HIV and Your Lungs

Many conditions can affect the health of your lungs—from bacterial and viral infections to cancers and other conditions related to aging. Some of these are preventable, whether it’s through making certain lifestyle changes, getting vaccinated or keeping up with your daily HIV regimen.

Rates of chronic obstructive pulmonary disease (COPD)—including emphysema and chronic bronchitis—as well as lung cancer are increasing among people living with HIV. In fact, the risk of these serious and sometimes fatal diseases appears to be even higher among HIV-positive people compared to HIV-negative people.

High rates of smoking may account for this higher risk: people living with HIV are twice as likely to smoke as uninfected people. But research also suggests that HIV disease itself increases the risk of lung disease, most likely because of ongoing inflammation within the immune system. Whereas COPD usually affects HIV-negative men and women in their 50s and 60s, it is being seen at younger ages in people living with HIV.

Here are some ways to reduce the risk of lung disease and help keep your lungs healthy. For those who have been diagnosed with COPD, lung cancer or other serious respiratory problem, these tips are equally valid.

Stop or Reduce Smoking. The best thing you can do for your lungs is to stop smoking (or never start). Smoking is the underlying cause of most cases of COPD and lung cancer. Quitting smoking can help preserve remaining lung function and has a positive effect on many other aspects of your health. Click here for tips and tricks on how to quick smoking.

Aerobic Exercise. Walking, running, cycling, swimming, dancing and similar exercise—in or out of a gym—help your lungs and heart work at full capacity. Aerobic exercise, also called cardiovascular exercise, improves your body’s oxygen consumption and is great for maintaining lung health. Do something you enjoy—you may not stick with it if you’re bored. Vary your activities to keep things interesting over time.

Nutrition. Eating a nutritious diet is good for overall health. It increases energy and concentration and helps in many other ways. Diet habits and nutritional status also seem to influence lung function and the risk of lung disease, including cancer. Many studies have associated better lung
function and less chronic lung disease with the intake of high antioxidant and anti-inflammatory nutrients. These are found in fresh fruits, vegetables and fish. One study of nonsmokers and smokers with no history of respiratory disease found that eating a lot of fresh fruit was significantly related to improved lung function.

Since advanced COPD can lead to decreased appetite, weight loss and wasting, it's particularly important to develop nutritious eating habits. When you experience appetite loss, the very idea of eating—nutritiously or not—can be overwhelming. Talk to your health provider about it. Seeing a dietician can help, and so can eating small portions of nutritious foods throughout the day.

Vaccinations. Talk with your doctor about getting regular vaccinations, such as the pneumococcal and flu vaccines. Just one dose of the pneumococcal vaccine (Pneumovax, Prevnar, Synflorix) is recommended for most people to prevent this bacterial pneumonia. Complications include a bad cough, chest pain, difficulty breathing, increased respiration and inability to get enough oxygen.

Protect yourself against the seasonal flu by getting a flu shot each year. The common flu further stresses your lungs, not to mention putting you out of commission for days or longer. However, the live vaccine called FluMist is not recommended for people with HIV.

Preventive Medications (Prophylaxis). People with an impaired immune system—including some people with HIV—risk developing certain opportunistic infections (OIs), some of which can affect the lungs. To prevent getting these OIs, it’s important to take preventive medications especially if your CD4 count is declining towards 200 or below.

Pneumocystis pneumonia (PCP) is one of these OIs that require preventive medications. If your CD4 count is below 200, then taking TMP/SMX (Bactrim, Septra) is recommended in order to protect against PCP, some bacterial infections, and the parasitic disease toxoplasmosis. For those with an allergic reaction to TMP/SMX, dapsone is the next recommended medication. If you have a history of PCP, whatever your CD4 count, it’s best to continue taking TMP/SMX as part of your regimen.

Get tested for tuberculosis (TB). A PPD skin test can tell if you’ve been exposed to Mycobacterium tuberculosis. If you have, then additional tests should be done to see if you have active or latent disease. In either case, medications will be prescribed to prevent latent disease from developing further or to treat the current active infection.

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