-4 lymphocytes.

Question: How do the CD-4+ cells know when to stimulate the immune system to fight?

Answer: Cells have "self" markers that identify them as belonging to your body. Invading organisms lack this special marker. CD-4+ cells recognize these "non-self" agents and release special substances into the blood stream which signal your immune system to destroy the invaders.

Question: What is p-24?

Answer: p-24 is an HIV antigen, which is a product released by the HIV-1 virus as it reproduces. Normally you should not have any p-24 in your blood at all. The more p-24 you have in your blood, the more virus you have reproducing.

Latent-Asymptomatic

- Infected with the HIV, but showing no outward physical symptoms
- CD-4+'s declining
- Amount of virus in blood declining

Definition: Asymptomatic means infected but showing no outward signs or symptoms of HIV infection.

Question: Why are the CD-4+'s declining?

Answer: Because the HIV virus is destroying them.

Question: Why is there a lesser amount of HIV in the blood? **Answer:** Because HIV survives and reproduces within the CD-4+ cells. Fewer CD-4+'s means less HIV being produced and being released into the blood.

Display Transparency 1-3 Stages of HIV Infection (Part 2)

Lymphadenopathy Syndrome (LAS)

- "Pre-AIDS"
- HIV leaves the blood.
- HIV enters the lymph system and destroys it.
- HIV destroys the thymus gland (part of the lymph system; gland that regulates immune system by releasing CD-4+ cells into blood).
- Swollen lymph nodes in more than two lymph chains
- Fevers at night
- Sweating at night

Display Transparency 1-4 The Lymph System

Use this transparency to illustrate the lymph system and point out the location of the thymus gland.

Display Transparency 1-3 Stages of HIV Infection (Part 2)

AIDS

- Very high level of HIV in the blood
- Very communicable to others
- CD-4+ cell count 200 or below
- Probably symptomatic

Definition of AIDS: Last stage of HIV infection, when the CD-4+ cell count reaches 200 or below and infected person begins to show symptoms. Normal cell count is 1000 to 1500.

Display Transparency 1-5 Incubation and Infectious Periods

Definition: Incubation period is the time frame between exposure to HIV and development of AIDS. This time frame is usually 10 to 15 years, but new drugs on the market could extend the time.

Most Infectious Periods of HIV

Stage 1: Early acute state

Stage 4: AIDS

Question: Why are these periods of HIV the most infectious? **Answer:** This is when the most virus is reproducing in the blood. Also, during the window period and the early acute stage, the infected person is usually not aware that he or she has HIV.