Acute HIV Often Has Symptoms, But Testing Is Best Diagnostic

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Various symptoms such as vomiting and swollen lymph nodes are linked to early HIV infection, but they are not a foolproof sign, so frequent testing is ideal for those at risk. Publishing their findings in a special issue of The Journal of the American Medical Association (JAMA), researchers conducted a meta-analysis of 16 studies including data on nearly 25,000 people and 1,253 early (also known as acute) cases of HIV, defined as the first six months since exposure to the virus. The studies covered 1981 to May 2014, and all included comparisons of various symptoms and signs between those with acute infection and those with no HIV infection.

A constellation of symptoms—defined as an issue a patient reports to a doctor—were linked to an increased likelihood that the individual recently contracted HIV as opposed to being HIV negative. Genital ulcers increased the likelihood 5.4-fold, weight loss 4.7-fold, vomiting 4.6-fold and swollen lymph nodes 4.6-fold. The lack of a recent fever was linked to a 26 percent reduced likelihood of an early case of HIV. Signs of swollen lymph nodes, when detected in a physical exam (as opposed to just reported by the patient), was associated with a 3.1-fold increased likelihood of early HIV. The absence of swollen lymph nodes as detected in an exam was linked to a 30 percent decreased likelihood of acute HIV.

When analyzing data from studies that considered combinations of symptoms—the total number of symptoms in question in the respective studies ranged from four to 17—the researchers found that those individuals who had none of the symptoms had a 53 percent reduced likelihood that they were recently infected with the virus when compared with HIV-negative people.

The researchers concluded that a clinical exam has shortcomings when trying to detect or rule out early cases of HIV, a fact that “highlights the importance of routine testing for HIV infection among adults.”

To read the JAMA abstract, click here.

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