What is Aids related cognitive impairment

People with Aids sometimes develop cognitive impairment, particularly in the later stages of their illness. This information sheet explains how Aids-related cognitive impairment is diagnosed. It goes on to describe the symptoms and outlines the treatments available.

Aids (acquired immune deficiency syndrome) is caused by the presence of the human immunodeficiency virus (HIV) in the body. HIV works by attacking the body’s immune system, making the person affected more susceptible to infection. Aids-related cognitive impairment can be caused by:

- The direct impact of HIV on the brain
- Infections that take advantage of the weakened immune system.

How common is it?

It is difficult to be precise about the incidence of Aids-related cognitive impairment. Many of the studies into its incidence were carried out before the introduction of ‘combination therapy’ – the use of a combination of drugs that are now used to control HIV.
Symptoms

Symptoms of AIDS-related cognitive impairment may include:

- Forgetfulness
- Concentration problems
- Language difficulties
- Problems with short term memory
- Clumsiness
- Unsteadiness
- Jerky eye movements
- Ataxia ('drunken gait')
- Changes in personality
- Loss of appetite
- Inappropriate emotional responses
- Mood swings
- Hallucinations

Diagnosis

There can be problems diagnosing AIDS-related cognitive impairment. There has been some confusion about the precise definition of the condition.

Many people are misdiagnosed as having depression or other neurological or psychiatric conditions.

Sometimes people develop the symptoms of dementia and are only later found to have the HIV virus. The following tests may be carried out:
HIV test

This should only be undertaken following specialist counseling.

CT Scan

A CT (computerized tomography) scan can be used to detect infections in the brain.

MRI scan

MRI (magnetic resonance imaging) scans can show shrinkage of the brain tissue.

Lumbar puncture

This involves taking fluid from the base of the spine with a needle. It can be used to detect the amount of HIV infection in the fluid surrounding the brain.

Neuropsychometric testing

These psychological tests are used to measure the function of different parts of the brain.

Brain biopsy

A brain biopsy involves taking a small piece of the brain and examining it in the laboratory. This procedure is not performed very often as it involved brain surgery.
Treatment

Anti-HIV drugs

At the moment it is not possible to cure AIDS.

However, the introduction of ‘combination therapy’ – the use of three or more anti-HIV drugs – has dramatically improved the life expectancy and quality of life of people with AIDS.

The aim of these anti-HIV drugs is to decrease the amount of the virus in the bloodstream, reducing the damage that HIV can cause. People with AIDS-related cognitive impairment are usually prescribed a combination of anti-HIV treatments to stop or slow down the ability of HIV to cross into the brain.

The success of these drugs has meant that the focus of treatment has now shifted from palliative care to rehabilitation.

Other medication

Psychiatric drugs are also prescribed to people with AIDS-related cognitive impairment, including:

Antidepressants (such as fluoxetine, paroxetine, citalopram and venlafaxine). These are used to improve motivation and appetite.

Neuroleptics (such as olanzapine and risperidone). These can relieve agitation and anxiety.

Rehabilitation

A structured rehabilitation programme can help people with AIDS-related cognitive impairment relearn the skills they need to care for themselves. This might include relearning how to wash, dress and feed themselves, how to learn to take medication and cook and how to be aware of road and household safety.

Written with the help of the HIV Brain Impairment Unit, Mildmay Hospital, London
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Contact us:

3rd Floor,
State House,
3 Rose Street,
Cape Town

P.O. Box 16421
Vlaebeg
8018

Tel: (021) 421 0077/78
Email: info@dementiasa.org
Or support@dementiasa.org

www.dementiasa.org