

HONORING YOUR BODY

Maintaining a Healthy Weight While Living with HIV



Caring for our whole selves – mind, body and spirit – is the foundation of a good HIV treatment plan. Self-care might look different for each of us, but at its core, it's about prioritizing all aspects of our health, including HIV medication. Staying on and sticking to your medication is an important part of self-care, which is why you should always have Fearless Conversations with your healthcare provider before making any changes to your treatment plan.

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Maintaining a healthy weight is an important part of overall health. Weight is not about what we look like, it's about the impact it can have on our bodies.

Proper nutrition and exercise are important to maintaining a healthy weight and can help to improve our emotional, physical, and cognitive well-being.¹



Proper nutrition helps keep our immune systems strong to help our bodies fight infections.²



Exercise can play an important role in protecting and improving our overall wellness by preventing health problems, reducing stress, and improving our energy level.²

People living with HIV are **living longer, healthier lives**, but face a greater risk for certain conditions, such as:



Diabetes⁵



Heart Failure⁶



Heart Attack⁷



Stroke⁶

Weight changes, specifically weight gain, can increase our risk of developing these long-term health conditions.⁸ **That's why it's important to focus on the inside and work on building a healthy lifestyle that can help us all maintain a healthy weight.**

In addition to proper nutrition and exercise, it's also important to understand the factors that can impact weight, such as:



Family history & genetics³



Having certain medical conditions³



Managing stress³



Taking certain medications³



Hormone therapy⁴

MEDICATION-RELATED WEIGHT GAIN

Recently, the US Department of Health and Human Services (DHHS) updated its HIV treatment guidelines including emerging data around weight gain. These data are still new and not yet conclusive so it's important to have ongoing conversations with your healthcare provider as research continues in this area.⁹



A certain class of HIV medication may lead to greater weight gain, compared to other classes, especially for those starting treatment for the first time.



Certain groups are more at risk, including females, Black and Hispanic people living with HIV.



The medical community is still working to understand the long-term impact and if this weight gain is reversible.

DID YOU KNOW?

There are **7 different classes of HIV medications** and healthcare providers may prescribe a combination of these.¹⁰

Learn more about the different medication classes in this [HIVinfo guide](#) and talk to your healthcare provider about which ones you may be taking.



If you're experiencing any weight changes, do **NOT** stop taking your medication. Starting and sticking to your treatment is the most important part of living **POSITIVELY FEARLESS**. Because everyone's care plan is different, before you make any changes to your treatment regimen, **talk to your healthcare provider** to discuss what works best for you and your lifestyle.

Having the conversation about
how to live your best life is worth it!

YOU ARE WORTH IT.

¹ Mandolesi L, Polverino A, Montuori S, et al. Effects of physical exercise on cognitive function and wellbeing: biological and psychological benefits. *Front Psychol*. 2018;9:509.

² Somarrriba G, Neri D, Schaefer N, et al. The effect of aging, nutrition, and exercise during HIV infection. *HIV/AIDS (Auckl)*. 2010;2:191-201.

³ Factors Affecting Weight & Health. NIH. NIDDK. U.S. Department of Health and Human Services. Accessed May 18, 2022.

<https://www.niddk.nih.gov/health-information/weight-management/adult-overweight-obesity/factors-affecting-weight-health>.

⁴ Klaver M, Dekker MJHJ, de Mutsert R, et al. Cross-sex hormone therapy in transgender persons affects total body weight, body fat and lean body mass: a meta-analysis. *Andrologia*. 2017;49(5); doi:10.1111.12660.

⁵ Brown TT, Cole SR, Li X, et al. Antiretroviral therapy and the prevalence and incidence of diabetes mellitus in the multicenter AIDS cohort study. *Arch Intern Med*. 2005;165(10):1179-1184.

⁶ Feinstein MJ, Hsue PY, Benjamin LA, et al. Characteristics, prevention, and management of cardiovascular disease in people living with HIV: a scientific statement from the American Heart Association. *Circulation*. 2019;140:e98-e124.

⁷ Feinstein MJ, Bahiru E, Achenbach C, et al. Patterns of cardiovascular mortality for HIV-infected adults in the United States: 1999 to 2013. *Am J Cardiol*. 2016;117(2):214-220.

⁸ Sax PE, Eraldson KM, Lake JE, et al. Weight gain following initiation of antiretroviral therapy: risk factors in randomized comparative clinical trials. *Clin Infect Dis*. 2014;pii:ciz999.

⁹ Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV. Updated Aug. 2020. Accessed May 18, 2022.

<https://clinicalinfo.hiv.gov/sites/default/files/guidelines/documents/AdultandAdolescentGL.pdf>.

¹⁰ HIV/AIDS Glossary: Drug Class. AIDSinfo. U.S. Department of Health & Human Services. Accessed May 18, 2022. https://clinicalinfo.hiv.gov/themes/custom/aidsinfo/documents/glossaryhivrelatedterms_english.pdf