Lipo Handles

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Sky-high levels of blood fats and reduced insulin sensitivity in some HIVers on HAART are being fought with drugs, but so far the results are a mixed bag. The fear that elevated cholesterol and triglycerides could lead to heart disease and pancreatitis (a sometimes-fatal inflammation of the pancreas) makes the use of lipid- lowering (blood fat–reducing) compounds very appealing.

The problem is—you guessed it—interactions with protease inhibitors (PIs). David Zucman, MD, of L'Hopital Foch in Saresnes, France, reports that two months of atorvastatin (Lipitor) pills yielded drops in patients' cholesterol from a baseline average of 336 milligrams/decaliter to 223 mg/dl, a significant reduction. But in those on a ritonavir (Norvir) and saquinavir (Fortovase) combo, blood levels of the drugs also significantly decreased. In such a short study, the long-term impact of reduced PI levels can't be seen, but given the risk of inducing drug failure, be careful what you mix.

Meanwhile, treating insulin resistance—long known as one factor in non-medication-related lipodystrophy—is now being tried for fighting the HAART-induced kind. In a six-month placebo-controlled trial, French researcher Thierry Saint-Marc, MD, found that when metformin (Glucophage), an insulin-sensitizing agent, was given to lipo sufferers, waist-to-hip ratios and abdominal fat declined. Although the improvements were only moderate and plateaued after two months, they remained for the duration. Since lipo symptoms usually only get worse over time, that's a nice achievement for a drug. But don't make plans to wash down those meds with the ol' Dom Perignon—side effects can some-times include vitamin B-12 deficiency and lactic acid buildup, a potentially serious condition.

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