

Liver Disease

Hepatitis is a form of liver disease. Hep B spreads the same ways as HIV. Up to 10 percent of those with HIV also have Hep B. Hep B is the ninth highest cause of death in the world.

Men with both Hep B and HIV have a much higher risk of dying from liver disease than men who have Hep B but not HIV.

More than a third of people with HIV have Hep C. It can lead to liver disease, liver failure or death.

People with HIV are more likely to get liver diseases, such as:

- Cirrhosis
- Fatty liver
- Lactic acidosis
- Liver cancer
- Liver failure

HIV medications (meds) help people live longer. Sometimes they affect the liver.

Symptoms

Signs include:

- Dark, tea-colored pee
- Easy to bleed or bruise
- Feel very tired most of the time
- Pain in the upper right side of the stomach
- Clay-colored stools
- Yellowed eyes and skin

Causes of Liver Disease

A person with HIV may get liver problems from:

- Prescribed Drugs. HIV meds may cause liver problems.
- Immunity. A weak immune system. The body cannot fight infections such as hepatitis.
- Hepatitis. This puts stress on the liver. If you have hepatitis, you are five times more likely to have side effects from certain HIV meds.
- Alcohol and street drugs. If you are a heavy drinker, take drugs or have allergies. These harm the liver even without HIV. Half of the cases of liver failure in the US are due to issues with drugs.

Risk Factors

Liver problems are more likely if a person:

- Has hepatitis
- Takes certain classes of HIV meds
- Takes meds for HIV-linked infections.

How to Know You Have Liver Disease

Monthly blood tests are best for the first two or three months when you start HIV treatment with certain meds. After that, they should be done every three months.

A higher CD4 count leads to different types of liver disease. People with a high CD4 count and HIV tend to get hepatitis or alcoholic liver disease. A person with a lower CD4 count and HIV is more likely to get an infection that targets a weak immune system.

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Treatment

Most drug-related liver problems are mild. Some are fatal.

A rise in liver enzymes may mean HIV meds should be changed. Sometimes only one med has to be switched. If that does not work, your doctor may suggest a two- to three-month break from meds to help the liver heal.

HIV meds may need to be stopped if there is severe liver damage. This happen less than 5% of the time. Only a few people have to end all of their treatment.

Active hepatitis or alcohol abuse makes it more likely HIV meds will be stopped. Hep C may also get worse faster when a person also has HIV

If treatment is stopped, HIV builds up in the body again. A doctor has to weigh the risks and gains for each patient.

Prevention

Blood tests can check on the liver and catch problems early.

Limit alcohol use and avoid drugs to prevent liver disease.

Vaccines against Hep A and B also help. There is no vaccine for Hep C.

For more information

Contact your Registered Nurse Care Manager, or call Positive Healthcare's Nurse Advice Line at: (800) 797-1717.



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