Hospice Care for Patients With End-Stage HIV/AIDS
What is HIV/AIDS?

Acquired Immunodeficiency Syndrome (AIDS) is caused by Human Immunodeficiency Virus (HIV), which leads to a weakening of the immune system. There is no cure for HIV/AIDS. Without treatment, AIDS is terminal; a patient can be expected to die of an opportunistic infection such as viral, fungal or bacterial infection or a cancer within 12 months. HIV has become a chronic, manageable disease with the advent of the new antiretroviral medications if the patient is able to be compliant in taking the medications.

Symptoms of HIV/AIDS

A person may be HIV-positive for ten years without any symptoms. The symptoms are similar to those of many other illnesses, so a person must be tested to be sure of an HIV diagnosis. A diagnosis of AIDS is determined by a CD4 cell count below 200 cells per cubic millimeter or by an opportunistic infection.

Hospice for HIV/AIDS patients

End-stage HIV/AIDS patients are, in general, younger than the typical hospice patient but are often said to have “early aging,” meaning they suffer from illnesses expected in much older patients: anal or cervical cancer, lymphoma, advanced coronary artery disease, and so forth. HIV/AIDS is what makes them vulnerable to these illnesses.

VITAS assists patients who have:

• Been to the ER one or more times each quarter for the same problem
• Endured hospitalization one or more times each quarter and no longer wish to be hospitalized
• Low CD4 counts and high viral loads but refuse to comply with antiviral therapy

What does hospice offer the patient and family?

Today’s end-stage AIDS patient is likely to be from a minority population, with severe psychosocial issues, disenfranchised and without family support. In a best-case scenario, the hospice team becomes the patient’s advocate, placing the patient appropriately in a care facility and restarting a medication regimen. With help from a chaplain or social worker, the patient might become compliant and no longer hospice appropriate. Even if the patient refuses antiviral therapy, hospice addresses pain and other symptoms and attends to psychosocial issues to improve quality of life at the end of life.

Note that medications necessary to keep the patient comfortable and to improve quality of life are covered by Medicare/Medicaid/Medi-Cal. The hospice physician, consulting with an attending physician and/or family if available, establishes a plan of care that meets that patient’s needs.

Hospice can also take the burden off a family caring for someone with end-stage HIV/AIDS. The hospice team gives the family time to enjoy one another, to
bring estranged members together, to broach difficult topics, to heal and grieve.

**Why choose VITAS?**

VITAS does much more than manage physical condition and symptoms. We offer patients and families greater options and resources to address the enormous need that can accompany a terminal illness. Only hospice can implement a plan of care that provides:

- Emotional and spiritual support
- Medications, medical supplies and equipment related to the diagnosis
- Training so loved ones can assist in caring for the patient
- Grief support for surviving loved ones

**Levels of hospice care**

A pioneer in the field of end-of-life care, VITAS is proud to offer unsurpassed service across all four levels of hospice care:

- **Routine Home Care**—available wherever the patient calls home (residence, nursing home, assisted living community)
- **Intensive Comfort Care** (continuous care)—medical management in the home for up to 24 hours per day when medically appropriate
- **Inpatient Care**—when medical needs cannot be managed at home
- **Respite Care**—allows the patient a brief inpatient admission to provide caregivers a “respite”

**Who pays for VITAS services?**

VITAS accepts Medicare, Medicaid/Medi-Cal, private insurance and other forms of reimbursement for its hospice services.

**Your VITAS care team**

Care is coordinated by a highly trained interdisciplinary team:

- **Physician** who works with the patient’s primary care physician in controlling pain and symptoms
- **Registered nurse** who assesses and manages pain
- **Social worker** who provides emotional support and helps with financial issues and planning
- **Hospice aide** who can help with personal care, light housekeeping, light laundry and occasional shopping
- **Chaplain** who works with the patient’s own clergy and offers spiritual support
- **Community volunteer** trained by VITAS to offer time and companionship
- **Bereavement specialist** who offers grief and loss support and helps with memorial services and other care for loved ones

VITAS Healthcare can help. Call VITAS at 800.723.3233 or visit VITAS.com

All hospice organizations are reimbursed in the same way, so they do not compete on cost. It is the quality of service and spectrum of choices that differentiate one hospice from another.
Download Our Free Hospice Discussion Guide

- Make the right decisions for you and your loved ones
- Get answers to your hospice questions
- Learn how to start the hospice conversation

Find out more at HospiceCanHelp.com

For more information call 800.723.3233

VITAS.com