Pneumocystis Carinii Pneumonia (PCP), or *Pneumocystis Jiroveci*

Pneumocystis carinii pneumonia (PCP) was once the major cause of death for people with AIDS. Now it can be prevented and treated.

More than 85% of the people with HIV who are not on treatment will get PCP. If the CD4 count drops below 50 before treatment the risk is even higher.

Symptoms

The symptoms don't appear right away, but start slowly over a few weeks. The symptoms are:

- Shortness of breath
- Fever
- Dry cough
- Feeling really tired
- Chills

See a doctor right away if you have any of these signs. PCP often attacks the lungs and causes a form of pneumonia.

Causes

A fungus causes PCP. A healthy immune system controls it. Adults with weak immune systems cannot fight the fungus well. People with a CD4 cell count less than 200 are more likely to get PCP.

Treatment

The meds now used to treat PCP include:

- Bactrim® or Septra® (TMP/SMX). This will fight PCP best. It is taken as a pill three times a day.
- Dapsone. It is taken as a daily pill.
- Pentamidine is inhaled in a fine mist. This means a monthly visit to a clinic with a machine that makes the mist. The mist is inhaled for 30 to 45 minutes. This does not work as well as the pills. It costs more than other treatments. If PCP is active, it can be shot into a vein.
- Mepron® (atovaquone). This is only used in people with less severe PCP who cannot take other meds.

Prevention

The best way to fight PCP is to follow your HIV treatment. People who have fewer than 200 CD4 cells should take PCP medications (meds) that prevent PCP.

Once your CD4 cell count stays above 200 for three months, the PCP meds can be stopped. The side effects from the meds are mild.

For more information
Contact your Registered Nurse Care Manager, or call PHP Nurse Advice Line at: (800) 797-1717.

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