



Among Those With HIV, Additional Health Problems Occur in Six Clusters

Researchers analyzed data on people living with HIV in the United Kingdom, Ireland and the Netherlands.

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The additional health problems, known as comorbidities, that people with HIV experience fall into six clusters, according to an analysis of two groups of Western European individuals that skewed older, [aidsmap](#) reports.

Presenting their findings at the 2019 Conference on Retroviruses and Opportunistic Infections (CROI) in Seattle, researchers analyzed data from two cohort studies to parse patterns behind the existence of comorbidities among HIV-positive individuals.

One cohort of people with HIV was known as POPPY and included 699 people age 50 or older and 374 younger individuals who were receiving medical care in the United Kingdom and Ireland. Eighty-five percent of the cohort members were male, and the median age was 52 years old. Seventy-six percent were men who have sex with men (MSM).

The participants contracted HIV a median of 13.2 years prior. A total of 97.5 percent of them were on antiretrovirals, and 89.9 percent had a fully suppressed viral load. The older bloc had a median age of 57 years old and had been living with HIV for a median of 15.8 years. Otherwise, the older and younger groups had similar demographic characteristics.

The second cohort was called AGE_{HIV} and included 598 people living with HIV who were 45 years old or older and receiving medical care in the Netherlands. They had similar demographics to the POPPY cohort.

In the POPPY cohort, the most common comorbidities included gonorrhea (seen in 42.6 percent of the cohort members), syphilis (30.4 percent), depression (32.4 percent) and high blood pressure (27.3 percent). In the AGE_{HIV} cohort, the most common comorbidities were high blood pressure (43.1 percent), osteopenia and osteoporosis (42.6 percent), lipodystrophy and lipoatrophy (32.1 percent) and candidiasis (31.9 percent). The participants in each cohort had a median of five comorbidities.

Analyzing the comorbidities to determine which are more likely to co-occur in individual cohort

members than might be expected by chance, the researchers identified the following six clusters:

- Cardiovascular disease, including angina, coronary bypass surgery, heart attack, heart failure, high blood pressure, peripheral vascular disease and end-stage kidney disease
- Sexually transmitted infections, including gonorrhea, lymphogranuloma venereum, chlamydia and hepatitis C virus
- Mental health, including depression, anxiety and panic attack
- Cancers, including blood cancers, skin cancer and solid organ cancer
- Metabolic conditions, including abnormal blood lipids, lipodystrophy and high blood pressure
- Chest and other infections, including cytomegalovirus, pneumonia, dizziness and vertigo, asthma and bronchitis and chronic obstructive pulmonary disease, and chest infection.

To read the aidsmap article, [click here](#).

To read the study abstract, [click here](#).

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