



NUTRITION COUNSELLING, CARE AND SUPPORT FOR HIV-INFECTED WOMEN

**GUIDELINES ON HIV-RELATED
CARE, TREATMENT AND SUPPORT FOR
HIV-INFECTED WOMEN AND THEIR CHILDREN
IN RESOURCE-CONSTRAINED SETTINGS**



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WORLD HEALTH ORGANIZATION
DEPARTMENT OF HIV/AIDS AND DEPARTMENT OF
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ABBREVIATIONS

AIDS	acquired immunodeficiency syndrome
ARV	antiretroviral
BMI	body mass index
CDC	Centers for Disease Control and Prevention
FHI	Family Health International
HIV	human immunodeficiency virus
MTCT	mother-to-child transmission (of HIV)
OI	opportunistic infection
PI	protease inhibitor
RDA	recommended daily allowance
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WHO	World Health Organization

PREFACE

HIV/AIDS is the greatest health crisis the world faces today. An estimated 40 million people are now living with HIV/AIDS and, in 2003, the pandemic led to 5 million new infections and claimed 3 million lives. An increasing burden is being placed on women and children, who are experiencing growing rates of AIDS-related illness and death in many settings. Globally, about half of all adults living with HIV/AIDS are women, and 2.5 million children are living with the virus. A total of 700,000 children were newly infected in 2003, mainly through mother-to-child transmission of HIV. In the most severely affected countries, HIV/AIDS is wiping out families, destroying communities and threatening the social, economic and political gains of recent decades. This crisis has led to unprecedented political mobilization, new funding opportunities, and a renewed public health response seeking to scale up key prevention, care, treatment and support interventions, so that they may become available to all those who need them.

The relationship between nutrition and HIV/AIDS is complex and not fully documented to date. The HIV/AIDS epidemic poses a challenge to the health and overall socio-economic development in countries that have been greatly affected by the disease, which in turn may affect nutrition, and food security. Healthy nutrition plays a role in alleviating the symptoms - e.g. diarrhea, anorexia, sore mouth, muscle wasting - common with the HIV disease. There are however many gaps in current scientific knowledge on the impact that HIV/AIDS and malnutrition have on each other, the role of nutrition in the management of HIV/AIDS and interactions between nutrition and ARV treatment.

Successful approaches to tackling HIV/AIDS care are characterized by comprehensive strategies that address health needs as well as psychosocial care and support.

In this connection, HIV-infected women and children deserve particular attention as they represent a large proportion of the people requiring care and have specific nutrition, care and support needs. Nutritional care and support are essential elements of the comprehensive approach to HIV. However, adequate nutrition is vital for the health and survival for all individuals, regardless of their HIV status. Thus efforts to strengthen nutrition counseling, care and support for HIV-infected persons should be balanced with efforts to alleviate the overall burden of malnutrition, regardless of HIV status.

Action and investment to improve the nutrition of persons living with HIV should be based on sound scientific evidence, local resources, and programmatic and clinical experience with the prevention, treatment, and management of the disease. This document reviews the relationship between nutrition and HIV/AIDS and scientific evidence on the role of nutrition in HIV transmission, disease progression, morbidity, and disease management; and makes recommendations on nutrition counselling, care and support for HIV-infected women, based on current evidence. Many of the issues related to nutrition and HIV/AIDS are also considered in a comprehensive scientific review currently being undertaken by the WHO Technical Advisory Group on Nutrition and HIV/AIDS. The results of this review will be available in early 2005.

This document is part of a series of modules being developed by WHO and its partners on the care, treatment and support of HIV-infected women and their children in resource-constrained settings. It complements revised guidelines for antiretroviral treatment that have been issued in support of WHO's '3 by 5' initiative, which aims to support national efforts to provide antiretroviral treatment to three million people living with HIV/AIDS in resource-constrained settings by the end of 2005.

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