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| ROYAL COLLEGE OF NURSING OF THE UNITED | KINGDOM UK/NP/PZ 53 |
| Rcn Association of Nursing Practice | GRO-C |
| ACQUIRED IMMUNE DEFICIENCY SYNDROME | ~~~~~ `` |
| | AVDS VOT |
| The term acquired immune deficiency syndrome (AIDS) describe patients aged less than 60 years who have: | is used to |
| opportunistic infections | |

and/or

an unusual form of Kaposi's sarcoma (normally a slowly progressive disease of the elderly)

and who have

no recognisable pathological or therapeutic reason for j their severe depression or cellular immunity.

To types of lymphocytes are involved in the immune response: ells, responsible for maintaining humoral immunity (circulating antibodies) and T cells, responsible for cell mediated immunity. Because of abnormal T cell function patients with AIDS are prone to a variety of infections including:

| Viruses: cyt | tomegalovirus; | herpes : | simplex. |
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Bacteria: atypical mycobacteria; Klebsiella pneumoniae; other gram negative aerobic bacilli.

Fungi: Candida albicans.

Protozoa: Pneumocystis carinii; Toxoplasma gondii/

Presenting symptoms include fever, night sweats, anorexia, weight loss, persistent cough, persistent diarrhoea, painless skin nodules and purplish blotches. Enlargement of extrainguinal lymph modes persisting for more than three months, extended lymphademopathy syndrome, may be due to a wide variety of conditions and is not necessarily a precursor to AIDS.

Syndrome has been reported mainly in male homosexuals having a large number of sexual partners, and a small number of haemophiliacs and intravenous drug abusers.

It was stated in a House of Lords debate on 14th July 1983, that so far only 14 cases in the United Kingdom have been reported to the Communicable Disease Surveillance Centre. Twelve patients were homosexual, one a drug abuser, and one patient had haemophilia.

Factor VIII

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There is no evidence that health workers who care for haemophilia patients can become infected by using Factor VIII, but when preparing and giving an injection contact with aerosol spray should be avoided and the usual precautions which are taken when preparing antibiotics and other drugs should be observed. Protective clothing, including gloves, facemasks and goggles, should be available.

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titis B. Vaccine

The vaccine is made from the blood of a person who has had Hepatitis B. There is no evidence to suggest AIDS has been contracted through Hepatitis B vaccine. Health workers who are offered Hepatitis B vaccine should be given full information about the vaccine and left to decide whether or not they wish to avail themselves of it.

Precautions to be taken

Most employing authorities have stated policy on precautions to be taken by staff when caring for sufferers or suspected sufferers of Hepatitis B. The same precautions should be taken when dealing with a patient suffering from suspected AIDS, and should include avoiding contamination of the skin and mucous membranes with blood, blood products, secretions and excretions of AIDS sufferers or suspected sufferers. Avoid puncturing the skin, wear gloves when handling specimens, emptying bedpans or ttles or attending to the patient. Gowns and where necessary oggles should be worn. All specimens should be labelled so that extra care is taken in their handling. Soiled articles should be dealt with separately. Needles and syringes should be disposed of in specially marked containers.

Nurses who are handling blood or blood products should be aware that risk is greater during the mixing of blood products in order to reconstitute them ready for administration. Facilities should be available for accidental contamination including eyewash and protective clothing. Protective clothing should include gloves, sleeves, face masks and goggles.

AIDS is under active surveillance in the USA, in Europe, and by the PHLS Communicable Disease Surveillance Centre in the UK. Ron members will be advised if and when any further information is available.

I should like to thank Dr. S. Young for her help in compiling

Margaret Lee Professional Officer Rcn Association of Nursing Practice

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REMINDER FROM THE LABOUR RELATIONS DEPARTMENT

The Health and Safety at Work etc. Act 1974 placed especific duties upon employers.

Particular note should be made of sections 2(2)(a), 2(2)(b) and 2(2)(c) of the Act.

Section 2(2)(a) "the provision and maintenance of pl ant and systems of work that are, so far as is reasonably practicable, safe and without risks to health."

Note particularly 'systems of work that are safe and without risks to health.'

A 11 thought out policy for the total care of patients suffering from infectious or contagious diseases needs to be implemented. This policy needs to extend beyond the nursing policy to include all who may have any form of contact with the patient, specimens or waste products from the patient. This aspect is further :e-enforced by Section 2(2)(b) which states:

'arrangements for ensuring, so far as is reasonably p_racticable, safety and absence of risks to health in connection with the use, andling, storage and transport of articles and substances."

Note also Section 2(2)(c) which states:

The provision of such information, instruction, training and upervision as is necessary to ensure, so far as it remasonably racticable, the health and safety at work of his employees."

re all people coming into contact with the patient given enough nformation and training?

emember it is no good having policies, procedures or rules aless there is supervision to ensure they are adhered to. ales will only be followed if people understand the reason for nem.

>hn Goodlad
.bour Relations Officer
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