II. Specific Opportunistic Infections

As explained in the first section of this booklet, people with AIDS are at risk for a number of OI's and other medical problems. However, this does not mean that they will actually experience all of them. It all depends on the individual. One person's greatest challenge might be PCP, while another person may require treatment for tuberculosis.

This section discusses some of the most common OI's seen in people with AIDS. Included is information on the treatments used for each OI, including their side effects, along with information on how best to prevent the infection from occurring in the first place. The medicines listed in this section are all recommended by the Department of Health in the HIV/AIDS Policy Guide. Unfortunately, some clinics do not have all of these medicines.

If your clinic is unable to provide you with these important medicines, or you feel that your doctor is not providing the medical attention you need, you should contact the Treatment Action Campaign to explore your options.

Western Cape:	Linda / Mandla / Nathan:	(021) 364 5489
Gauteng:	Pholokgolo / Sharon:	(011) 403 7021
KZN:	Sizwe / Zamo:	(031) 304 3673
website:	www.tac.org.za	
email:	info@tac.org.za	

Respiratory Infections

Tuberculosis (TB)

What is it?

Tuberculosis (TB) is a common AIDS-related opportunistic infection that, if not treated correctly, can be life threatening.

TB is the world's most common disease and the biggest killer of HIV-positive people in South Africa. Compared to HIV-negative patients with TB, HIV-positive people with the disease may see their symptoms develop faster and with greater intensity. Treating TB in HIV-infected patients may also take longer than those who are not also infected with the HIV.

What are the symptoms of tuberculosis?

Cough is a main symptom of tuberculosis, along with night sweats, chills, weight loss, fever, and fatigue.

How is tuberculosis diagnosed?

If you have symptoms of tuberculosis, your doctor will want to collect sputum (fluid; phlegm; mucous) from your lungs and send the sample to a laboratory. The laboratory will use a microscope to look for the bacteria. This process is called TB microscopy. Your doctor may also want a picture of your lungs, called an X-ray, or request additional lab tests of the fluid taken from your lungs.

While you are waiting for results, your doctor may recommend that you start treatment immediately.