

Can Micronutrient Supplementation Improve the Health of HIV Patients?

People infected with HIV may benefit from micronutrient supplementation, according to a report published in the February 2007, issue of the American Journal of Clinical Nutrition. The main focus of this report was with HIV-infected persons not receiving highly active antiretroviral therapy (HAART), but also reports that additional study of those receiving HAART may show benefits as well because HAART therapy is shown to deplete many micronutrients in the body. HIV medications are relatively easy to obtain in developed countries, but only 1 in 7 in Asian countries and 1 in 10 in African countries have access to HIV antiviral drugs. Micronutrient deficiencies are commonly observed in those with advanced HIV disease and are associated with higher risk of disease progression and mortality. In those receiving HAART, immunologic function is restored but these drugs do not eliminate weight loss and wasting. Because of these factors, micronutrient supplementation can be an inexpensive way to improve quality of life and possibly reduce health care expenditures in those suffering from advanced stages of HIV disease as well as those who continue to suffer from disease effects not treated by HAART therapy. In one placebo-controlled study, HIV-infected patients were given Vitamins A, C, and E for six months. At the beginning of the test, all patients had lower levels of these important nutrients when compared to a group of HIV-negative healthy volunteers. At the end of the study, the levels of these nutrients were normal in the patients given supplementation and not in the placebo group. The study also showed that the supplemented group had substantially better antioxidant defenses and lower levels of oxidative stress than the placebo group. Because HIV medications have a direct effect on the synthesis and metabolism of micronutrients in the body, restoring these depleted levels through dietary supplementation may also provide substantial benefit for those on HAART therapy. A small study showed that greater intake of Vitamin E in adults receiving HAART reduced the outcome of HAART-related complications which include body fat redistribution, dyslipidemia and insulin resistance. Other studies have been shown to stimulate glutathione peroxidase activity and reduction of oxidative stress. Such studies demonstrate the significant need for optimal nutritional support in HIV-infected people. It also calls for the need of further studies to provide additional validation and solutions for people not able to receive HAART therapy as well as to support and improve the overall health of those who are on HAART therapy. The long-term benefits may be seen in reduced health care expenditures, around the world, as well as improved quality of life for those suffering from the effects of HIV infection.

About the Author

Always seek the advice of your physician or other qualified health. Do not delay seeking or disregard medical advice based on information.

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