The views expressed in any guidance given are of a general nature and are volunteered without recourse or responsibility upon the part of the Diving Medical Advisory Committee, its members or officers. Any person who considers that such opinions are relevant to his circumstances should immediately consult his own advisers.
skin, external ear and wound infections are common in saturation divers, these respond rapidly to normal treatment.

6 Once somebody is known to be HIV positive, a decision to commence therapy is made dependent upon an assessment of the level of immune damage which is currently measured by the CD4 lymphocyte cell count. Once on therapy, individuals require regular specialist assessment to ensure the treatment is working. Effective therapy leads to a fall in the HIV blood level to an undetectable level at which point the patients would be regarded as a very low infection risk to others. Patients on effective treatment would be expected to have good health, although they may experience some drug side effects. A diver known to be HIV positive will continue to require specialist care and decisions regarding fitness to work should be made with specialist advice. HIV positive status does not represent a contraindication to work as a diver including saturation diving. There is no information at present to indicate that this represents a risk to other diving personnel. However, the requirement for specialist medical care may present logistical problems and the development of the AIDS illness is likely to be incompatible with diving.

7 The number of HIV positive individuals in the general population continues to increase. Risk factors for transmission have been identified. Normal daily contact with an infected person is safe and communal handling of objects such as crockery, cutlery, food, towels, clothes or furniture does not represent a risk. A risk of transmission is present through open wounds that bleed, but normal procedures based on the assumption that all bodily fluids are potentially infectious are required to be adequate and appropriate in order to provide protection from other blood borne viruses.

8 Mandatory testing for HIV is not indicated for commercial divers or others in the industry. Diver training should include education about blood borne infectious diseases including guidance on hygiene measures. Divers who present with suspicious symptoms should be offered testing, where appropriate with counselling which covers both the illness and the impact on their work.

9 DMAC encourages divers who are aware of their positive HIV status to discuss this with their medical advisers.