

# because you asked

## Swallowing

**A friend of mine is having difficulty swallowing her pills. Do you have any suggestions to make it easier for her to take her medications?**

**Pharmacist Tina Ustad answers:** Your friend isn't alone. Some of the antiretroviral medications (ARVs) available today are quite large and can be a challenge to swallow. Some people may have temporary difficulties because of mouth and throat infections such as thrush while others may have more permanent issues. Regardless, the first step would be to talk to your pharmacist and see if any of the medications are available in a liquid form. 3TC, abacavir, AZT, ritonavir and lopinavir are all currently available in tablet, capsule and liquid form. Some medications, such as nevirapine liquid, aren't readily available but may be obtained under some circumstances with the completion of special paperwork. Just a warning: your friend should always ask to do a taste test before committing to a large supply as not all liquid medications have a pleasant taste.



If your medication is a tablet and isn't available in liquid form, you might be able to crush it and mix it into a small amount of food. If the tablet can't be crushed, you could try splitting it in two to make swallowing easier. Special pill splitter devices are available at your local pharmacy and will provide a clean cut to the tablet. Attempting to cut a tablet with a knife can be difficult.

Some medications are available as capsules, which can be opened and sprinkled on a small amount of soft food such as applesauce and swallowed. Of course, this is only good for medications that can be taken with food. Videx EC capsules (ddi) have to be taken on an empty stomach in most circumstances.

Your friend is likely to be having difficulty swallowing other non ARV medications as well. These

often come in other forms such as patches, lozenges, sublingual tablets (which dissolve under the tongue), injections (long acting or under the skin), vaginal and/or rectal suppositories and creams. I encourage your friend to talk to her pharmacist to see what alternatives are available that would best meet her needs.

## Vision

**I started to see spots in front of my eyes. Should I worry about CMV retinitis?**

**Dr. Jean Deschênes answers:** A cotton wool spot, which looks white and fluffy, is caused by a circulation problem in the retina, a thin, light-sensitive tissue at the back of the eye. This may also cause small blood spots or bleeding. These symptoms can be caused by an AIDS-related infection, but can also occur with hypertension and diabetes.

The eye is one of the organs most commonly affected by AIDS. Eye problems can occur in as many as 75% of people with a CD4 count lower than 250 and often appear in the early stage of AIDS.

People with AIDS can contract infections from several opportunistic viruses, bacteria, fungi and protozoa, which would not usually cause infection in healthy persons. Cytomegalovirus (CMV) is the kingpin of all these infectious agents. CMV retinopathy develops in 15% to 25% of people with AIDS with a low CD4 count. CMV is everywhere and doesn't cause disease in healthy people, though it can "reactivate" at a later date, especially in people whose immune systems can't fight back.

CMV can infect any part of the body. When it infects the retina, it causes CMV retinitis, which can permanently destroy retinal cells. Floaters may be the earliest warning sign of CMV retinitis. They appear as small dark specks that move slowly across your field of vision.

CMV retinitis can usually be diagnosed in an eye examination. Several drugs are available which can stop this retinal infection. These drugs can't kill the CMV, but they can prevent a proliferation of the virus within the cell. **R**

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**Is there something  
you need to know?  
Please send your questions to:  
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