

Human Immunodeficiency Virus (HIV) Role Statement

Developed by members of the HIV Interest Group

Introduction

Accredited Practising Dietitians (APDs) are recognised professionals with the qualifications and skills to provide expert nutrition and dietary advice. APDs are qualified to advise individuals and groups on nutrition-related matters.

APDs have university training accredited by Dietitians Australia, undertake ongoing professional development and commit to evidence-based practice. They comply with the [Dietitians Australia Code of Conduct for Dietitians & Nutritionists](#) and commit to providing quality service.

APD is the only national credential recognised by the Australian Government, Medicare, the Department of Veterans Affairs, the National Disability Insurance Agency and most private health funds as the quality standard for nutrition and dietetics services in Australia. It is a recognised trademark protected by law.

Purpose of this role statement

- To define the role an APD may fulfil when working in the area of HIV
- To promote the knowledge and expertise of an APD, broadly and in the area of HIV and beyond [National Competency Standards](#)
- To advocate for dietetic services

Knowledge and skills in this area of practice

Entry level dietetic competencies ensure all APDs can conduct assessments, diagnose nutritional issues, and develop, monitor and evaluate interventions. Within a particular practice area, APD skills and knowledge will range from entry level to highly skilled. Within this continuum APDs can either fully manage the patient, seek support to continue seeing the patient or refer the patient on.

The following is a list of skills and knowledge required to work in the HIV area:

Knowledge

- Understands the role of medical nutrition therapy in the prevention and management of comorbidities which include hyperlipidaemia, diabetes, hypertension, chronic kidney disease and osteoporosis.
- Best practice, current clinical care guidelines and emerging evidence and research with respect to the nutritional management of PLHIV.
- The range of the psychosocial problems and HIV-related neurological disorders frequently encountered by PLHIV.

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- Is aware of common herbal remedies used by PLHIV and their possible interactions with HIV specific medications and nutrient absorption.
- Understands HIV biochemistry, including CD4 count and viral load.

Skills

- Ability to undertake an appropriate and tailored assessment of an individual including consideration of nutrition-related side effects of HIV and treatment, social situation, medications and anthropometry, blood results, food security, psychosocial needs and other relevant assessments.
- Educate clients and their caregivers on the role of nutrition and diet in restoration and maintenance of health.
- Effectively communicate complex information to a range of people relating to the nutritional management of people living with HIV (PLHIV) in a variety of settings.
- Ability to teach the knowledge, skills and behaviours required to plan, manage, select, prepare and eat food to meet nutritional needs of people living with HIV.
- Ability to address barriers to change for PLHIV (stigma, discrimination, depression, lack of social support) when promoting diet and lifestyle changes.

Activities entry level APDs would conduct

- Provide support for maintenance and recovery of the immune function through planning and implementation of individualised medical nutrition therapy.
- Assist in developing strategies to manage nutrition-related side effects of disease and medications such as lipodystrophy, dyslipidaemia, insulin resistance and diabetes, hypertension, chronic kidney disease, osteoporosis, anaemia, anorexia, and gastrointestinal symptoms.
- Provide education for clients and carers on the potential impact of drug-nutrient interactions on nutritional status with antiretroviral therapy (ART), other medications, complementary and alternative medicine (CAM) therapies, supplemental nutrients, herbs, and other therapies
- Support medical treatment of HIV by promoting adherence to treatment and compliance with regular clinic visits
- Maintain familiarity with community and other programs available to clients for referral in cases of social, economic, and psychological needs
- Remain knowledgeable of issues pertaining to privacy and confidentiality when providing nutritional care and providing care in an equitable and non-judgmental fashion

Activities APDs working at a higher level would conduct

- Audit, service development and research relating to HIV nutrition to inform clinical practice
- Strategic planning especially in line with HIV strategy and blood borne virus (BBV) strategies; in partnership with HIV health and non-health agencies.
- HIV advocacy and capacity building across both public and private healthcare departments.
- Case management and care coordination

Practitioners should refer to the Scope of Practice Decision Tool to determine if a task is within their scope of practice.

Appendix 1 – Background

Since the introduction of antiretroviral therapy (ART), life expectancy of people living with HIV (PLHIV) has increased to near to that of the general population. Optimum nutrition, exercise and a healthy lifestyle are important for PLHIV as it can help to: minimize symptoms, reduce the side effects of medication, improve resistance to other infections and complications and therefore improve quality of life.^{1,2,3}

Some adverse effects are known to occur with greater frequency among PLHIV compared to the general population. These can result from the HIV infection or ART and also lifestyle choices.

These include:

- Hyperlipidaemia and increased cardiovascular risk⁴
- Alterations in glucose metabolism⁵
- Decreased bone mineral density⁶
- Vitamin D deficiency⁷
- Gastrointestinal symptoms: nausea, anorexia, constipation, diarrhoea and taste changes (particularly at the commencement of treatment)⁸

When well, PLHIV are encouraged to follow the same principles of healthy eating that are recommended for everyone with goals being to achieve an ideal body weight and maintain lean muscle mass, prevent deficiencies and optimize nutritional status. Protein and energy requirements are the same as for the general population.

The Australian Guide to Healthy Eating⁹ can be used as a guide to ensure that PLHIV are eating adequate amounts from the five food groups and limiting foods that are high in saturated fat, added sugar and salt. This will help to ensure adequate intake of essential nutrients and may reduce the risk of chronic diseases.¹⁰

References

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