

Psychiatric Disorders Management Studies in AIDS Patients

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EDITORIAL

Patients with HIV are at risk of acquiring mental health issues. Mental health issues in HIV-positive people might have a negative impact on public health. Psychopathology, such as depression, might enhance risky sexual behaviour and the risk of HIV transmission. Patients with mental health issues are more likely to develop HIV. In comparison to the general population, HIV-positive people have a higher chance of acquiring mental health disorders. Mental health difficulties in HIV-positive individuals have a detrimental impact on their therapy, adherence to treatment, and prognosis. Other chronic conditions, such as diabetes and chronic obstructive lung disease, have shown similar consequences. Patients with HIV are more likely to experience shame, stigma, and prejudice, which can lead to mental health issues. Mental health issues in HIV-positive people might have a negative impact on public health.

Mental health issues become more prevalent at certain periods of HIV infection, such as shortly after being HIV-positive or after many years of living with HIV. Despite the fact that mental health concerns are often misunderstood by professionals, some HIV-infected people with mental health issues will seek treatment at a mental health facility. The demographic parameters and severity of the psychopathology must be determined in order to establish an optimum treatment strategy for this group of individuals. Psychopathology is more common in HIV-positive individuals than in HIV-negative controls. Because of the impact of a lifelong sickness compounded by stigma and prejudice, these symptoms are more severe. Although HIV-positive individuals had greater suicidal thoughts, they did not report making more suicide attempts. HIV-positive individuals consumed considerably more standard glasses

of alcohol per session than non-infected patients. The two most prevalent diagnoses were depression and dysthymic disorder. Mood disorders are the most frequent and serious mental illnesses reason for psychiatric referral among HIV-infected patients.

The most prevalent diagnosis among HIV-positive people is depression and dysthymic disorder. HIV-positive individuals had higher levels of rage, guilt, and suicidal thoughts. Habitual drug use as well as personality qualities like neuroticism and lack of conscientiousness are all risk factors for HIV infection and dissemination. HIV-positive gay males are more likely to suffer from depression or dysthymic disorder throughout their lives than the general population. In HIV-positive people, untreated mental health issues can lead to significant complications. Mental health concerns in HIV-positive individuals should be recognised by general practitioners. Psychiatric symptoms linked to HIV documented examples of atypical psychosis, manic symptoms, depression, and dementia with substantial psychomotor slowness and dementia, symptoms that were previously attributed to the understandable emotional suffering produced by HIV diagnosis, including CNS lesions or neoplasms. Mental illness is linked to a reduced chance of obtaining antiretroviral therapy in HIV-positive people.

Depression has a considerable detrimental influence on quality of life, antiviral adherence, and is a major risk factor for suicide. The treatment of mental health issues and neuropsychiatric symptoms has become a standard element of HIV treatment. Close collaboration among a multidisciplinary team of knowledgeable health professionals and, most importantly, the woman herself can improve both maternal and infant outcomes. Careful systematic research is needed for many aspects of HIV in pregnancy.

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