

**2. Get regular exercise.**

Regular exercise makes your body less insulin resistant and burns extra fat. A regular exercise routine will keep you healthy, looking better, and feeling better. **Always talk to your doctor before you start to exercise.** Start out slowly and add a little each week. Have clear goals. Make exercise something you enjoy or look forward to, and plan on doing this every day. Walking is a good way to exercise.



**3. Take all your medicines every day.**

Do **not** miss a dose, or run out. Get refills before your medicine is gone. If you have any problems, contact your doctor right away.



**4. Keep all your appointments.**

Get your lab work done 1 week before your appointment. Bring your home blood glucose record to the clinic. Your doctor uses the information from these labs and your log book to treat your lipids and diabetes.



**FINAL THOUGHT:** Learn as much as you can about lipodystrophy. Take control of your lipids and diabetes with help from your doctor.

**NOTES**

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**HIV ASSOCIATED LIPODYSTROPHY AND DYSLIPIDEMIA**

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People who have HIV have one more challenge in the game of “Living Longer and Stronger”. Its name is HIV-Associated Dyslipidemia Lipodystrophy (HADL).

**Lipodystrophy** is a long name which means that you can

- lose fat from your arms, legs, thighs, buttocks, or face (called lipoatrophy),
- gain fat in the belly, chest, breast, neck, or upper back (called lipohypertrophy).

### Notes

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**Dyslipidemia** means your blood fats are out of balance. Fat in blood (also called lipids) comes in two types: cholesterol and triglycerides. Cholesterol has 2 two main types:

- HDL cholesterol (‘good’ cholesterol)
- LDL cholesterol (‘bad’ cholesterol).

Triglycerides are harmful if high.

Your doctor will talk to you about how to control these fats. Other health problems you have (heart disease, diabetes) may change your treatment goals.

In HADL, the triglycerides and LDL cholesterol tend to be high and the HDL cholesterol tends to be low. High triglycerides often come from eating **food** that is high in fat. When you eat fat, it stays in the blood much longer than normal. So, if you can avoid or eat less high fat foods like burgers, pizzas, tacos, tamales, potato chips, french fries, fried chicken or fish, butter, cheese, or high-fat salad dressings your triglycerides can be lower.

Medicines to lower blood fats will not work well if you do not control what you eat. Medicines to treat high blood fats may not work well with your HIV medicines.

If your liver tests run high, some of the lipid medicines cannot be used. When the LDL (bad) cholesterol and triglycerides are too high, or the HDL (good) cholesterol is low, you have a very high risk of having a heart attack or a stroke.

Too much fat in the blood can cause insulin resistance. **Insulin Resistance** means the insulin your body makes is not able to work well. It means you have a high risk of having diabetes. The body starts to store fat in muscle cells, and the muscles have trouble using sugar for energy. Just like a key must be able to reach inside a lock to open it, insulin must be able to reach the right spot in a cell to get the sugar inside. The increased fat can keep the insulin from reaching that spot, which blocks sugar from the food you eat from being used.

### HOW TO HELP YOURSELF

