



Aging With HIV Comes With Other Health Concerns

A large study found that heart disease and mental health conditions are driving use of multiple medications as people age.

November 10, 2021 By [Heather Boerner](#)

Like everyone else as they age, people [aging with HIV](#) develop [more chronic conditions](#) and start to take more medications. Data presented at [IDWeek 2021](#) suggest that the biggest drivers of so-called multimorbidity and polypharmacy are increases in heart disease and mental health conditions. And that means clinicians need to work closely with people living with HIV to ensure that medications for other conditions don't interact with antiretroviral therapy.

Princy Kumar, MD, of Georgetown University Medical Center and colleagues, mined the Optum Research Database, a database of adults living with HIV who received their prescriptions through private insurers or Medicare Advantage plans. They included people who received at least one prescription for HIV medications between 2014 and 2018. Then they searched patient charts for diagnoses of other health conditions and use of medications for other conditions, both in the 90 days before the first prescription for antiretrovirals and in the year after.

Over time, the number of people in the cohort grew from 14,222 in 2014 to 20,249 in 2018. The majority of participants were white men, but the proportion of women and Black people increased over time. Most had private insurance rather than Medicare Advantage—though that also changed over time, as the cohort aged.

The percentage of people using antiretrovirals increased from less than half (48%) in 2014 to two thirds (65%) by 2018. The proportion using integrase inhibitors rose while those using non-nucleoside reverse transcriptase inhibitors fell.

When the researchers looked at other chronic health conditions, those increased as well, from just a quarter of people to more than a third having at least one other diagnosis. The percentage of people using multiple medications to manage those conditions was already high when the study started, at 70%. By the end of the study, 76% were using multiple medications.

High blood pressure, elevated cholesterol and mental health conditions were most common in 2018, at 34%, 30% and 25%, respectively. But almost all other conditions measured—including type 2 diabetes, cardiovascular disease, chronic kidney disease, gastrointestinal conditions,

chronic obstructive pulmonary disease, osteoporosis, overweight and obesity, and substance use disorders—also increased over time. The only exceptions were liver disease and cancer, which stayed relatively flat.

Likewise, use of medications for comorbidities also increased significantly, including cardiovascular drugs, medications for anxiety and depression, diabetes medications, proton pump inhibitors, respiratory medications, osteoporosis drugs and steroids.

These data shouldn't be taken as the last word on the increase in multimorbidity and polypharmacy, however, said Kumar, noting that the study doesn't represent all people living with HIV, who often receive care and prescriptions through Medicare, Medicaid or AIDS Drug Assistance Programs.

Click here to read the [study abstract](#).

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