

Case Study #2

Dorothy is a 54 year old AA female presenting as a new patient for HIV care. Diagnosed in 1991 she has been in and out of care and on several HIV medication regimens. She acquired the virus either via intercourse or IV drug use. She has a long history of drug (mainly cocaine) and alcohol abuse. She last used in December 2013 and currently in an intensive outpatient treatment program.

She suffers multiple medical problems including diabetes, COPD, arthritis and hyperlipidemia. She is now taking Stribild and while virally suppressed her most recent CD4 level is 47 cells. During her first visit to the clinic her primary complaint is that of oral pain, lesions and tooth pain. On exam she has numerous (>10) plaque-like lesions on her gums and inner lips.

From Case Study Author Tammie Blair, MSN, BCNP

Questions for Case Study #2

1. Is Stribild the best HIV regimen considering her co-morbidities?
2. Most recent labs reveal mild hyperthyroidism and she will undergo thyroid ultrasound this week. How might hyperthyroidism impact her HIV treatment?
3. The patient is already in an intensive outpatient treatment program and lives in a group home where this program takes place. How can we (her medical team) best support her efforts to remain sober?